~GENERAL, LAPAROSCOPIC & GI SURGEON~ MD, FRACS

GASTROSCOPY

Information & Instruction Sheet

Admission Date	//
Hospital	Victorian Gut Centre 119 Plenty Road BUNDOORA 3083 PH:9466 8466
CONFIRMATION of Ada procedure via text mess	
Victorian Gut Centre Pl prior to your admission	RE-ADMISSION FORM- Send to Victorian Gut Centre NO later than 7 business days 119 Plenty Road Bundoora Vic 3038 or email reception@vicgut.com.au
	<u>s- Return 7 days prior to:</u> Mr Thomas Sweeney, Suite 21, Northpark Private Hospital Cnr Greenhills & Plenty Roads, Bundoora Vic 3083 <u>OR</u> email to: e.com.au
1. REFERRAL: - Plea	se note your procedure will not be performed unless we have a current referral.
	NCIAL CONSENT / OUT OF POCKET FEE- This form must be signed, dated and payment or to your surgery.
3. PATIENT REGISTR	ATION FORM- If this is included in your paperwork.
	<u>VS:</u> It is important to notify us immediately if you are a diabetic, taking medications, or using blood thinning tablets (ie Aspirin / Warfarin) as certain medications need to be or to admission.
Please stop the following	ng medications:
•	ure d to fast prior to surgery (Nothing at all to eat, drink or smoke) from midnight eration. You should take all your current medication with you to the hospital.
•	edure ed to fast prior to surgery, you may have a light breakfast (NO DAIRY PRODUCTS) on day of admission but after this time you MUST FAST COMPLETELY (nothing at all to

DISCHARGE FROM HOSPITAL:

It is important you arrange for someone to drive you home at discharge from the hospital and stay with you overnight.

eat, drink or smoke). You should take all your current medication with you to the hospital.

YOU MUST NOT drive a car or operate machinery until advised by Mr Sweeney