

## WELCOME

We are pleased to welcome you as a patient at our facility. We are a non-hospital based outpatient center dedicated to providing the highest quality endoscopic services in a comfortable atmosphere.

Our staff wants to make your visit as pleasant as possible. The center is a place where patients receive quality care and then return to the comfort of their home the very same day.

Respect for your individual needs is a concern of ours and by completing the questionnaire given to you at the end of your stay, you will provide us with valuable feedback regarding your experience.

You will find the atmosphere at the center more personalized than a traditional hospital environment. In this reassuring setting, you will receive individual attention from a caring and highly skilled staff of doctors and nurses.

The following physicians practice at the center.

Dan Behin, MD	Neil D. Herbsman, MD
Henry J. Kat, MD	David F. Stein, MD
Amnon Gotian, MD	Sammy Ho, MD
Isadore P. Gutwein, MD	Ira Tepler, MD
Albert Kramer, MD	Harvey J. Rosenberg, MD
Jeremy Gutwein, MD	
Daniel S. Reich, MD	
Ian Harnik, MD	



### ADVANCED ENDOSCOPY CENTER

5500 Broadway, Suite A (2nd Floor)  
Bronx, NY 10463  
(p) 718.548.7900 (f) 718.548.8900

PATIENT

# Information

*Instructions for Your  
Endoscopic Procedure*



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## PRIOR TO YOUR PROCEDURE

**Help us take better care of you.** Prior to your procedure, a nurse from the center will call you to review any questions you may have about your visit to the center.

**Leave all jewelry and valuables at home.** Please bring your insurance card and your eyeglasses. The endoscopy center cannot take responsibility for safeguarding your personal items.

**Make arrangements for someone to escort you home.** Your escort will need to be 18 years or older and should plan on staying with you for the length of time you will be at the center. The length of time you will be at the center is approximately 2 hours from the time you check in to the time of your discharge. Please limit the number of persons you bring with you to the center to one.

**Please make arrangements for childcare in advance.** The endoscopy center reception area and recovery room area are not designed to accommodate small children.

**If you have any questions** regarding your medication prior to the procedure, please contact your physician's office.

## DAY OF YOUR PROCEDURE

**Please check in at the reception desk** 30 minutes prior to your scheduled check-in time.

**Bring your insurance card.** Co-pays are expected at the time of service. We will accept cash, check, credit card (Visa, Master Card and American Express) or debit card.

**Bring your medication(s)** or list of the medication(s) and dosages you are currently taking.

**It is very important for us to know** if you have any allergies, especially an allergy to rubber (latex).

**If you have a pacemaker** please bring your manufacturer's ID card.

**If you have sleep apnea** and use a C-PAP machine, please bring it with you if you are scheduled for a colonoscopy.

Patient Name: \_\_\_\_\_

Procedure Name: \_\_\_\_\_

Doctor(s) performing procedure:

\_\_\_\_\_  
\_\_\_\_\_

Procedure Date: \_\_\_\_\_

Check-in time: \_\_\_\_\_

## AFTER YOUR PROCEDURE

**Average Recovery Time** is 30-45 minutes for most procedures.

**Your escort will need to come into the recovery room** to listen to your discharge instructions, sign the written instructions and escort you home.

**We would prefer your escort stay at the center for the duration of your visit.** Your escort will need to be available to hear the discharge instructions and accompany you home. Again, it is approximately 2 hours from the time you check in to the time of your discharge.

**It would be best if someone could stay with you** at home or check on you following your procedure.

**Patients will remain in the recovery area** until they are ready for discharge.

**At discharge** you may take any mode of transportation home if accompanied by a responsible adult.