

**Physician:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Patient Name:** \_\_\_\_\_

**Date of Procedure:** \_\_\_\_\_ **Time to Arrive:** \_\_\_\_\_

**Location:** \_\_\_\_\_

## **Pre-Procedure Instructions for Colonoscopy**

We would like to make your experience as pleasant and safe as possible. Please read these instructions carefully before your colonoscopy.

Please plan to spend about 2-3 hours in our unit for your procedure. We will do everything possible to avoid a delay in your procedure, but emergencies may interrupt the schedule.

What you need to do BEFORE you start to prepare for your procedure:

1. Be sure you have made arrangements for someone to escort you home after the procedure. Your escort must meet you in the endoscopy unit when you are ready to go home. If you don't have an escort on the day of your procedure, your procedure will be CANCELLED and rescheduled.
2. Be sure you have an insurance referral, if required by your insurance company.

## PREPARATION FOR COLONOSCOPY

FIVE DAYS before your procedure:

1. If you take COUMADIN or PLAVIX, we recommend that you stop these medications. You must contact your primary care physician or cardiologist for specific instructions. You may restart these medications again after the procedure unless otherwise instructed.
2. If you have DIABETES and take medication to control your blood sugar, contact your primary care physician or diabetes doctor for instructions about how to take your diabetes medication while preparing for this procedure.
3. Stop taking iron or multivitamins that contain iron.
4. Avoid the use of aspirin and aspirin-like medications such as ibuprofen, Advil and Aleve. These medicines may increase your risk of bleeding after polyp removal.
5. Start a low-roughage diet and do not eat corn or raw vegetables. You may re-start your usual diet after the procedure.

ONE DAY before your procedure:

1. Begin a clear liquid diet at lunch and continue this diet until 4 hours before your procedure. A clear liquid diet includes water, tea, black coffee, clear broth, apple juice, white grape juice, Gatorade, soda, Jell-O. Do not eat or drink anything red, including red Jell-O. Do not drink milk. Do not use sugar-free drinks. All patients, including those with DIABETES, should be sure they get enough sugar during this time.
2. At 5 p.m., start drinking the entire gallon of Golytely

ON THE DAY of your procedure:

1. In the morning, take both fleets enemas per rectum and expel prior to coming in for your procedure.
2. Take all of your usual medicines except Coumadin, Plavix, or aspirin. If you take INSULIN, take 1/2 your usual dose.
3. If you have a medical condition requiring antibiotics before or after procedures, we will determine whether they are needed for your colonoscopy.
4. STOP CLEAR LIQUIDS 4 HOURS BEFORE YOUR PROCEDURE (except for small amount of water with medications). DO NOT EAT OR DRINK ANYTHING UNTIL AFTER YOUR PROCEDURE.
5. Wear loose-fitting, comfortable clothes.
6. Read the consent form. You will be asked to sign the form before your procedure.

Please bring these things WITH YOU to your procedure:

1. A list of all of your medications, including the doses
2. The name and phone number of your escort.
3. Your insurance cards and information.

AFTER your procedure:

1. You will be monitored in the Endoscopy Unit recovery area for 20-30 minutes.
2. You may have some abdominal bloating after the procedure. It should resolve within an hour.
3. You may eat your normal diet after the procedure.
4. You may return to work the day after the procedure.

#### HELPFUL HINTS FOR PATIENTS UNDERGOING COLONOSCOPY

1. If you have questions about your procedure, call the office at 731.884.0002.
2. Use moist wipes (baby wipes) instead of toilet paper.

## **COLONOSCOPY WITH POSSIBLE BIOPSY OR POLYPECTOMY**

Please read this so that you understand the procedure you are about to have and the risks associated with it. Please call if you have any questions about this examination.

### **PROCEDURE:**

You are to have an examination of your lower gastrointestinal tract (colon). After intravenous sedation to make the examination more comfortable, a flexible tube (colonoscope) will be inserted into your rectum and passed up through your colon. Your colon will be examined in detail. Additional procedures may be performed, including taking samples of tissue (biopsies), removing polyps, and injecting or cauterizing bleeding sites. In certain situations, such as if you have an artificial heart valve, antibiotics may be given.

### **RISKS:**

Colonoscopy is a very safe procedure when done by a specially trained physician. However, there are some risks associated with the procedure and with the sedation used. The risks associated with the procedure range from minor problems to significant medical problems. Minor problems may include bloating, abdominal cramps, or reaction to the medications used for sedation, such as inflammation of the vein at the IV site, temporary slowing of the heart rate or breathing, or fall in blood pressure. Occasionally, pain relief is incomplete.

Significant complications occur rarely. Perforation is a potentially serious problem resulting from a tear in the wall of the colon. If this occurs, it is generally treated with hospitalization and antibiotics or surgery. If a polyp is removed, the risk of perforation increases, and bleeding may also occur. With bleeding, blood transfusions as well as other treatments may be needed to stop the bleeding. Rarely, significant bleeding can occur after a biopsy. Other very rare complications can occur, including death.

The colonoscope will usually be passed through the entire colon to the point where it meets the small intestine. However, at times, only a more limited examination will be done depending on clinical circumstances. Although colonoscopy is a very sensitive and accurate examination, it is possible that an abnormality that is present will not be detected.

### **ALTERNATIVES:**

Alternatives to colonoscopy include x-ray studies and surgery. Colonoscopy may provide information that cannot be obtained by x-ray and offers the possibility of immediate treatment such as removal of polyps. Surgery to remove polyps carries a considerably higher risk.