



CENTER FOR DIGESTIVE HEALTH & NUTRITION
725 CHERRINGTON PARKWAY • MOON TOWNSHIP, PA 15108

FAQ - Frequently Asked Questions

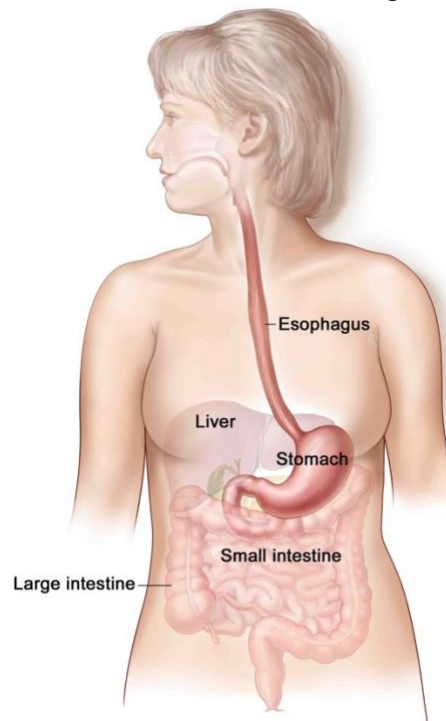
Do you have a question? Chances are that other patients have asked us about similar topics, so we've compiled a list of those most frequently requested (FAQs) to help you answer yours.

What is Gastroenterology?

Gastroenterology is a branch of medicine focused on the health of the digestive system, or gastrointestinal (GI) tract. The GI tract includes organs like the esophagus, stomach, small intestine, colon and rectum, pancreas, gallbladder, bile ducts, and liver. This field covers a wide range of common and important conditions such as colon polyps and cancer, hepatitis, gastroesophageal reflux (heartburn), peptic ulcer disease, colitis, gallbladder and biliary tract disease, nutritional problems, Irritable Bowel Syndrome (IBS), and pancreatitis. In essence, all normal activity and disease of the digestive organs are part of the study of Gastroenterology.

What is a Gastroenterologist?

Gastroenterologists, the doctors specializing in this field, have a detailed understanding of how food moves through the digestive tract, is broken down (digested), is absorbed into the body, and how waste is removed from the body. After 4 years of college and 4 years of medical school, a Gastroenterologist must complete a three-year Internal Medicine residency and then be eligible for additional specialized training (fellowship) in Gastroenterology. This fellowship is generally 2-3 years long, so by the time Gastroenterologists have completed their training, they have had 5-6 years of additional specialized education following medical school.



Gastroenterology fellowship training is an intense, rigorous program where future Gastroenterologists learn directly from nationally recognized experts in the field and develop a detailed understanding of gastrointestinal diseases. They learn to evaluate patients with gastrointestinal complaints, treat various conditions, and provide recommendations to maintain health and prevent disease. They learn to care for patients in the office and the hospital. Gastroenterologists use a variety of diagnostic procedures to accurately identify the patient's health condition and determine the best course of treatment. These procedures include endoscopy, where a narrow, flexible tube with a light and camera attached is used to look inside the GI tract.

Center for Digestive Health & Nutrition (CDHN)

What is the Center for Digestive Health & Nutrition?

The Center for Digestive Health & Nutrition (CDHN) is a private medical practice of eight experienced Gastroenterologists, Nurse Practitioners, and staff dedicated to preventing and treating

digestive disorders. Our physicians have been serving the needs of those in Western Pennsylvania and surrounding areas since 1977, having cared for tens of thousands of individuals with digestive problems. Our medical staff has over 250 years of collective experience treating digestive disorders and is available to help those in need.

Where is CDHN located?

CDHN is conveniently located at 725 Cherrington Parkway (Bottom Level), Moon Township, PA 15108, a pleasant suburban setting north of Pittsburgh, PA. There is ample, on-site free parking for patients and their families. CDHN shares the first floor of this medical building with a surgical center devoted to gastrointestinal procedures: the Three Rivers Endoscopy Center (TREC), where most of our outpatient endoscopy "scope" procedures are performed.

What conditions do you treat?

Our team employs cutting-edge technology to diagnose and treat all digestive conditions, including colon cancer, colon polyps, heartburn, acid reflux, celiac disease, swallowing problems, digestive bleeding, stomach ulcers, chronic indigestion, liver disease, hepatitis, gallstones, diseases of the pancreas, irritable bowel syndrome, ulcerative colitis, Crohn's disease, internal hemorrhoids, persistent nausea/vomiting, weight loss, gas and bloating, abdominal pain, chronic constipation, and diarrhea.

We do not perform surgery. Our focus is concentrated on diagnosis and medical treatment. We are all highly trained and experienced in endoscopic examinations of the stomach (gastroscopy) and colon (colonoscopy). We have had great success with the O'Regan Hemorrhoidal Ligation procedure to treat internal hemorrhoids. Since 2005, we have offered the option of the amazing "camera in a pill" PillCam™ procedure to enhance the views of the small intestine.

Do I need a referral to visit CDHN?

This depends on your insurance provider and insurance plan. Please get in touch with your PCP for details about your coverage.

How long will it take to get an appointment?

Gastroenterology is a specialty practice, and unlike primary care providers, routine appointments may take several weeks. For emergencies, we set aside several openings each day in our schedule.

Can I register for an appointment online?

Yes. You can schedule an office visit with one of our providers and complete most of your registration information when you book an appointment online, helping us make your visit more efficient and saving you time. An endoscopic "scope" test can begin online, but our appointment staff will need to contact you to finalize the details and provide any necessary preparative instructions. To schedule online, visit our website, www.gihealth.com. An online registration prompt is sent by text and or email 5 days prior to an office visit and 10 days prior to a procedural visit such as a colonoscopy.

Do you treat children?

No. Our physicians treat patients who are 16 years old or older. A pediatric gastroenterologist should see children under the age of 16. Our endoscopy center, TREC, only accepts patients over 18. Younger patients who need an outpatient endoscopic procedure are scheduled at a local hospital surgery center.

Does CDHN handle Workers' Compensation claims?

No, CDHN does not handle Workman's Compensation claims.

Will my doctor receive updates on my care?

Coordination of care is an essential part of a specialty consultation. Physicians often refer patients to us concerning a specific digestive problem. Depending on the type of problem, we may initiate diagnostic studies or treatment. Most patients will continue to be cared for by their primary care physician after establishing a diagnosis and treatment plan. Under certain conditions, we may also continue to monitor your gastrointestinal problems. Your personal physician will receive a comprehensive report with recommendations, usually transmitted before you leave our facility.

Which hospitals do your physicians attend?

Our physicians provide inpatient gastroenterology consultations and perform inpatient and outpatient procedures at Heritage Valley System's - Sewickley Hospital and Heritage Valley System's Kennedy Hospital (formerly Ohio Valley General Hospital). However, most outpatient endoscopic procedures are performed at our endoscopy center, Three Rivers Endoscopy Center, conveniently located in the same facility as our outpatient medical practice.

Three Rivers Endoscopy Center

In 1996, Three Rivers Endoscopy Center (TREC) was constructed in Moon Township to provide an efficient, convenient, and affordable option for patients needing endoscopic, or "scope," procedures. TREC was the first freestanding ambulatory surgery center in Western Pennsylvania dedicated to gastrointestinal endoscopy.

Is Three Rivers Endoscopy Center (TREC) accredited and certified?

YES. TREC is a member of the American Association of Ambulatory Surgery Centers, fully certified by the Pennsylvania Department of Health, and approved as a Medicare and Medicaid provider. We are proud that Three Rivers Endoscopy Center has been licensed by the Accreditation Association for Ambulatory Health Care (AAAHC) since 1996. TREC was the first endoscopy center in Western Pennsylvania to achieve this endorsement.

What other recognition?

We also are honored to have recently received the **American Society for Gastrointestinal Endoscopy ASGE Unit Recognition Award**, which recognizes practice units demonstrating their commitment to the highest standards of quality care and effectiveness in delivering such care. These recognition programs take into account unit policies, credentialing, staff training, competency assessment, and quality improvement strategies.

Why do you perform procedures at Three Rivers Endoscopy Center (TREC) rather than the hospital?

TREC specializes in gastroenterology and endoscopy procedures and was designed with efficiency and patient convenience in mind. Our staff members are specifically trained in GI procedures, and our team of highly skilled doctors and nurses is committed to providing the highest quality endoscopic services in a controlled, comfortable environment. Our physician-directed, patient-focused approach is intended to promote your long-term GI health, resulting in high patient satisfaction.

Benefits of an Ambulatory Endoscopy Center:

The benefits of having your procedure performed at TREC:

- Endoscopy is performed by a trained Gastroenterologist, assuring you of quality, personalized care.
- Endoscopy is more economical at TREC because the overhead costs are lower than a hospital's. The average charge for treatment here is about 50% less than having the same procedure at a hospital surgery center. This is especially significant for our patients in an era of increased copays and deductibles.
- Simplified admitting and discharge procedures ensure convenience for the patient and free onsite parking also adds to the convenience.
- A patient's family can relax in our center's calm waiting area.
- Realizing that each case is unique, we always provide close, personal attention.

What procedures do you perform?

- Colonoscopy
- Flexible Sigmoidoscopy
- Colon polyp removal
- EGD (esophagogastroduodenoscopy)
- Esophageal Dilation of Strictures
- BRAVO Esophageal Ph testing
- Endoscopic Retrograde Cholangiopancreatography (ERCP) at local hospital X-ray department
- Capsule Endoscopy or "Pill Cam" in our attached clinical office
- Internal Hemorrhoid Banding in our attached clinical office
- Percutaneous Endoscopic Gastrostomy (PEG Feeding tube) at the local hospital surgery department
- Infusion Services for inflammatory bowel disease in our office infusion suite

Do I need a screening/consultation before scheduling a colonoscopy?

That depends. Every case is unique. You may need to visit our office before scheduling a colonoscopy if you are a new patient. Our physician or Nurse Practitioner will perform a history and physical to ensure that you are healthy and have no medical problems that may hinder the procedure's safety. If you have no digestive symptoms but need a screening exam, we often review your family doctor's last evaluation. Further details may be necessary and will be requested during a phone call. Returning patients who have been treated recently only need a preoperative office visit if their health status has changed.

Can I register for a "scope test" online?

Yes. Scheduling an endoscopic procedure (Gastroscopy or Colonoscopy) can begin online, but our appointment staff will need to contact you to finalize the appointment details and provide any necessary preparative instructions.

Does a colonoscopy indicate whether I have colon cancer?

Yes. A colonoscopy is the most accurate way to determine the health of your colon. We check for cancer, polyps, colitis, diverticulosis, and other less-common lower digestive problems during this procedure. Even more importantly, a colonoscopy can help prevent colon cancer by effectively detecting and removing precancerous polyps.

Should I bring a family member or friend to my procedure?

Yes. Someone over 18 with whom the doctor can discuss the procedure's findings, with your

permission, to do so, as it may be difficult to remember what you are told due to the effects of any medications you received. The person you bring must also drive you home as you will not be able to drive safely until the next morning.

Questions about Preparing for Colonoscopy

What is bowel prep, and why do I need one?

For your gastroenterologist to have a clear picture of the inside wall of your colon, the colon needs to be thoroughly cleaned out. The colon prep is a type of laxative that induces the colon to empty all its contents, thus allowing the physician to see clearly. Problems can arise if the colon is not thoroughly prepared. It is important during bowel preparation that you follow the instructions very carefully and thoroughly. A colonoscopy is safe and accurate when performed by an experienced doctor, qualified support staff, state-of-the-art instruments, anesthesia, AND A CLEAN COLON! We strongly emphasize the importance of a "clean" colon for a successful outcome.

Can I take pills for bowel prep?

Yes, you can! The prep solutions ' bad taste is a major complaint with past colonoscopy preparations. Now we have SUTAB, a new pill preparation that became available in early 2021. It is not "a pill," but 24 pills. The night before your colonoscopy exam, take 12 pills over about 20 minutes with a lot of water. Repeat the process about 6 hours before the exam, on the morning of your colonoscopy. The pills are about the size of a large vitamin capsule.

Why can't I take all of the prep solution the night before my exam?

In the past, colonoscopy preps were given the night before the examination. The colon was nice and clean when the patient went to bed, but problems arose overnight as bile and mucous in the small intestine entered the right side of the colon and covered the lining, making the test far less accurate. By cleaning out the colon the night before and "polishing it" again 6 hours before the examination, the right side of the colon is almost always suitably prepared. Gastroenterologists in the US switched to this so-called "split prep" a few years ago.

What if I start vomiting while drinking the solution?

If you develop symptoms of nausea or vomiting, stop the prep for 30 minutes, then resume the process. Go slower by drinking one eight oz. glass every 30 minutes instead of every 15 minutes. Cool down the prep in the refrigerator, or in an ice bath, before drinking it. If you need help completing the prep, please call (412) 262-1000 and speak with our nurse or doctor on the night call.

What will happen if I eat or drink something right before (or a few hours before) my procedure?

Your procedure will probably be canceled. It is dangerous to receive sedation if you have had something to eat or drink before your procedure. Our first concern is your health and safety. Sedatives administered before your procedure affect your body's ability to retain food and liquid in your stomach. If you eat or drink several hours before your procedure, there is a risk that food or beverage will travel up into your esophagus, where it could enter your lungs. Your procedure will be rescheduled if you do not follow the instructions provided by your doctor. You must be totally fasting for four (4) hours before your procedure; eat and drink nothing!

How do I know when my bowel prep is complete?

The stool output should look clear and without particles like the liquids you are drinking.



I finished my colonoscopy prep, and I am not sure my preparation worked. What should I do?

A typical sign of success in your preparation is passing clear or yellow-colored fluid from your rectum after following the procedure for bowel preparation. If, on completion, you are still passing formed stool, your procedure may have to be rescheduled. To determine the next step, contact us immediately at 412 262-1000 and request to speak with a nurse or doctor on a night call.

Do I have to drink all the solution to cleanse my colon?

You are encouraged to carefully follow all the instructions for using the prep, so please make every effort to drink all of the solution. Purging a colon is not influenced by the height and weight of a patient. Remember, you are trying to clean out your entire digestive tract. The physician can only perform a thorough exam if your colon is clean. If the prep is not completed properly, you may have to reschedule your test for another day.

My bum is sore from all the bowel movements? What can I do?

There are many bowel movements during a colonoscopy preparation. You can minimize soreness in the anal area using soft toilet tissue and a baby wipe like Huggies. Applying a topical barrier cream such as Zinc Oxide, Butt Paste, or Desitin Diaper Rash Cream will not interfere with the results of a colonoscopy. An over-the-counter numbing cream called Recticare can help.

Can I drink wine or beer during the bowel prep?

No. The bowel prep may cause dehydration, and it's important to drink lots of water or clear liquids during your bowel prep to stay hydrated.

What about the medications I regularly take?

Tell your doctor about all medical conditions and any drugs, vitamins, or nutritional supplements you take regularly. Please talk to your prescribing doctor if you are taking prescription blood thinners (Coumadin, Jantofen, Warfarin, Eliquis, Pradaxa, Plavix). They may need to be temporarily stopped. Continue to take all medications unless otherwise instructed. If you take medicines for high blood pressure, take them every day, including the day of your colonoscopy prep and the morning of your procedure, with only a tiny sip of water.

Constipation and bowel preparation.

One consistent factor that causes poor preparation for colonoscopy is constipation. Starting the colon prep when you are constipated will make you sick and probably result in inadequate

preparation for the exam - which may have to be rescheduled. If you are constipated, you may require a "pre-prep" with a more extended period of a clear liquid diet and additional laxatives to prepare your colon for your colonoscopy. Please make sure your Gastroenterologist knows that you are constipated before the procedure.

Should I continue to take my diabetic medications the day before my procedure?

Since you are on a liquid diet, you may need to adjust your diabetes medication the day before your procedure. Please refer to your diabetes instructions for details. In addition, check your blood sugar levels regularly during preparation, as it may not be safe to receive anesthesia for your procedure if your blood sugar is too high or too low.

I am diabetic, and my blood sugar will go too low if I do not eat solid foods; what should I do?

Drink liquids with added sugar the day before your procedure, and do not rely on sugar-free drinks. You must consume 150-200 calories when on a liquid diet to maintain your blood sugar. Refrain from eating solid foods during your preparation, or your procedure may have to be rescheduled.

Can I have a colonoscopy if I am having a period?

Yes, menstrual periods and tampons do not interfere with a colonoscopy.

Before your colonoscopy

How soon can I have a procedure performed?

Most routine procedures are scheduled within four weeks of seeing the doctor. We also reserve some appointments on our schedule for urgent cases.

Why do I have to fill out paperwork and answer questions at the endoscopy center when I already answered them at the doctor's office?

Medicare-accredited facilities are required to have a separate chart for all patients. In addition, our staff is trained to make sure we have your most up-to-date health information. Although the Three Rivers Endoscopy Center is located next to the CDH&N offices, questions you've answered while seeing a doctor or provider at CDHN are maintained in a separate health report.

Why do I need to leave my jewelry at home?

Small jewelry items can easily be lost when changing into a patient gown before the examination.

What other guidelines should I follow before my procedure?

You should wear loose, comfortable, casual, easily removed, and foldable clothing. Avoid girdles, pantyhose, or tight-fitting garments. We recommend leaving your jewelry, other valuables, and high heels at home. Do not wear dark nail polish, perfume, or cologne on the day of surgery. (Dark nail polish interferes with the pulse oximeter readings we put on your finger to alert the clinical team of your oxygen level.)

What do I need to bring with me on the day of the procedure?

Bring your insurance card(s), driver's license, valid photo ID for identification purposes, and any financial patient responsibility details, such as a copayment.

Can I brush my teeth and apply deodorant on the morning of the procedure?

You may brush your teeth, but avoid swallowing additional, unnecessary water. Refrain from using mouthwash. You may apply deodorant on the morning of your procedure.

Questions about sedation

Is a colonoscopy painful?

No. During the examination, you will receive intravenous pain suppressants and sedation. You will not be aware of the procedure and should not experience any pain.

Is the sedation safe?

Yes. Before the procedure, you will be evaluated by the Anesthesiologist. During the procedure, you will be continuously monitored by a Certified Registered Nurse Anesthetist (CRNA) using the latest equipment.

What medications do you use?

Our CRNAs may use one of several medicines specifically selected for you based on your health history. Medications commonly used are Propofol (a sedative), Fentanyl (a narcotic used to control pain), and Versed (a medicine used to promote relaxation). This is called Monitored Anesthesia Care, or MAC. MAC anesthesia is ideally suited to a short procedure like a gastroscopy or colonoscopy. It is quick-acting, very safe, and you feel no pain or embarrassment during the procedure. The anesthesia wears off quickly in the recovery room, and unlike many other anesthetic regimens, postoperative nausea and vomiting are rare.

I'm afraid I will say things I shouldn't while sedated.

This is a normal and common fear. Most individuals fear losing control, giving away their secrets, or saying something embarrassing while asleep. While in a state of MAC anesthesia, it is very unusual for patients to speak.

Will this be the same type of anesthesia as when my gallbladder was removed? Will I have a breathing tube?

Anesthesia required for gallbladder surgery is a general anesthetic. An anesthetic for a colonoscopy or upper endoscopy does not require general anesthesia or a breathing tube. You will be breathing on your own and, simultaneously, be pain-free during the procedure.

Is it common to wake up in the middle of the procedure or to watch the procedure on the monitor?

No. The sedation administered by the anesthesia team takes effect almost immediately. Patients are completely sedated before the procedure starts. They usually wake up in the recovery area about three minutes after the procedure ends, with a sense of it all happening in "the blink of an eye."

Is it permissible to chew tobacco or "rub snuff" the morning of the procedure?

We recommend that no chewing tobacco be ingested for at least 8 hours before your procedure. The liquid from your saliva mixed with chewing tobacco often ends up in your stomach. Before administering anesthesia, your stomach must be empty of these kinds of acidic fluids.

Can I chew gum on the morning of the procedure?

Like chewing tobacco, gum also generates saliva that is ingested, producing stomach acid.

Therefore, we strongly recommend that you abstain from all gum, mints, etc., for at least 8 hours before the procedure.

Can I use Marijuana on the morning of the procedure?

No. More and more individuals are using medical or recreational marijuana. This can interfere with the anesthetic medications. Therefore, we strongly recommend that our patients abstain from all marijuana or THC products for at least 8 hours before the procedure.

I have had nausea after other procedures that required anesthesia. Will I experience this after my colonoscopy? Is it preventable?

Patients experience nausea and vomiting after procedures for a variety of reasons. Some are prone to nausea and vomiting due to other pre-existing conditions. Some patients have a history of motion sickness, which can be correlated with postoperative nausea and vomiting. Please let the attending anesthesiologist know your history if you suffer from this problem; in many cases, we can add or adjust medication to block that response. *Because of the specific drugs we use for sedation, postoperative nausea, and vomiting are rare after endoscopic procedures.*

How will the anesthesiologist know how much anesthetic to give me for my specific procedure?

There is no single anesthesia or dose for all patients. Every anesthetic must be tailored to the individual and to the procedure that is being performed. The amount of anesthesia necessary varies according to age, weight, gender, prescribed medicines, or specific medical conditions. Heart rate and rhythm, blood pressure, breathing rate, and oxygen levels are monitored continuously during the procedure. Adjustments are made to anesthetic levels for each patient to keep the patient comfortable and safe.

Questions about procedures

What can I expect during the colon exam?

Sedation will be administered before and during your procedure to help you relax and make you sleep. You'll be on your left side as a flexible tube slowly advances into the rectum and colon. The procedure will cause you no discomfort.

How long will my endoscopic procedure take?

If you are scheduled for an endoscopic procedure, plan to be in our center for two to three hours. Procedures such as gastroscopy or colonoscopy require sedation for safety and comfort. Although the test takes about 30 minutes, you will need extra time for registration, preoperative check-in, the test itself, and postoperative recovery. Currently, our patients' average stay is less than three hours. Suggest to your accompanying adult to bring something to help pass the time. Free Wifi is available in our waiting room.

If the doctor finds a polyp during my procedure, will he remove it?

In most cases, yes. Our doctors are trained in the latest endoscopic techniques. All but the largest polyps can be removed at the time of colonoscopy. The polyp is then sent to a pathology lab for microscopic analysis. The final biopsy result is usually available within ten days; after that, the information from the report and any plans for follow-up care will be sent to you and your referring physician.

If the doctor takes a biopsy, does that mean I have cancer?

No. There are many reasons why your doctor may take a small sample or biopsy of your stomach or colon lining. Most have nothing to do with cancer.

Can my husband, wife, another family member, or friend accompany me during the procedure?

No. The physician will talk with your family member or friend immediately following the procedure.

After your Procedure

Will the colonoscopy center keep me overnight?

No, you will not be kept overnight in the endoscopy center.

How will I feel after my procedure?

After your procedure, you will probably have a slightly dry mouth and feel drowsy, gassy, crampy, and hungry. The sedation causes dry mouth and drowsiness, and the symptoms will gradually wear off. The gassiness results from puffs of air introduced into the digestive tract during the endoscopic procedure to help your doctor examine the inside of your stomach or colon. Most air is removed before the procedure ends, but some must pass naturally. Don't be surprised when you feel a small tube inside your rectum in the recovery room. This is inserted to facilitate the passage of air to reduce abdominal discomfort. The tube will be removed before you get dressed.

How soon will I be able to eat after my test?

Our nurse will offer you some juice as soon as you wake up. After you get home, you can have a light breakfast or lunch, whatever you feel like. Just go slow at first and use some common sense to avoid becoming nauseous.

Why can't I go to a restaurant after my procedure?

Because of being sedated, you must NOT go out to eat; go home to eat. You may stop at a take-out if you remain in the car.

Can I drink wine or beer after the procedure?

No. Since you will have received narcotics and sedatives during your procedure, mixing alcohol and these medications is dangerous. You may drink alcohol the following day.

Can I drive later in the day after my procedure?

No. You cannot drive your car or operate machinery until the next day because of the sedation.

Why do I need to bring a driver for my endoscopic appointment? Do they have to stay the whole time I am there?

Endoscopic examinations such as colonoscopy and gastroscopy require sedation. The sedation relaxes the patient but will cause grogginess for several hours and slow reflexes for up to 12 hours. *This is why you cannot drive your car or perform activities that require quick reflexes until the following morning.* It is necessary for you to come with a friend or family member who can safely drive you home after your test is over. *We require that your driver stays for the entire time you are treated at our center.* It helps us for them to be available to answer questions and allows the doctor to explain your test results in the recovery room. **IF YOU ARRIVE WITHOUT AN ESCORT, YOUR PROCEDURE WILL BE RESCHEDULED.**

How soon can I return to work after my test?

Most patients can return to work the following morning.

Test Results

How long do I have to wait for the results of my procedure?

They are available immediately. With your prior approval, your doctor will discuss the procedure results with you and your family member or friend. We also give you a written explanation of the results and what future treatment, if any, is anticipated. You or your family member will also be able to ask questions on your behalf as your memory may be impaired by the sedation. Any biopsies of samples taken for lab analysis will be available on a different day than your procedure. Still, you will be contacted when our office receives the results.

What happens to my pathology specimen if I have biopsies taken during my colonoscopy?

CDHN has its own pathology laboratory, with highly skilled laboratory staff and a board-certified pathologist that provides high-caliber results. Having an onsite laboratory simplifies direct communication between our endoscopists and the pathologist, resulting in better patient care coordination and quick test results for the physician. Our pathology laboratory is CLIA certified and contracted with most major insurances. Pathology services are billed separately.

How soon will I receive the results of any biopsies?

If any polyps are removed and sent to the CDHN pathology laboratory for examination, you will usually receive your results within one week of undergoing your procedure. Some health insurance companies have contracts with other pathology laboratories nationwide, so your biopsy specimens must be mailed to that laboratory for examination, delaying your biopsy results for up to two weeks.

Insurance Issues

****How much does an EGD or colonoscopy cost at the TREC versus being done at the hospital?**

Our Endoscopy Center accepts most major insurance coverage plans. If you have a screening colonoscopy and no polyps are removed, the fee will be approximately \$1500. If you have the same procedure at a hospital facility, that cost will almost double to \$2500 - \$3000. Your health insurance may cover all or a portion of the expense. Any fees are established on the individual procedure. Fees may be discussed with our billing department staff before scheduling a procedure. You will learn exactly how the fees are broken down, what portion you will pay, what your health insurance will cover, and if any additional fees may apply before your appointment.

What insurance carriers do you accept?

Our website lists current health plans accepted at Three Rivers Endoscopy Center. The list is frequently updated but may only include some plans accepted by TREC. Please get in touch with our office if your plan is not listed.

Will my insurance plan cover my procedure?

Many insurance plans cover colonoscopy and upper endoscopy procedures. Insurance plans vary, so you need to contact your insurance company to discuss your benefits. You will be responsible for any co-pay or deductibles. If you need assistance in determining your benefits, please get in touch with our office.

If you are over 45 and have no colorectal symptoms, and you're just having a routine screening colonoscopy, you may be eligible for a free colonoscopy every ten years. Call your insurance company for coverage verification. The procedure code is 45378 or G0121, and the diagnosis code is V76.51. If you're having a colonoscopy because a family member has had colon cancer, the diagnosis code is V16.0, and the procedure code is 45378 or G0105.

I have Medicare. How do I prove that my procedure is a medical necessity?

Depending on your symptoms or previous diagnosis, your physician will order tests that they feel are medically necessary. Should any of these tests be considered not medically necessary by Medicare, you will be asked to review our Advanced Beneficiary Notice (ABN) which explains the services ordered, the cost of the services, and why Medicare may not consider these services medically necessary. Should you choose to proceed with the treatment, you will sign the ABN accepting entire financial liability.

Can you help me negotiate with my insurance company?

Should a service claim be denied, we will assist you in working with your health plan.

What is co-insurance?

Co-insurance is the percentage of the cost for which you are financially responsible, according to your health plan. For example, if your insurance covers 70 percent of the allowable fee for a particular service, you are responsible for paying the remaining 30 percent. This is called co-insurance. Co-insurance is separate from co-payment.

What can I expect to pay out of pocket?

There are many variables to this question dependent upon our treatment suggestions. We can provide you with a co-insurance estimate before any services are scheduled.

Billing

What is CDHN's financial policy?

As a courtesy, CDHN will submit health insurance claims to your health plan. You will be financially responsible for paying any deductibles, co-payments, and co-insurance costs.

I want to work out a payment plan with CDHN. What should I know?

The patient is responsible for remitting payment at the time of service. We understand that circumstances beyond your control can arise that create hardship. Please discuss any adverse financial situations by speaking with a Billing Manager BEFORE your visit to the clinic or procedure if you cannot pay your balance in full on the day of your appointment. Otherwise, your procedure may be rescheduled.

How long do I have to pay my bill?

Once your insurance carrier has reimbursed us for your visit or procedure, any remaining balances will be billed to you. Payment is due upon receipt.

Does CDHN or TREC have an online billing option?

Our office practice CDHN does have online Bill Pay at PAYMYDOCTOR.COM. (Check “Quick Pay” and follow online prompts.)

Our Endoscopy Center (TREC) does NOT have online pay.

Why will I receive separate bills for my procedure?

You will receive one bill from our facility (Three Rivers Endoscopy Center) for professional services performed by the physician, one statement from the Anesthesia group that administered and monitored your sedation, and one bill from the pathology lab if you had tissue biopsied or removed.

Whom do I contact if I have questions about my bills?

When you have a procedure at Three Rivers Endoscopy Center, your insurance company will be billed by the following entities:

1. The Center for Digestive Health (CDHN) will bill your insurer for the professional services provided by your gastroenterologist. For billing questions, call (412) 262-1000 and select option #6.
2. Three Rivers Endoscopy Center (TREC) will bill your insurance for facility costs, including equipment, procedure rooms, supplies, staff, and medications. For billing questions, call (412) 262-1000 and select option #6.
3. Perioperative Anesthesia Consultants is our anesthesia provider. Please expect an invoice from “Perioperative Anesthesia Consultants for anesthesia services provided during your procedure. For billing questions, call 800 222-1442. You may also send an email with billing inquiries to customer.service@anesthesiaLLC.com. For anesthesia questions NOT related to billing, please contact admin@periopanesthesiainc.com.
4. Pathology Lab. If you had polyps removed or biopsies taken, the lab will bill your insurance for the laboratory's processing and pathologist's interpretation of the results of the biopsy specimens. If you have questions regarding a bill from CDHN for pathology services, then you should contact our Billing Department: (412) 262-1000, Option 6. For questions regarding bills from other labs (i.e., Quest, Heritage Valley Health System (HVHS), etc.), then you should contact the phone number on their invoice.