



We are currently only seeing patients for emergent or urgent reasons, for both office visits and endoscopy procedures.

If you have symptoms of COVID-19 (dry cough, fever, tiredness, difficulty breathing) DO NOT come to the office. Contact the Allegheny County Health Department 888-856-2774.

We are in the office from 8:30 am - 5:00 pm Monday - Friday and taking calls.

We are working hard to develop a telehealth visit system for patients and encourage them to use these types of visits for non-emergencies. Telehealth visits can be conducted using SKYPE, FaceTime or through patient portals. Please call us for this service or to get more information.

As of now we are rescheduling our patients after May 4. **All existing appointments are canceled through April 6, 2020, unless they're of an urgent/emergent nature.**

We are doing our best to follow industry guidelines, using the following priority classification:

Elective Procedures that May Be Delayed	Urgent/Emergent Procedures that May Not Be Delayed
<ol style="list-style-type: none"> 1. Screening and surveillance colonoscopy in asymptomatic patients. 2. Screening and surveillance for upper GI diseases in asymptomatic patients. 3. Evaluation of non-urgent symptoms or disease states where procedure results will not imminently (within 4-6 weeks) change clinical management (such as EGD for non-alarm symptoms, EUS for intermediate risk pancreatic cysts). 4. Motility procedures – esophageal manometry, ambulatory pH testing, wireless motility capsule testing and anorectal manometry. 	<ol style="list-style-type: none"> 1. Upper and lower GI bleeding. 2. Suspected GI bleeding. 3. Dysphagia significantly impacting oral intake. 4. Cholangitis or impeding cholangitis. 5. Symptomatic pancreaticobiliary disease. 6. Palliation of GI obstruction (upper GI, lower GI and pancreaticobiliary). 7. Patients with a time-sensitive diagnosis (evaluation/surveillance/treatment of premalignant or malignant conditions, staging malignancy prior to chemotherapy or surgery). 8. Cases where endoscopic procedure will urgently change management. 9. Exceptional cases will require evaluation and approval by local leadership on a case-by-case basis.