

CENTRAL FLORIDA GASTROENTEROLOGY
a division of internal medicine specialists

PATIENT: _____

You have a COLONOSCOPY at _____
on _____. You must report to the facility by _____ AM/PM.

PLEASE NOTE:

A) YOU MUST HAVE SOMEONE TO DRIVE YOU TO AND FROM THE FACILITY. Medications cause drowsiness and you will be unable to drive! Please plan on being at the surgical center for at least 2 hours.

B) Follow individualized instructions for use of Lovenox, Heparin, Coumadin and Plavix per your cardiologist or Dr. Bhaskar. Do not stop aspirin. _____

C) DIABETICS!! Take your pills as usual. If you take insulin take HALF the usual dose on the day of the test if it is scheduled/indicated.

The day before the test: _____

1. Stay on a clear liquid diet ONLY. Drink plenty of fluids to prevent dehydration.
2. At noon take the Dulcolax/Bisacodyl tablets with water. DO NOT chew or crush.
3. After your first bowel movement or 4 hours start drinking the bowel prep solution. Follow the mixing instructions on the bottle. The faster you drink the prep the better. If you get nauseated take a 15 minute break. **YOU MUST DRINK THE ENTIRE BOTTLE!! If your prescription was changed to the gallon generic alternative you will not have any tablets.** You will begin drinking the prep at 4:00 pm.
4. You may continue the clear liquid diet until midnight. **NOTHING BY MOUTH AFTER MIDNIGHT EXCEPT SCHEDULED MEDICINES WITH A SIP OF WATER ONLY!!!!**
5. A copy of your test results will be sent to your doctor. If a biopsy was taken you will need a follow up visit to go over your results.

PLEASE NOTE THAT A LOT OF EFFORT GOES INTO SCHEDULING A TEST INCLUDING STAFF TIME, CLEARANCE FROM YOUR INSURANCE COMPANY ETC. A "NO SHOW/CANCELLATION" FEE OF \$100 WILL BE CHARGED IF YOU FAIL TO SHOW UP OR CANCEL YOUR PROCEDURE WITH LESS THAN 48 HOURS NOTICE. THIS FEE IS NOT COVERED BY YOUR INSURANCE.

Please call our office with any questions. Inform the nurse if you have problems or cannot complete your prep. After hours an answering service is available. Call the main number and follow the prompts to contact the on call doctor. 407-851-5600.

If you need to cancel or reschedule it needs to be done with **Heather ONLY!!** Please leave a message with the best contact number if you do not reach her directly.
407-851-5600 ext. 1035 or email hstrunk@imsmed.org

Sudhir K. Bhaskar MD Gastroenterologist
3885 Oakwater Circle, Orlando, FL 32806
9430 Turkey Lake Road, Ste 206, Orlando, FL, 32819
407-851-5600

PLEASE READ YOUR INSTRUCTIONS TO FIND THE FACILITY YOUR PROCEDURE IS SCHEDULED AT.

Citrus Surgical Center

Directions to the Citrus Medical Center - 2861 S. Delaney Ave., Suite B, Orlando, FL

From Oakwater Circle: Turn right onto Orange Avenue. Turn right at the light at Pineloch Avenue. Turn left at the next light onto Delaney. Turn right at the Mercantile Bank into Citrus Medical Center next to Family Medical Center.

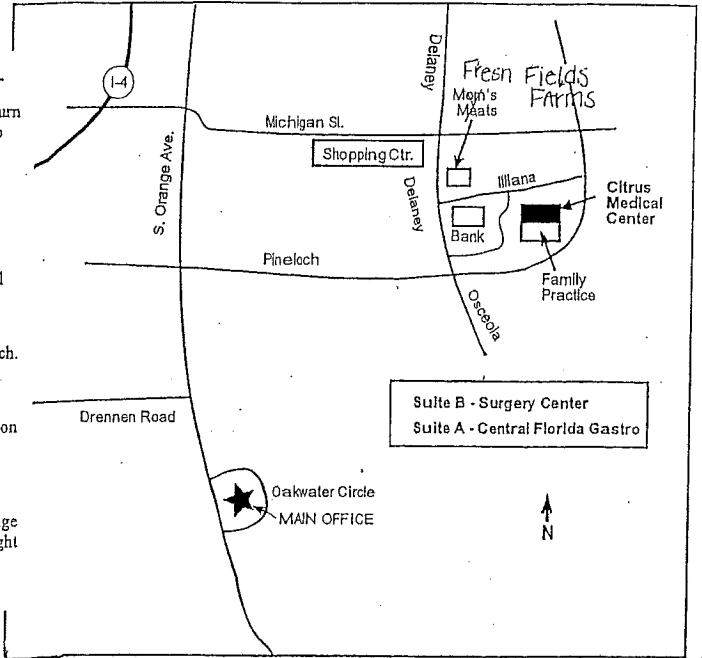
From North Orange County: Take I-4 West to Michigan St. Turn left onto Michigan. Go through intersection at Orange Ave., turn right at Delaney. Turn left at Mercantile Bank into The Citrus Medical Center.

From South Orange County: Follow Orange Ave. north, past Holden to Pineloch. Turn right onto Pineloch. Turn left at next light onto Delaney. Turn right at the Mercantile Bank into the Citrus Medical Center.

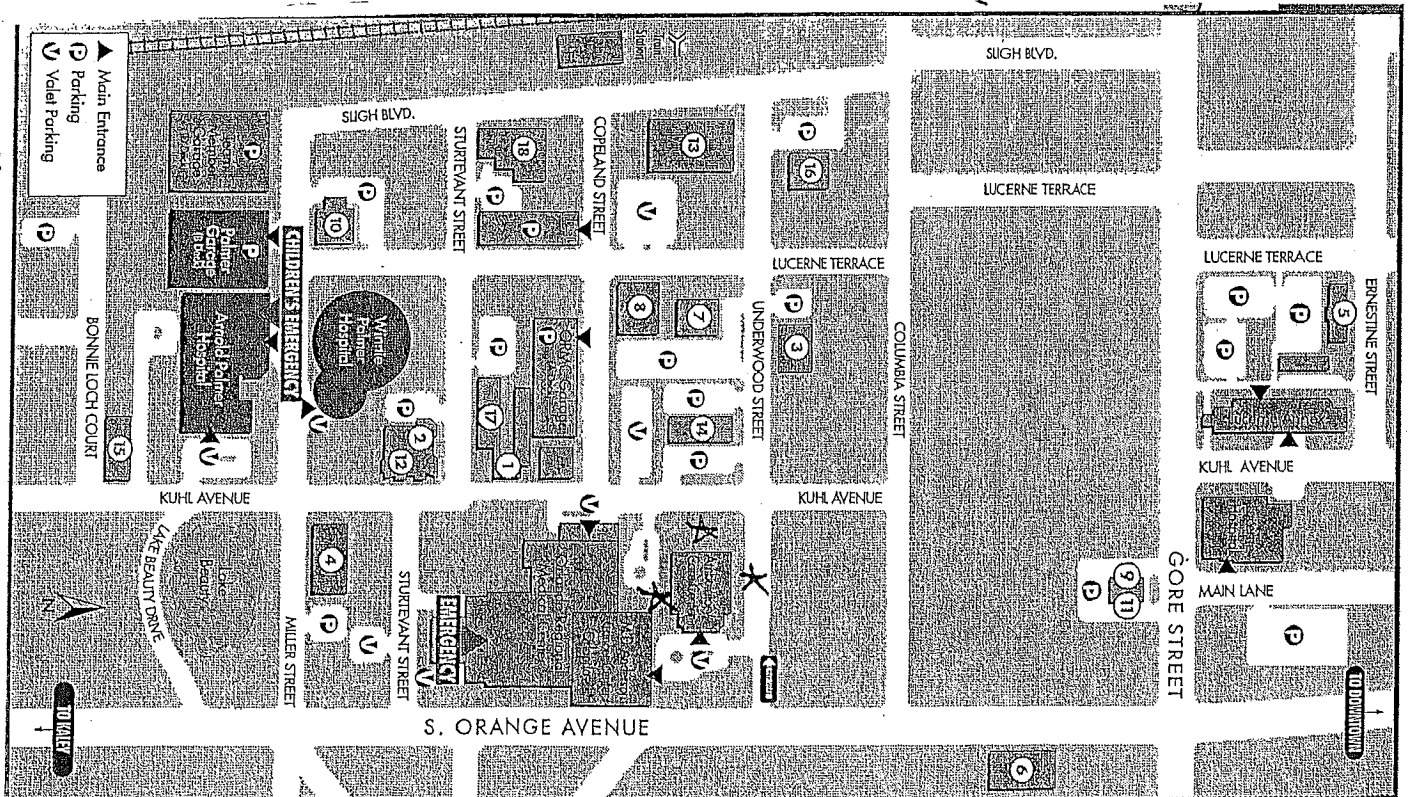
From Pine Hills: Take Colonial Dr. (Hwy 50) to Orange Ave. Turn right onto Orange, continue south on Orange through downtown, past ORMC. Turn left onto Michigan St., and right at the next light onto Delaney. Turn right at Mercantile Bank into Citrus Medical Center.

From East Orlando: Take Colonial Dr. (Hwy 50) to Orange Ave. Turn left on Orange, continue on Orange through downtown past ORMC. Turn left onto Michigan St. and at the next light onto Delaney. Turn right at Mercantile Bank into Citrus Medical Center.

105558 (01/04)



ORMC ACC Outpatient Center 22 W Underwood St



IMPORTANT INFORMATION

FAILURE TO CANCEL WITHIN 48 HRS OR NO-SHOW WILL RESULT IN A \$100.00 FEE THAT IS NOT COVERED BY YOUR INSURANCE!!!

Please make sure that you contact your insurance company or check your benefits booklet as soon as possible to verify your coverage and co-pays for your outpatient procedure. Your colonoscopy/endoscopy are considered and billed as outpatient procedures. They are done at an outpatient surgical center or hospital NOT at the doctor's office. Call the customer service number on the back of your card for further questions. If a referral is required our office will obtain it from your PCP.

Unless prior arrangements are made all co-pays, co-insurance and/or deductibles are due in full on the day of your procedure. Please call Citrus Surgical for any questions pertaining to this at 407-472-5095. These charges are in accordance with your insurance plan requirements. If you need to make payment arrangements they can assist you.

Please note that there will be separate charges, one for the facility, the doctor, anesthesia and one for the biopsy if there was one taken.

If you have questions regarding the Anesthesia provider AHP please contact them at 1-866-951-5247.

If a biopsy or polyp was taken during your procedure you will receive a bill from the pathology facility your insurance required it to be sent to for evaluation. If you have questions please contact the customer service number listed on your bill.

Your insurance company may ask for the following billing codes.

Colonoscopy CPT code: 45380

Endoscopy CPT code: 43239

Citrus Surgical Center facility code: 6F3

PLEASE DO NOT CALL HEATHER WITH THESE QUESTIONS SHE CANNOT ANSWER THEM. YOU WILL NEED TO CALL THE PROVIDERS LISTED ABOVE FOR ASSISTANCE.