

**Endo Surgi Center of Old Bridge  
42 Throckmorton Lane, Old Bridge, NJ 08857  
(732) 679-8808**

**Directions**

**FROM POINTS SOUTH OF OLD BRIDGE AND CINDY STREET:**

- Take Route 9 North past Cindy Street
- Exit Route 9 at the next exit - Throckmorton Lane, Ticetown Road, Matawan
- Once you exit, immediately bear right, following signs for Throckmorton Lane and Ticetown Road
- Continue to first stop sign and make a left on to Throckmorton Lane
- Once on Throckmorton Lane, go through the first light
- The Endo Surgi Center of Old Bridge will be on the right side, approximately 2/10's of a mile

**\*\* If you come to a second light, you have gone too far \*\***

**FROM POINTS NORTH OF OLD BRIDGE AND ROUTE 516**

- Take Route 9 South passing both exits for Route 516
- After passing these exits, take the next exit - Throckmorton Lane, Ticetown Road
- Once you have exited, bear right and merge on to Throckmorton Lane
- The Endo Surgi Center of Old Bridge will be on the right, approximately 2/10's of a mile

**\*\*Once you have merged on to Throckmorton Lane, if you come to a light, you have gone too far\*\***

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

Dear Patient,

The doctor will be performing your upcoming procedure at Endo Surgi Center of Old Bridge, an ambulatory surgery/out-patient facility, located at 42 Throckmorton Lane, Old Bridge, NJ 08857.

**At least 6 days prior to your procedure, please carefully read all of the attached information.**

It is extremely important that you follow the dietary and preparation instructions as outlined in your attachments.

The day before your procedure, the surgery center will call you to advise you of the time you should arrive. Please note, **the appointment time given at the time your appointment is made is always subject to change.**

On the day of your procedure, please bring with you the following items:

- Your insurance ID card(s)
- Picture ID

All other paperwork attached is for information purposes only and does not need to be brought with you on the day of your procedure.

**\*\* If you find it necessary to cancel your appointment, please kindly give us 72 (business) hours notice; this will allow us to use this appointment for other patients as well as help you avoid a \$100.00 cancellation fee. \*\***

Thank you.

Advanced Gastroenterology Associates

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)

## SIGMOIDOSCOPY INSTRUCTIONS AND INFORMATION

TODAY'S DATE:

PATIENT'S NAME:

PROCEDURE DATE:

### PROCEDURE INSTRUCTIONS:

- (1) Nothing to eat or drink after midnight the night before.
- (2) One Fleet Enema at bedtime the night before.
- (3) One Fleet Enema 2 hours before procedure.

### ADDITIONAL INSTRUCTIONS:

# **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 **Endo Surgi Center of Old Bridge, 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, Endo Surgi Center of Old Bridge may not be a participating. It is your responsibility to verify your coverage with ALL your insurance carriers.

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

If so, you will be billed after the claim has been processed by your insurance company.

**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, this, too, will be billed to you after the claim has been processed by your insurance company.

**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.