

MODESTO GASTROENTEROLOGY DEPARTMENT**INSTRUCTIONS FOR COLONOSCOPY PREP**

Please read these instructions 1 WEEK prior to your exam.

Location: 4601 Dale Road 2nd floor, Medical Specialties 2A5 (Gastroenterology)

Hours: 7:45am – 4:30pm

Phone: 209-735-7197

Check
List



- Arrive on time for your appointment. Registration will take a few minutes.
- Your appointment may take up to 2 hours.
- You will be given sedative medications. These medications will make you drowsy, so you will need a driver to take you home. Your driver must be present at the start of your procedure (including registration) and **can not** leave our facility at anytime during the procedure. There will be **NO** exceptions.
- Bring your Kaiser Card, medication list, photo ID and procedure co-payment.
- For Benefit & co-payment questions please call 1-800-390-3507 #1.
- Leave your valuables and all jewelry at home.
- Wear comfortable loose clothes; Avoid hairspray, perfumes, colognes and lotions.
- You will **not** be able to drive, operate machinery, make important decisions, or return to work for the rest of the day. You may resume normal activities the next day unless the doctor states otherwise. If you work in transportation, please follow your company policy on returning to work after sedation containing narcotics.



If you are taking **Coumadin** (Warfarin), you will need to stop it at least 7 days prior to your exam. Please discuss with your primary care doctor prior to stopping the medication.

- Please inform your doctor and the anticoagulation clinic once you have been scheduled for this procedure. The Modesto Anticoagulation clinic phone # is: 209-557-1704



If you are a **Diabetic** please discuss with your primary care doctor about altering your medication schedule as suggested below.

- Inform your doctor that you will be on clear liquids only the day prior to your procedure.
 - Check blood sugar day before procedure at breakfast, lunch, dinner & bedtime.
 - Check blood sugar the morning of your procedure at breakfast time.
- On the day before the procedure:
 - Do not take any diabetes pills (i.e. Actos, Glipizide, Glyburide, or Metformin).
 - Reduce your morning and evening doses of long-acting insulin by one-half.
- On the day of the procedure:
 - Do not take any diabetes pills (as above).
 - Do not take any long-acting insulin.
 - Do not take any short-acting insulin unless you are using a sliding scale.
- Hard candy or clear soft drinks are ok if your blood sugars are too low up to 4 hours prior procedure.

If you are taking **Aspirin, Plavix** or any other blood thinners for a cardiac condition (including a cardiac stent) or a neurological condition, please discuss stopping these medications with your primary care doctor at least 7 days before your exam.



1 WEEK before your appointment:

- Confirm that you have picked up your Colyte Prep from the pharmacy.
- Discontinue taking iron supplements, herbal & vitamin supplements, and all anti-inflammatory and pain medications such as Motrin, Ibuprofen, Advil, Naprosyn, Relafen, and Aleve. Tylenol is permitted if needed.
- Do not take bulk forming agents (Metamucil, Citrucel, etc). Do not eat popcorn, seeds, nuts, multigrain bread, salad, cheese or any high fiber foods.
- Please discuss with your doctor medications that you are taking including **Aspirin, Plavix, Coumadin, Ticlid, Agrylin and Insulin / Diabetic Medications**. If you have questions you can also call the GI Advice Nurse at 209-735-7197.
- Blood pressure medications should be taken as normal, including the day before and the day of the procedure. Diuretics (Lasix, Hydrochlorothiazide) are the only blood pressure medications that should be stopped the day before and the day of the procedure.
- Inform the GI Advice Nurse at: 209-735-7197 if you: are pregnant, have an artificial joint or heart valve, have ever been told you need antibiotics before a dental or surgical procedure.

Colyte Prep Mixing Instructions:

Follow these mixing instructions below & ignore the directions on the Colyte Bottle

1. Pour water into the container of powder 24-36 hours before your procedure.
2. Replace the bottle cap and shake well until all ingredients have dissolved.
3. Do not add sugar or sugar-containing flavorings to the Colyte solution. Crystal light lemonade is allowed to improve the taste of the Colyte.
4. Refrigerate the solution.



1 DAY before your appointment:

- Remove Colyte from refrigerator. (If not mixed in advance refer to above instructions)
- Do not eat any solid foods. You must be on a clear liquid diet the entire day before the procedure. Clear liquids are anything you can see and read through.
- Caffeine and alcohol should be avoided because they will dehydrate you.

The following items *only* are allowed:

Water, vegetable broth, chicken broth, bouillon, consommé, white grape juice, apple juice, 7-up, Sprite, Kool-Aid, Gatorade, Jell-O, popsicles, honey and clear or stick candy. No **RED** or **PURPLE** colored fluids (these may mimic blood or stain the GI tract).



DAY of Procedure

- **Do not drink anything (including water) 4 hours before your procedure time.**
- **Bowel cleansing instructions based on your procedure time see below**



AM PROCEDURE TIME: 8AM – NOON:

You need to drink the Colyte in two sessions: 1/2 gallon the afternoon before the procedure and the other 1/2 gallon the evening before the procedure.

1. **Start** drinking Colyte (1/2 gallon) between **3-5 PM** on the day before the procedure.
2. Drink a large glass (about 8 oz) of Colyte every 10-15 minutes. It is best to drink the whole glass rapidly, rather than sipping small amounts continuously.
3. Continue to drink the Colyte until you finish the 1/2 gallon. In addition to the Colyte continue clear liquids up to 4 hours prior to the procedure. (See #7)
4. Bowel movements should occur about one hour after the first glass of Colyte. They will continue periodically for approximately 1-2 hours after you finish drinking the last glass.
5. Feelings of bloating and/or nausea are common after the first few glasses of Colyte because of the large volume of the liquid you ingested. If you get significant nausea/vomiting, wait 20 minutes before resuming drinking the prep.
6. **Finish** the other 1/2 gallon of Colyte the **evening before** the procedure between **7-9 PM**.
7. Drinking an additional (4) four, 16oz bottles of water is recommended by our Gastroenterologist to keep you well hydrated along with the clear liquids **up to 4 hours prior to your procedure time.**



PM PROCEDURE: 1PM - 5PM:

You need to drink the Colyte in two sessions: 1/2 gallon the evening before the procedure and the other 1/2 gallon the morning of the procedure.

1. **Start** drinking Colyte (1/2 gallon) between **7-9 PM** the evening before the **procedure.**
2. Drink a large glass (about 8 oz) of Colyte every 10-15 minutes. It is best to drink the whole glass rapidly, rather than sipping small amounts continuously.
3. Continue to drink the Colyte until you finish the 1/2 gallon. In addition to the Colyte continue clear liquids up to 4 hours prior to the procedure. (See #7)
4. Bowel movements should occur about one hour after the first glass of Colyte. They will continue periodically for approximately 1-2 hours after you finish drinking the last glass.
5. Feelings of bloating and/or nausea are common after the first few glasses of Colyte because of the large volume of the liquid you ingested. If you get significant nausea/vomiting, wait 20 minutes before resuming drinking the prep.
6. **Finish** the other 1/2 gallon of Colyte between **6-8 AM** the morning of the **procedure.**
7. Drinking an additional four (4) four, 16oz bottles of water is recommended by our Gastroenterologist to keep you well hydrated along with the clear liquids **up to 4 hours prior to your procedure time.**

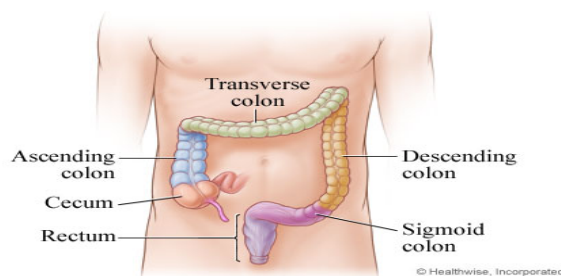


Questions / Cancellations:

- If you have any questions or need to cancel/reschedule your appointment, please call **209-735-7197.**
- If you cannot keep your appointment, please cancel no later than 48 -72 hours prior to your appointment so that we may offer your time to other patients



INFORMATION SHEET FOR COLONOSCOPY WITH POSSIBLE BIOPSY OR POLYP REMOVAL



A colonoscopy involves examining the entire colon with a long flexible tube through which we can visualize the colon and rectum, as well as remove tissue and/or polyps.

It is *essential* that you follow the preparation instructions so that your colon will be completely clean of fecal material. **If you do not follow these instructions closely, you may not be clean enough to complete the exam which would require additional prep and another appointment.**

During the exam you will wear a hospital gown and lay on your left side, with your knees drawn up towards your chest. After given an intravenous sedative and pain medication, a flexible endoscope will then be inserted into your rectum and carefully guided through your colon. A small amount of air is used to expand the colon so the physician can see the colon walls and therefore there may be mild cramping which can be reduced by taking slow deep breaths. If any polyps are seen they will be removed. The average examination takes about one hour; however, there is a wide variability in this, and it could be as short as half an hour or as long as two hours. We try at all times to minimize any discomfort you might have by giving the intravenous medications. After the procedure you will stay in a recovery room for observation. You will then be given discharge instructions and sent home with your responsible adult driver. In general, you may resume a regular diet after the exam and resume normal activities the following day.

Any procedure carries risks with it. Colonoscopy with biopsy and/or polyp removal (polypectomy) represents a significant advance in our ability to diagnose and treat conditions of the colon and rectum. The risks associated with colonoscopy include:

1. Medication reaction: It is possible that you might develop a reaction to one of the medications. This may compromise your breathing, heart rate and/or blood pressure.
2. Perforation of the colon: This is a puncture of the colon wall. This occurs rarely. If a perforation were to occur, surgery may be necessary to repair the perforation. Of those few patients who require surgery for perforation, there is about a 5-10% risk of death.
3. Bleeding: Significant bleeding may occur from biopsy and/or polypectomy. This is rare but may require blood transfusions and, even more remotely, surgery.

If you have any questions about the risks of this procedure, please discuss them with the doctor.



We highly encourage you to explore the EMMI program, our new online instructional video on Colonoscopy. This can be accessed through the GI physician's homepage (www.kp.org/mydoctor). Click on 'Prepare for your procedure' in the upper left corner.