

COLONOSCOPY INFORMATION



To appropriately clean your colon and ensure a successful colonoscopy, you will need to begin the process **5-7 days before** your procedure.

Please read all of these instructions and complete all necessary steps. **It is important to follow all the instructions in this guide.** If you do not, or if your preparation is incomplete, ineffective, or stool is still present, your procedure may be cancelled.

If you have questions or are not sure how to prepare for your colonoscopy please contact the hospital or make an appointment for further instruction.

INSURANCE COVERAGE

Please **check with your insurance** carrier by calling the number on the back of the card to make sure a colonoscopy is a covered benefit under your policy.

PRE-PROCEDURE PHONE CALL AND ARRIVAL TIME

A surgical nurse will call you the day before your procedure with your arrival time. Please ask any questions regarding your preparation or procedure at this time.

DAY OF PROCEDURE

- If your stool the morning of the procedure contains formed matter, please tell the nurse upon arrival.
- If you need to take medications the morning of your procedure, you may take them with small sips of water, but no later than 4 hours before your procedure.
- Please shower and brush your teeth the morning of your procedure.
- Do not wear any make up, jewelry, or nail polish.
- **You must have a driver to drive you home.** You will not be able to drive or return to work the day of the procedure due to the sedation you will receive.
- On the day of your colonoscopy, your endoscopist will discuss the risks of colonoscopy in more detail and you will have the opportunity to ask any questions you may have.

Briefly, the risks of colonoscopy include, but are not limited to: Bleeding, perforation (hole in intestine as the scope passes through), adverse medication reaction or allergy, adverse anesthesia reaction, heart attack, stroke, death, other organ or system damage or failure, need for further treatment, surgeries, procedures, or hospitalization, incomplete examination or significant missed finding.

If you have any concerns, questions, or would like to discuss colon cancer screening options or discuss your procedure further, please contact the Windom Area Health Surgery Clinic or schedule an appointment.

ABOUT YOUR COLONOSCOPY

A colonoscopy views the inside of your large intestine (colon) for bleeding, inflammation, polyps and tumors. See Figure 1.

DURING THE PROCEDURE

When you have a colonoscopy, you get sedation, unless you ask not to have it. This medication helps you relax and feel comfortable during the procedure. However, you still may feel some abdominal pressure, cramping, or bloating during the colonoscopy.

AFTER THE PROCEDURE

After the colonoscopy, you are taken to a recovery area. Your health care team monitors you until you are fully awake, typically about an hour.

AFTER SEDATION

After you have been sedated, it is common to have memory lapses, slowed reaction time, and impaired judgment. A responsible adult must accompany you to and from your appointment and drive you home.

For the rest of the day after being sedated:

- Rest.
- Do not drive or operate motorized vehicles, equipment, or power tools.
- Do not return to work or school.
- Do not take on responsibility for children or anyone who depends on your care.
- Do not use exercise equipment or take part in rough play or sports.
- Do not take any actions that risk hurting yourself or others.
- Do not drink alcoholic beverages.

DISCOMFORT

It is normal to feel bloated, have gas pains and pass large amounts of air after a colonoscopy. Walking can help relieve these side effects. Unless you are told something else, you may take a non-aspirin pain medication (acetaminophen, Tylenol™) per package directions as needed for discomfort.

MEDICATION

Unless you are told something else, you may resume taking your usual medications.

If you take blood-thinning medications: The health care provider who manages these medications and the provider who does your colonoscopy will need to decide when to restart these medications.

ACTIVITY

After 24 hours, you may return to your regular activities, as you feel able.

DIET

You may return to your usual diet, as you feel able. Do not drink alcoholic beverages for 24 hours.

TEST RESULTS

Ask the health care provider who ordered your colonoscopy how you will get your test results.

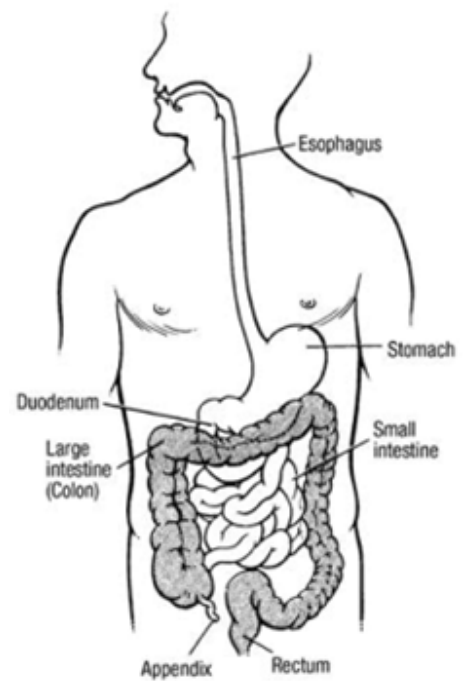


Figure 1.

COMPLICATIONS

Serious complications with colonoscopy are rare. Bleeding may occur after polyp removal. A perforation or tear in the lining of the colon also may occur. You may need surgery to fix this if it happens. Before the procedure, talk with your health care provider about possible risks and complications.

WHEN TO SEEK HELP

When to get emergency care

Call 9-1-1 or your local emergency phone number or have someone drive you to a local emergency center if you have any of the following:

- Severe nausea or vomiting, with or without bleeding.
- Continuous abdominal or rectal pain, with or without bleeding.
- A temperature of 100.4 degrees Fahrenheit (38 degrees Celsius) or higher.

When to contact your health care provider

If you have questions about a colonoscopy or this information, call your health care provider.

This material is for your education and information only. This content does not replace medical advice, diagnosis or treatment. New medical research may change this information. If you have questions about a medical condition, always talk with your health care provider.

ABOUT SEDATION

You get sedation when you have a colonoscopy. This medication helps you relax and feel comfortable during the procedure. When you have sedation, you must follow the instructions listed below or your procedure will be delayed or canceled. You may feel fine after your procedure, but your judgment may be impaired from the sedation medication you receive.

- **Arrange to have an adult family member or friend accompany you to your procedure and to other appointments, pick you up from the procedure unit and drive you home or to your place of lodging.**
- **The absence of a responsible adult will result in a delay or cancellation of your procedure if plans have not been made for your after-procedure travel.**
- Do not drive for the rest of the day. Unaccompanied air travel on the same day as your procedure is not permitted. This is for your safety and the safety of others.

SPECIALIZED INSTRUCTIONS FOR PATIENTS WITH OTHER MEDICAL CONDITIONS

If you use a Continuous Positive Airway Pressure (CPAP) or Bilevel Positive Airway Pressure (BiPAP) machine to help, you sleep: Discuss with your provider whether to bring your machine and mask with you. It may be used after the procedure.

MEDICATIONS

Supplements

Do not take any herbal supplements, especially fish oil/omega-3 or glucosamine-chondroitin for 14 days prior to surgery.

Diabetes and Weight loss Medications

Discuss how to take diabetes and weight loss medications before and after your procedure with your physician or endoscopist. The following are general recommendations appropriate for most people:

- Hold the following medications for 7 days prior to procedure:
 - Victoza (liraglutide)
 - Ozempic (once-weekly semaglutide)
 - Trulicity (dulaglutide)
 - Rybelsus (oral semaglutide)
 - Mounjaro (tirzepatide)
 - Bydureon (once-weekly exenatide)
 - Byetta (twice-weekly exenatide)
 - Adlyxin (lixisenatide)
- Long acting insulin: please take your usual PM, and AM doses
 - Levemir
 - Lantus
- Combo, intermediate, short and rapid acting insulins: hold on the day of procedure
 - Aspart (Novolog)
 - Glulisine (Apidra)
 - Lispro (Humalog)
 - Regular insulin (Humulin R, Nvolin R)
 - NPH (Novolin N, and Humulin N)
 - Novolin 70/30
- If on an insulin pump, continue the basal rate.
- Metformin: Hold if you have a history of renal failure/insufficiency
- Other medication not mentioned should be held the morning of surgery

Blood Thinning Medications

Blood-thinning medications affect clotting and bleeding. These include both prescription and over the counter medications, and medications taken for other reasons such as pain medications.

- Contact the health care provider who manages these medications about whether you should stop taking them before the procedure and for how long.
- After the procedure, the health care provider who manages these medications and the provider doing your procedure will need to decide when to restart these medications.

A general recommendation appropriate for most people is to hold these medications for at least 7 days prior to the procedure:

- Warfarin (Coumadin™, Jantoven™)
- Clopidogrel (Plavix™), prasugrel (Effient™), ticagrelor (Brilinta™), ticlopidine (Ticlid™)
- Cangrelor (Kengreal™)
- Cilostazol (Pletal™)
- Dabigatran (Pradaxa™)
- Rivaroxaban (Xarelto™)
- Apixaban (Eliquis™)
- Edoxaban (Savaysa™)
- Heparin, enoxaparin (Lovenox™), dalteparin (Fragmin™), fondaparinux (Arixtra™)
- Aggrenox™
- Vorapaxar (Zontivity™)
- Aspirin (ASA)
- Non-steroidal anti-inflammatory drugs
 - Ibuprofen: Advil, Motrin
 - Naproxen: Aleve, Naprosyn
 - Diclofenac: Voltaren, Cambia, Cataflam
 - Celecoxib: Celebrex
 - Indomethacin: Indocin
 - Meloxicam: Mobic
 - Ketorolac: Toradol
- Over the counter pain medications other than acetaminophen (Tylenol)

For your safety, if you use an external medication infusion pump (example: an insulin pump) at home, you must arrange to have a responsible adult accompany you to and from the procedure.

BEGIN YOUR COLONOSCOPY PREP HERE

COLONOSCOPY PREPARATION DECISION AIDE

Please answer the following about your typical bowel habits to determine which prep to use.

- You normally have a bowel movement every day. TRUE / FALSE
- Your bowel movements are pudding consistency or softer the majority of the time. TRUE / FALSE
- You do not have to strain to pass bowel movements. TRUE / FALSE
- Your bowel movements are comfortable, painless, and easy to pass. TRUE / FALSE
- You have never been diagnosed with, nor think you have, constipation, hemorrhoids, diverticulosis, or anal fissures. TRUE / FALSE

If you answered all the above **True**, proceed with 1-day preparation instructions, see **COLONOSCOPY ONE DAY PREPARATION**.

If you answered **False** to any of the above, proceed with 2-day preparation instructions, see **COLONOSCOPY TWO DAY PREPARATION**.

COLONOSCOPY PREPARATION: GENERAL INFO, TIPS AND TRICKS

Colon preparations work best when you take them as a split-dose. This means you take the first dose the evening before your procedure. You take the second dose the day of your procedure. **It is very important to drink all of the preparation solution.**

Colon-cleansing preparations cause frequent, liquid stools. You may have your first bowel movement one to five hours after you start to drink the solution. You may continue to pass liquid stools up to five hours after you finish the solution.

If you find it hard to tolerate the taste of the solution, these tips may help:

- Refrigerate the solution and drink it cold. **Do not add ice.**
- Suck on ice or a lemon or lime wedge.
- Drink the solution through a straw.

Side effects from the preparations may include bloating, stomach cramps, nausea and vomiting. These can be minimized by drinking plenty of fluids before and during your preparation. You also may have chills, headache and irritation of your rectal area.

If you have severe cramps, nausea or vomiting, drink the solution more slowly until your symptoms improve.

If you develop a skin rash or itching, stop drinking the solution. Call your health care provider right away. These may be signs of a serious allergic reaction.

COLONOSCOPY ONE DAY PREPARATION

Use these instructions if you normally have daily, pudding consistency or softer, easy to pass stools.

If you have diabetes, discuss any needed adjustments to your glucose management necessary during preparation with your primary care provider or with your endoscopist for further directions.

Buy your bowel preparation over the counter at least five days before your colonoscopy.

Shopping list for one day prep- all can be purchased over the counter

- Four Dulcolax® laxative tablets containing 5mg of bisacodyl each (NOT Dulcolax® stool softener).
- One 8.3-ounce bottle of MiraLax® (238 grams, 14 capfuls) or generic equivalent.
- Two 32-ounce bottles of Gatorade®. (NOT RED or PURPLE).

5-7 DAYS PRIOR

- Start eating a low fiber diet. See Low Fiber Diet handout.
- Do not eat or drink any red-colored beverages or gelatins.

2 DAYS PRIOR

- Drink at least 8 glasses of water throughout the day.
- No alcoholic beverages from this point forward.
- Continue low fiber diet.

1 DAY PRIOR

- Clear liquid diet only, no solid foods or milky liquids. See Clear Liquid Diet Handout.
- Drink at least 8 glasses of water during the day.
- **NOON-** Mix 64 oz. of Gatorade® with 8.3 oz. (14 capfuls) of MiraLax® and refrigerate. (DO NOT ADD ICE)
- **6:00 P.M.** - Take 4 Dulcolax® tablets. Start drinking the MiraLax® and Gatorade® mixture. Drink the first ½ (32 oz.) of MiraLax® mixture, one 8 oz. glass of the mixture every 15 minutes until ½ (32oz.) of the mixture is gone. If you need help keeping the pace, use a timer.
- You will experience diarrhea.
- After you finish the first ½ (32oz.) of MiraLax® mixture, continue to drink clear liquids until bedtime.

6 HOURS BEFORE YOUR PROCEDURE

- Drink the other ½ (32oz.) of MiraLax® mixture, one 8 oz. glass of the mixture every 15 minutes until the mixture is gone. (YOU MUST FINISH ALL OFF THE MIXTURE)
- When you arrive for your procedure, your stool must be clear, lemonade-like, not sludgy or brown. See Colonoscopy prep guide handout.

4 HOURS BEFORE YOUR PROCEDURE

- Nothing by mouth, including water, until after your procedure is complete.

COLONOSCOPY TWO DAY PREPARATION

Use this preparation if you have less frequent or harder stools, or you have a history of constipation, diverticulosis, anal fissure or hemorrhoids.

If you have diabetes, discuss any needed adjustments to your glucose management necessary during preparation with your primary care provider or with your endoscopist for further directions.

Buy your bowel preparation over the counter at least five days before your colonoscopy.

Shopping list for 2-day Prep- all can be purchased over the counter

- Bisacodyl (Dulcolax®) tablets 10mg - need 6 tablets.
- 2 MiraLax® bottles. Each bottle should be 238 grams or 14 capfuls.
- Two 32-ounce bottles of Gatorade®. (NOT RED or PURPLE).
- 2 bottles of Magnesium Citrate.

5-7 DAYS PRIOR

- Start eating a low fiber diet. See Low Fiber Diet handout.
- Do not eat or drink any red-colored beverages or gelatins.

2 DAYS PRIOR

- Drink at least 8 glasses of water throughout the day.
- No alcoholic beverages from this point forward.
- Clear liquids only ALL day, no solid food or milky liquids. See Clear Liquid Diet Handout.
- **Morning-** drink MiraLax® 17g (one capful) mixed in 8 oz. of water, and 1 bottle magnesium citrate.
- **6:00 P.M.** - take 2 Bisacodyl tablets.

1 DAY PRIOR

- Clear liquid diet only, no solid foods or milky liquids. See Clear Liquid Diet Handout.
- Drink at least 8 glasses of water during the day.
- **Morning-** drink MiraLax® 17g (one capful) mixed in 8 oz. of water, and 1 bottle magnesium citrate.
- **NOON-** Mix 64 oz. of Gatorade® with 8.3 oz. (14 capfuls) of MiraLax® and refrigerate. (DO NOT ADD ICE)
- **6:00 P.M.** - Take 4 Dulcolax® tablets. Start drinking the MiraLax® and Gatorade® mixture. Drink the first ½ (32 oz.) of MiraLax® mixture, one 8 oz. glass of the mixture every 15 minutes until ½ (32oz.) of the mixture is gone. If you need help keeping pace, use a timer.
- You will experience diarrhea.
- Continue to drink clear liquids until bedtime.

6 HOURS BEFORE YOUR PROCEDURE

- Drink the other ½ (32oz.) of MiraLax® mixture, one 8 oz. glass of the mixture every 15 minutes until the mixture is gone. (YOU MUST FINISH ALL OFF THE MIXTURE)
- When you arrive for your procedure, your stool must be clear, lemonade-like, not sludgy or brown. See Colonoscopy prep guide handout.

4 HOURS BEFORE YOUR PROCEDURE

- Nothing by mouth, including water, until after your procedure is complete.