

Endoscopy Instructions

Your procedure is scheduled on ____/____ at ____:____ am/pm Check in time: ____:____ am/pm

Woodburn Endoscopy Center
3301 Woodburn Rd Suite 109
Annandale, VA 22003
(703) 752-2557



Go to www.woodburnendoscopy.com
Click "For Patient" tab at the top
Print and Fill-in all 4 "Patient Check-In Forms"
Bring them with you the day of your procedure.

Virginia Hospital Center
1635 N George Mason Dr Suite 205
Arlington, VA 22205
(703) 558-6406

McLean Surgery Center
7601 Lewinsville Rd Suite 440
McLean, VA 22102
(703) 663-1428



Go to www.mcleansc.com to complete your medical history. Click on the "online Medical History" link. You must complete this process prior to your procedure. This will help prevent potential delay and/or cancellation.

Cancellation Policy:

Cancellations and/or rescheduling procedures within Seven (7) days incur a \$250 charge. This charge is not covered by insurance. If you need to cancel, please call our office at (703) 876-0437.

The Day of your Endoscopy	<ul style="list-style-type: none">TAKE NOTHING BY MOUTH STARTING FROM MIDNIGHT THE NIGHT BEFORE YOUR ENDOSCOPY. This means NO eating, drinking, smoking or chewing gum. (You may take your regular medications that morning with a small sip of water)
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You must have someone to drive you home or accompany you home on public transportation.

If your procedure is scheduled at **Woodburn Endoscopy Center** and is scheduled for 2:00pm or later, your driver must remain at the facility during the procedure. You must not drive or be responsible for important decisions until the morning after your procedure.

You are scheduled for a follow-up to discuss the results of your Endoscopy on

____ / ____ at ____:____ am/pm

3301 Woodburn Rd
Suite 107
Annandale VA 22003

1635 N George Mason Dr
Suite 480
Arlington VA 22205