

**DIRECTIONS TO  
THE CENTER FOR AMBULATORY AND MINIMALLY INVASIVE SURGERY  
"CAMIS"**

234 Industrial Way West, The Summit, Building B, Suite 101  
Eatontown, NJ 07724  
(732) 440-4900

**FROM THE NORTH**

- Take Route 18 South, Towards Pt. Pleasant
- Take EXIT 13A, HOPE ROAD
- Make the 3<sup>rd</sup> left onto INDUSTRIAL WAY WEST
- Follow INDUSTRIAL WAY WEST for approximately a half mile
- There is a large blue building on the right
- **234 INDUSTRIAL WAY WEST / THE SUMMIT**, will be on the left
- Building B is just behind Building A, both buildings are clearly marked.
- If you reach Meridian Road, you've gone too far

**FROM THE SOUTH**

- Take Route 18 North, towards Eatontown, to CR-547S, Exit 13A
- Take EXIT 13A, towards Garden State Parkway/Wayside
- Make a right onto Wyckoff
- Make a left onto Hope Road
- Make the 2<sup>nd</sup> left onto INDUSTRIAL WAY WEST
- Follow INDUSTRIAL WAY WEST for approximately a half mile
- There is a large blue building on the right
- **234 INDUSTRIAL WAY WEST / THE SUMMIT**, will be on the left
- Building B is just behind Building A, both buildings are clearly marked
- If you reach Meridian Road, you've gone too far

## UPPER ENDOSCOPY INFORMATION AND PREPARATION

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

Today's Date: \_\_\_\_\_

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

To help you determine your medical treatment, you have been asked to undergo an upper endoscopy (esophagogastroduodenoscopy). This is an examination of your esophagus, stomach, and first two portions of the duodenum (small intestine).

As you will receive sedative medication, please be sure to arrange to have someone pick you up after your procedure. You will not be able to drive a car or perform complex activities after receiving sedation.

Five days prior to your procedure, stop all herbal supplements (such as ginkgo biloba, St. John's wort, fish oil, etc.), vitamin E, and anti-inflammatories (such as Advil, Motrin, Aleve, or Excedrin). If you take Coumadin (warfarin), Plavix (clopidogrel), or diabetic medications, please make sure you have received instructions from your prescribing doctor. **DO NOT STOP ANY MEDICATIONS, INCLUDING ASPIRIN, UNLESS INSTRUCTED BY YOUR DOCTOR.**

For the best possible examination, the upper gastrointestinal tract must be completely empty of food and liquids. Please do not eat or drink anything after midnight the night before your procedure and then not again until after your endoscopic examination. **TAKE ONLY YOUR APPROVED MEDICATIONS WITH A TINY SIP OF WATER AT LEAST TWO HOURS PRIOR TO YOUR PROCEDURE.**

The doctor will describe any special instructions in addition to those above. If you have any questions, please contact our office at (732) 370-2220.

Special Instructions: \_\_\_\_\_

475 County Road 520, Baron Plaza, Suite 201, Marlboro, NJ 07746

59 Kent Road, Howell, NJ 07731

100 Perrine Road, Old Bridge, NJ 08857

**Tel. 732-370-2220 • Fax: 732-548-7408**

[www.advancedgastroonline.com](http://www.advancedgastroonline.com)

# **KNOW YOUR BENEFITS!!!**

You must call your insurance company prior to your procedure to KNOW YOUR BENEFITS.

You will be responsible for any **DEDUCTIBLES** and **CO-INSURANCE** associated with your particular insurance plan. DO NOT assume “in-network” means you will be 100% covered.

You are scheduled to have your procedure performed at the **Center for Ambulatory and Minimally Invasive Surgery (CAMIS), which is an Ambulatory Surgical Facility, not an office.** Whether or not this facility is in network with your insurance carrier, you may have out-of-pocket costs which come from annual deductibles, coinsurance, and co-pays.

We will obtain any necessary prior authorizations for your procedure; however, this does not guarantee payment. **Please check your benefits with your insurance carrier(s) for this procedure.**

To help you better understand your benefits when calling your insurance carrier, the following is a check-list of important questions to ask.

**Is the facility in network with my insurance carriers?**

Please note, even if your doctor participates with your insurance carriers, CAMIS may not. It is your responsibility to verify your coverage with ALL your insurance carriers.

**Do I have a facility-based deductible?**

If so, you may be asked to bring a portion of this deductible the day of the procedure. CAMIS will call you prior to your appointment to notify you of this. If a payment plan would be helpful, please let them know at the time of this phone call.

**Am I responsible for any co-insurance?**

For example, some policies cover 80%, leaving the patient responsible for 20%, which is your co-insurance. If you have any co-insurance responsibility, you may be asked to bring a portion of this amount the day of the procedure. CAMIS will call you prior to your appointment to notify you of this. If a payment plan would be helpful, please let them know at the time of this phone call.

**Do I have a facility co-pay?**

If so, **this is due on the date of the procedure.**

**Do I need a referral?**

Please make sure all referrals are up-to-date. If you are scheduled for a second procedure on another day, a second referral may be required.

**How will my colonoscopy be billed?**

If you are having a colonoscopy, to better understand how your insurance company may handle your colonoscopy claim, please see the attached sheet. When calling, you'll need your diagnosis code(s), found on your patient summary received after your office visit, so that your insurance company can tell you how they will be processing your claim and your potential financial responsibility, if any.

As always, if you have any questions or concerns, please feel free to call us at (732) 370-2220.