

New York Gastroenterology & Hepatology
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Upper Endoscopy Procedure:

Please follow these instructions in preparation for your endoscopy exam. Please call office 718-412-3445 with any question you may have.

Please stop all blood thinner medications 5-7 days prior to procedure.

Stop all **ASPIRIN, ADVIL, ALEVE**, as well as any **IRON**, being taken. If needed, you may take **TYLENOL** for pain only.

The day before your procedure:

Do not Eat or Drink after 10:00pm the night before your procedure.

On day of exam:

No solid food to eat or drink. No smoking (i.e., cigarettes, marijuana, vapes), chewing gum or THC gummies edible.

You will be charged \$100.00 cancellation fee if you do not cancel 3 days prior to the procedure or if you do not present yourself to your procedure.

Remainder: You may not drive yourself back home from procedure site. You must have someone with you to accompany you on that day. Escort must be over the age 18.

Please arrive early and on time to facility as instructed. You must have your insurance card, Photo ID and an escort depending on facility location.

Date: _____ Time: _____

Location: _____