



Diplomates -American Board of Internal Medicine and Gastroenterology

COLONOSCOPY
Nulytely & Dulcolax Bowel-Prep

DATE: _____ CHECK-IN TIME: _____ PROCEDURE TIME: _____

ALL PATIENTS MUST CHECK-IN ON TIME AT THE ABOVE NOTED LOCATION WITH A DRIVER.
IT IS REQUIRED THAT SOMEONE DRIVES YOU TO AND FROM YOUR APPOINTMENT

__Desert View Endoscopy Center – 12595 Hesperia Road Suite 100 - Victorville, CA 92395-Tel 760-881-3350
__St. Mary Hospital Outpatient Surgery-18300 Outer Highway 18 - Apple Valley, CA 92307-Tel 760-242-2311

For questions about your procedure, contact our office **760-881-3377** from 8:00 AM-4:30 PM Monday-Friday.
If possible, please call 7 days in advance if you need to cancel or change your appointment. Your co-pay for this procedure is determined by your insurance plan. Call your Membership Services to confirm the amount due at check-in if applicable.

Please visit our website for more information about your up-coming procedure. Click on patient education tab.
www.hdgastro.com

You must read all Information below carefully.

IMPORTANT PRECAUTIONS:

- **Diabetics:**
 - If you take a diabetes pills, **DO NOT TAKE** it on the morning of your procedure.
 - If you use long acting insulin such as lantus, NPH or 70/30, take 1/2 of your usual dose on the day before you colonoscopy. If you take these types of insulin at night take half of your usual dose the night before the colonoscopy. If your blood sugar is low, you may drink apple juice or clear liquid with sugar.
 - If you use short acting insulin such as regular or novolog, **DO NOT** take them on the morning of the procedure.
 - Check your blood sugar more frequently the day you are taking the preparation and the day of your procedure.
- **Patients taking Blood Pressure medications and or anti-seizure medication.**
 - Please be sure to take the morning of the procedure with small sip of water after your prep.
 - **IF YOU VOMIT THE MEDICATION, PLEASE INFORM THE NURSING STAFF AT TIME OF CHECK IN.**
- **Patients taking Coumadin or Warfarin.**
 - You should hold Warfarin or Coumadin for **3 days prior** to procedure, unless instructed by your provider not to do so.
 - If you are not clear on the instruction that was given to you at our office, please contact our office to clarify or determine whether you should continue these medications at least 3 days before procedure.
- **Patients taking Pradaxa (Dabigatran); Xarelto (Rivaroxaban); Eliquis (Apixaban)**
 - You should hold Pradaxa(Dabigatran); Xarelto(Rivaroxaban); Eliquis(Apixaban) for **2 days prior** to procedure, unless instructed by your provider not to do so.
- **Patients taking aspirin, anti-inflammatory pain medications (NSAID's) or Plavix (Clopidogrel) or Effient (Prasugrel)**
 - You should hold aspirin, anti-inflammatory pain medications NSAID's, Ibuprofen, Motrin, Naproxen, Meloxicam, Diclofenac) or Plavix (Clopidogrel) Effient (Prasugrel) for **7 days prior to procedure**, unless instructed by your provider not to do so.
- If you are a dialysis patient or have a prescribed fluid restriction, notify your physician before following these instructions.
- **DO NOT TAKE Iron preparations or multivitamins with iron for one week before your exam.**
 - Take ALL other prescribed medications at your normal prescribed times.
 - Leave all jewelry at home. Wear comfortable clothing and flat shoes. **No nail polish.**
 - **Bring your picture ID, co-pay fees and/or deductible payments if applicable.**
- A colonoscopy should not be performed if you are pregnant. If you suspect that you are pregnant please notify your doctor.

The bowel preparation and diet are explained below. Please follow the instructions exactly as they are written here.

Your bowel must be thoroughly clean before the exam.

DIET INSTRUCTIONS: NO BREAKFAST; NO LUNCH; NO DINNER. CLEAR LIQUIDS ONLY!!!!

- STOP EATING SOLID FOOD ON THE DAY prior to your exam.** (For ex. if your exam is scheduled on a Monday, don't eat solid food all day on Sunday.)
- Begin **a clear liquid diet** on the **day before** your colonoscopy. Have **only clear liquids** for that day. Breakfast, lunch, dinner & snacks must all be **clear liquids**. (For ex. of clear liquids include: broth, black coffee (1cup) or tea (avoid milk or cream), Yellow Jell-O, popsicles, Gatorade, 7-UP, Ginger-ale, apple juice, white grape, or white cranberry juice, etc. **NO DARK COLORS** (For ex. Red, blue purple or green) (Avoid juices with pulp.) In addition to your clear liquid diet, drink **6-8 glasses of water** each day to help promote bowel cleansing.
- NOTHING BY MOUTH** before your scheduled exam time, with the exception of **BOWEL PREP(NULYTELY/GOLYTELY)** and medications with a small sip of water.

BOWEL PREP INSTRUCTIONS:

Go to any pharmacy to pick-up the **Nulytely & Dulcolax Tablets** (may be generic) prescription that your physician has ordered. Take the Nulytely and Dulcolax Tablets according to the instructions below & **not** per the instructions on the Nulytely container. **It is very important that you follow our instructions exactly.**

- AT(12pm) NOON TAKE DULCOLAX LAXATIVE TABLETS**

You may add (4-5 packets) Crystal Light Lemon Lyme flavor (or Peach, Pineapple, White Grape flavor) packets to enhance the taste. Keep the solution in the refrigerator for several hours to chill it down to enhance the taste.

- First dose** of 3 liters of Nulytely solution is taken **the day before** the procedure:
 - Starting 4:00 PM** the evening before your procedure, drink one 8 oz glass of Nulytely solution every **20-30 minutes** until a **total of 3 liters is completed**. You will have completed about $\frac{3}{4}$ of the Nulytely.
 - You should complete this step over about 2-4 hours.
 - Refrigerate the remaining $\frac{1}{4}$ of the container. (1 liter should be left)

- Second dose** of 1 liter of Nulytely solution is taken early in the morning on the day of the procedure.
 - 5 hours before** your appointment, drink one 8 oz glass of Nulytely solution every 20-30 minutes until the final 1 liter is consumed. (For ex. If your exam is scheduled for 8:00 am you will have to start drinking the final 1 liter of solution at 3:00 am)
 - You should complete this step over 30-60 minutes**
 - At the end of this step, you should have finished all 4 liters of the Nulytely solution
 - Remember, nothing by mouth before your scheduled exam**

IT IS REQUIRED THAT SOMEONE DRIVES YOU TO AND FROM YOUR APPOINTMENT

The sedation you will receive during the procedure will cause you to become drowsy and possibly forgetful. Although you will feel well, you can NOT drive for 24 hours after the procedure. Plan to take the rest of the day off work or school. Avoid making important decisions during these 24 hours. To reduce possible nausea and vomiting, resume eating gradually with easily digested foods for your first meal.

Procedure Acknowledgement

I, _____, understand and acknowledge during my visit with
Pt's Name

The Gastro Group on: _____, I was given verbal and written instructions for my:
Date

- **Colonoscopy; EUS(lower); Capsule Endoscopy; Endoscopy(EGD);**
EUS(upper); ERCP; Liver Bx
- **Copy of my prescription of: Golytely; Nulytely w/Dulcolax Tablets; Moviprep;**
Suprep; Clenpiq; Prepopik
- **I AM AWARE I NEED AN ADULT TO DRIVE ME TO AND FROM MY**
PROCEDURE AND/OR MUST BE A MEDICAL TRANSPORTATION VAN.
NO TAXI; NO CITY BUS; NO UBER; NO LYFT; NO WALKING. NO EXCEPTIONS.
(PROCEDURE WILL CAUSE ME TO BECOME DROWSY.)
- **I need to notify The Gastro Group on any changes of medications; insurance;**
Phone number prior to my procedure date.

Procedure Consent: The risks, benefits and alternatives were explained to the patient. Risks explained include bleeding, infection, perforation, missed cancer or missed lesions, possibilities of surgery and death. The patient had the opportunities to ask questions and is willing to proceed., consent for procedure was obtained.

I understand that it is my responsibility to notify The Gastro Group if I need to cancel and or reschedule my procedure 72hrs (3days)in advance, prior to my procedure.

Please call our billing department @ 760-881-3377 ext.202; 203; 204 or ext.206 if you have any questions about patient financial responsibility.

WHAT IS A COLONOSCOPY?

A colonoscope is a long flexible tube that is about the thickness of a finger. It is inserted through the rectum into the large intestine (colon) and allows the physician to carefully examine the lining of the colon. If the physician sees a suspicious area or needs to evaluate an area of inflammation in greater detail, an instrument can be passed through the colonoscope to obtain a small tissue sample (a biopsy or brushing). Samples are taken for many reasons and don't necessarily mean that cancer is suspected.

WHAT SHOULD YOU EXPECT DURING THE PROCEDURE?

Your doctor will give you medication through a vein to make you relaxed, sleepy and comfortable. While you are lying on your left side, the colonoscope is inserted into the rectum and gradually advanced through the colon while the lining is examined thoroughly. The procedure is well tolerated. Many patients even fall asleep during the examination. If there is some discomfort during colonoscopy, it is usually mild.

In rare cases, passage of the colonoscope through the entire colon cannot be achieved. A limited examination may be sufficient if all areas of suspected abnormality were well visualized.

It takes approximately 30-45 minutes for the physician to perform your procedure. After the examination, you will remain in the recovery area for about one hour.

WHAT IS POLYPECTOMY?

During the course of the examination, a polyp may be found. Polyps are abnormal growths of tissue, which vary in size from a tiny dot to several inches. If your doctor feels that removal of the polyp is indicated, he may pass a wire snare through the colonoscope and sever the attachment of the polyp from the intestinal wall by means of an electrical current. You shouldn't feel any pain during the removal of the polyp. Polyps are usually removed because they can cause rectal bleeding or contain cancer. Although the majority of polyps are non-cancerous, a small percentage may contain an area of cancer in them or may develop into cancer. Removal of colon polyps, therefore, is an important means of prevention and cure of colon cancer, which is a leading form of cancer in the United States.

WHAT COMPLICATIONS CAN OCCUR FROM COLONOSCOPY & POLYPECTOMY?

Colonoscopy and polypectomy are safe and associated with very low risk when performed by physicians who have been specially trained and are experienced in this endoscopic procedure.

One possible complication is perforation in which a tear through the wall of the bowel may allow leakage of intestinal fluid. This complication usually requires surgery but may be managed with antibiotics and IV fluids in selected cases. Bleeding may occur from the site of biopsy or polyp removal. It is usually minor and stops on its own or can be controlled by cauterization (application of electrical current) through the colonoscope. Rarely, transfusions or surgery may be required. Other risks include drug reactions and complications from unrelated diseases such as heart or lung disease leading to heart attack or stroke. Death is extremely rare, but remains a remote possibility.

