



PREMIER GASTROENTEROLOGY

CONSULTANTS

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ERCP INSTRUCTIONS

Place: _____ Date: _____ Time: _____

You have been scheduled for an upper endoscopy to examine your esophagus, stomach and duodenum.

- Please make arrangements for someone to drive you home after the procedure, as you will receive conscious sedation.
- For any reasons, if you cannot keep this appointment, please call our office at least 24 hours in advance.
- If you should have any questions regarding the procedure or its preparation please call our office between 9am to 4 pm.

Please adhere to the following instructions:

Day before the procedure:

1. Lunch; Regular diet, Dinner – liquids only
2. After midnight: Do not drink or eat anything except medications.

Day of the procedure:

1. Take all your diabetes, blood pressure medications with small sips of water as routine.
2. Please discussed with your physician if you are taking any blood thinners such as; Coumadin, Xarelto, and Pradaxa.