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CAPSULE ENDOSCOPY

DAY BEFORE THE PROCEDURE: _____

1. Clear liquid diet all day.

Examples: Coffee, tea, soda, Gatorade, apple juice, white grape juice, Jell-O, popsicles, chicken, beef or vegetable broth, hard candy, etc.

NO SOLID FOODS, NOTHING RED IN COLOR, AND NO MILK PRODUCTS.

NOTHING TO EAT OR DRINK AFTER MIDNIGHT.

DAY OF THE PROCEDURE: _____

Arrive at: _____ and return at: _____

1. **Do not take any medication two hours prior to your procedure. You may resume taking medications four hours after swallowing the capsule. Please discuss any questions or concerns with the nurse.**
2. **CLEAR LIQUID DIET ALL DAY UNTIL PATIENT RETURNS TO THE OFFICE AT 4:30PM.**
3. Patient should not lift weights or exercise during the 8 hour period following capsule swallow.
4. Patient may drive, walk, sit, lie down, or return to work as long as none of these activities requires excessive physical movement or exposure to an unsuitable environment.
5. Please check every 15 minutes to make sure the blue light is still blinking on the data recorder. If it stops at anytime, please contact our office.
6. Please avoid MRI machines or radio transmitters until capsule has passed.
7. Do not expose data recorder to shock, vibration, or direct source of heat.
8. Due to the number of images the camera will record, it may take your provider up to a month to follow up with your results.

Patient Name: _____ DOB: _____

Commerce
Northridge Specialty Clinic
209 Mercer Place
Commerce, GA 30529

Greensboro
Tender Care Clinic
803 South Main Street
Greensboro, GA 30642

Lavonia
St. Mary's Sacred Heart
367 Clear Creek Drive Suite 2003
Lavonia, GA 30553

Hartwell
Hartwell Family Practice
229 Athens St.
Hartwell, GA 30643