



GI Excellence, Inc.

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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 should improve with each day. You will be provided with several medications and specific instructions (below) to make you as comfortable as possible during this time. Should any of your symptoms be more severe in nature or longer in duration than we have described, please contact us. It is important to continue a strict and long-term regimen of anti-secretory 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).
- Anti-emetic medication per rectum pm (as needed).
- Full liquid diet for 24 hours, then advancing to soft diet for 7 days.
- Avoid aspirin or non-steroidal anti-inflammatory medications for 7 days (per physicians' instructions).
- Patient instructed to contact treating physician immediately for significant chest pain, difficulty swallowing, fever, bleeding, abdominal pain, difficulty breathing, vomiting or other warning signs provided by the physician, so that the physician may complete the appropriate diagnostic work-up (contrast radiography, CT scan, or endoscopy) an/or provide the appropriate therapeutic intervention in order to avoid further complications.
- If the patient seeks care for a digestive issue from any healthcare personnel in the 6 months following the ablation procedure, other than the treating physician, the treating physician should be consulted before any treatment is initiated.