

LEO TREYZON, M.D., INC.

CEDARS-SINAI MEDICAL OFFICE TOWERS
8631 W. THIRD ST., SUITE 1015-East
LOS ANGELES, CALIFORNIA 90048
PHONE 310-652-4472
FAX 310-358-2266
GASTROENTEROLOGY AND HEPATOLOGY

PATIENT INSTRUCTIONS UPPER GASTROINTESTINAL ENDOSCOPY

Patient: _____ is scheduled for: Endoscopy

Date: _____ Arrival Time: _____

Please have **NOTHING TO EAT OR DRINK AFTER MIDNIGHT** No breakfast!!

On the morning/afternoon of the procedure, go to:

Cedars Sinai Medical Center South Tower, 7th Floor registration desk #7511

There is 2 hours free parking in the building, with a charge after that.

IMPORTANT: CALIFORNIA LAW PROHIBITS THE FACILITY FROM DISCHARGING YOU TO PUBLIC TRANSPORTATION OR TO YOURSELF AFTER YOUR PROCEDURE.
PLEASE MAKE SURE YOU HAVE SOMEONE WHO CAN PICK YOU UP.
YOUR PROCEDURE WILL BE CANCELLED IF YOU DO NOT HAVE A RIDE HOME.