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## BRAVO PH MONITORING INSTRUCTIONS

(WITH PROTON PUMP INHIBITOR)

Patient's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Procedure Perform By: \_\_\_\_\_

Hospital: \_\_\_\_\_ Date: \_\_\_\_\_

Check In Time: \_\_\_\_\_ AM/PM

1. Continue your current acid suppression medication \_\_\_\_\_ before and during this exam.
2. Do not take **over the counter** Antacids (**TUMS ,MAALOX** and **GAVISCON**) 24 hours before the procedure.
3. **NO ASPIRIN, VITAMIN E, NON-STEROIDAL ANTI-INFLAMMATORY MEDICATIONS ( ADVIL, ALEVE, IBUPROFEN, MOTRIN, NAPROXYN, EXEDRIN AND ANACIN), OR BLOOD THINNERS SUCH AS TICLID (DIPYRIDAMORE) or PLAVIX** for one week (**7days**) prior to the procedure.
4. **COUMADIN** should be stopped for five (**5**) full days prior to the procedure.
5. You are not allowed to drive yourself home after the test. Someone **MUST** be there to drive you home before the test begins.
6. Nothing to eat or drink from midnight on the night before the procedure.
7. Leave all jewelry and valuables, such as watches, rings and earring at home.

Procedures that are cancelled or rescheduled within 7 calendar days of the scheduled date will incur a \$25 fee. In the special event that a patient is scheduled within 14 days of the procedure, last minute cancellations will not be subject to the cancellation fee.

\_\_\_\_\_ Please initial here acknowledging you have read and understand above instructions.