

Mid-America
Gastro-Intestinal
Consultants, P.C.

Mark J. Allen, MD ~ Hillary L. Bownik, MD

Sakher M. Albadarin, MD ~ Sandra A. Hoover, APRN, BC

Stephanie Justin, APRN, FNP-BC

HYDROGEN BREATH TEST

We have scheduled you for a hydrogen breath test on _____ at _____
am.

YOUR PREP INSTRUCTIONS ARE AS FOLLOWS:

1. NOTHING to eat or drink, including water, for 12 hours prior to the test. Avoid slow digesting foods the day before the test such as beans, some vegetables and coarse breads.
2. DO NOT take any medication for 12 hours prior to the test.
3. NO SMOKING 8 hours prior to the test. NO SLEEPING or VIGOROUS exercises 30 minutes prior to or during the test.
4. NO ANTIBIOTICS 4 weeks prior to testing.
5. If you are a diabetic please bring your medications with you.
6. Pro-kinetic drugs such as Reglan and laxatives should be held for 1 week prior to testing.
7. You will not require a driver for this test. We encourage you to come by yourself, as you will need to sit quietly during the test. Space is limited.
8. Plan to be here 3 hours.

ABSOLUTELY NOTHING BY MOUTH – NO CHEWING GUM - NO SIP OF WATER

We do not check your insurance benefits for this procedure. Please feel free to call and check on them yourself – the CPT code it is 91065. If you have any questions regarding your prep instructions, procedure or payment, please do not hesitate to call our office at (816)561-2000.