



Women's Medicine Collaborative*

A Lifespan Partner

BY WOMEN. FOR WOMEN.™

Center for Women's Gastrointestinal Medicine

146 West River Street • Providence, RI 02904

Phone: 401-793-7080 • Fax: 401-793-7801

Colonoscopy - Endoscopy Booking Sheet

Open Access Booking

Fax to Attn: Open Access Booking Coordinator at 401-793-7801

Please check procedure(s) requested

Colonoscopy Upper Endoscopy (EGD) EGD & Colonoscopy

REFERRAL TO: Silvia Degli Esposti, MD Colleen Kelly, MD Amanda Pressman, MD First Available

PATIENT _____ DOB ____/____/____

ADDRESS _____

PHONE Home _____ Cell _____ Work _____

May we leave a message stating the call is from "Women's Medicine Collaborative", "GI Medicine" or "Dr. ____'s office"? Yes No

INSURANCE _____ ID# _____

REFERRING PROVIDER _____ PHONE _____ FAX _____

MEDICATIONS (Name & Dose): (List)

ALLERGIES (List)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you anticipate any issues with sedation due to high anxiety, history of abuse, multiple psychiatric meds or alcohol misuse? No Yes

INDICATION (CHECK ALL THAT APPLY): **PLEASE FAX PROBLEM LIST, OFFICE NOTES and/or REPORTS.**

- Asymptomatic Screening
- Hemocult Positive Stool
- Hematochezia without obvious perianal source and age \geq 40
- Polyp(s) on screening sigmoidoscopy or previous colonoscopy
- Family history of colon cancer in a first degree relative \leq 75 years old
- Personal history of adenomas, colon cancer or gynecologic cancer
- Iron deficiency anemia over 40 years of age (Can couple with an EGD)
- Chronic heartburn
- Known Barrett's Esophagus surveillance

NOTES: _____