

Personalized Endoscopy Preparation Instructions

Dear [Patient's Name],

We are preparing for your upcoming endoscopy scheduled on [Date] at [Time]. Please follow these personalized instructions based on your specific condition:

For [Specific Condition]

1. Begin a clear liquid diet starting at [Date/Time].
2. Avoid red and purple liquids as they can interfere with results.
3. Take [Medication Name] as prescribed on the day before the procedure.
4. Drink [specific amount] of the bowel preparation solution, starting at [Date/Time].
5. Continue to drink clear liquids until [Specify Time] the day of the procedure.
6. No solid food is allowed after [Specify Time] the day before the procedure.

Medication Instructions

Please consult with your physician regarding any medications you should continue or hold prior to your procedure.

Day of Procedure

Arrive at the facility by [Arrival Time] and bring a responsible adult to drive you home after the procedure.

If you have any questions or concerns, do not hesitate to contact our office at [Office Phone Number].

Thank you, and we look forward to seeing you.

Sincerely,

[Your Name]

[Your Title]

[Clinic/Hospital Name]

[Contact Information]