



Milan S. Chakrabarty, M.D.
General Gastroenterology

Indraneel Chakrabarty, M.D., M.A.
Advanced & Interventional
Gastroenterology

Sandra Del Valle, PA-C
Gastroenterology Physician Assistant

Kathleen A. Linke, PA-C
Gastroenterology Physician Assistant

Two Locations:

HEMET

1003 E. Florida Avenue · Suite 101 · Hemet, CA 92543 · (951) 652-2252

TEMECULA

44274 George Cushman Ct. · Suite 208 · Temecula, CA 92592 · (951) 383-6001
(By appt.)

DISCHARGE INSTRUCTIONS AFTER ABLATION OF BARRETT’S ESOPHAGUS USING THE HALO SYSTEM

You have undergone upper endoscopy with ablation of Barrett’s esophagus. You may experience one or more of the following symptoms after treatment: chest discomfort, sore throat, difficulty or pain with swallowing, and/or nausea/vomiting. These symptoms may include: _____

To Whom It May Concern:

_____ is under my care. He/She

was seen in my office today.

Is released to return to work on _____

Is unable to return to work/school at this time because _____

Is able to return to work/school on _____

Is / Is Not able to participate in the physical education program at school.

Is in good physical health.

Surgery is scheduled for _____. Patient may return to work on _____

Restrictions _____

Other _____

Physician Signature: _____
I am prescribing medication after this treatment, such as Nexium®, Prevacid®, or other similar drug.

REPRESENTATIVE DISCHARGE INSTRUCTIONS SPECIFIC TO THE USE OF THIS DEVICE

FOR THE SUB-INDICATION OF BARRETT’S ESOPHAGUS

- Maximize anti-secretory regimen (for example, esomeprazole or Nexium 40 mg twice per day for 1-3 months, followed by at least 40 mg per day thereafter).
- Antacid/lidocaine mixture per oral pm (as needed).