

Patient Instructions for Colonoscopy & Upper Endoscopy

This handout will help you get ready for your colonoscopy and upper endoscopy procedure. It has information about:

- Where to go for your procedure
- Preparing ahead of time for your procedure
- Bowel preparation instructions
- Diet instructions before your procedure

It is important to read this paper right away.
You start to get ready for your colonoscopy & upper endoscopy **7 days before you have it.**

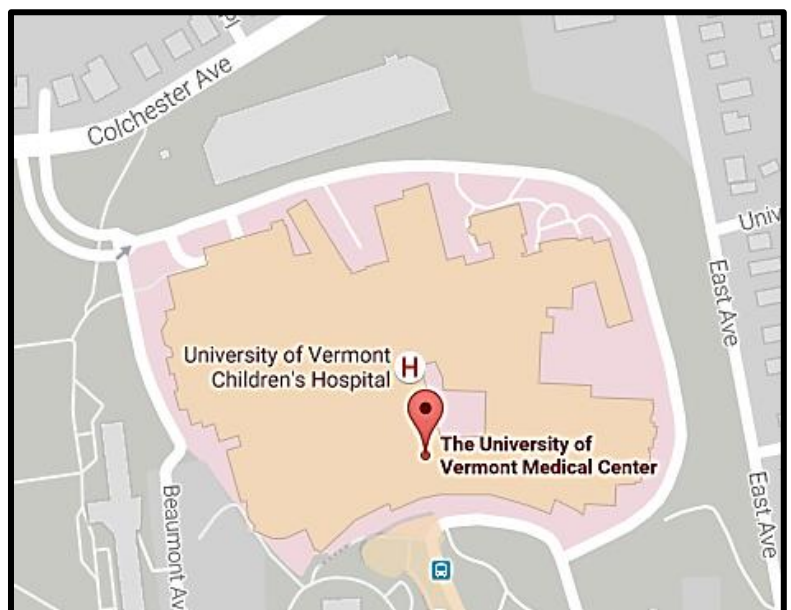
Important: Please read this entire handout now. It has instructions that you will need to follow several days before your procedure:

- If you do not follow these instructions, your colon may not be cleaned out well enough for your doctor to clearly see the inside of your colon.
- Your doctor needs to get a good look at your colon in order for your colonoscopy to be accurate. For this reason, your colonoscopy may need to be rescheduled if you do not follow these instructions.
- If you have any questions, please call the Gastroenterology Clinic at 802-847-8865.

Where to go for your procedure:

UVM Medical Center Endoscopy Suite
111 Colchester Avenue
West Pavilion, Level 4
Burlington, VT 05401

***Check in at registration on Level 3
(Main Lobby)**



Important things to do prior to your procedure:

7 days before procedure	1 day before procedure	Day of procedure
<p>Review your medicines</p> <p>Avoid food containing seeds, nuts or popcorn</p> <p>Pick up your bowel prep from the pharmacy</p> <p>Arrange for a driver for your procedure</p>	<p>Stop all solid foods</p> <p>Begin clear liquid diet as soon as you wake up</p> <p>Begin your bowel prep in the evening</p>	<p>Take any morning medicines with sips of water</p> <p>Complete bowel prep</p> <p>Do not drink anything within 3 hours of your procedure, do not chew gum</p>

7 Days Before Your Procedure

- 1. Review your medications:** Some medications should be stopped prior to your procedure.

Insulin and Diabetes Medicines: Speak with the doctor who prescribes this medication about how to manage your insulin when fasting and during the bowel preparation.

Blood Thinners: Speak with the doctor who manages your blood thinners to determine when it is safe to stop and restart these medications including:

Warfarin (Coumadin)	Clopidogrel (Plavix)
Rivaroxaban (Xarelto)	Prasugrel (Effient)
Apixaban (Eliquis)	Ticagrelor (Brilinta)
Dabigatran (Pradaxa)	Heparin
Edoxaban (Savaysa)	Enoxaparin (Lovenox)
Dipyridamole (Aggrenox)	Fondaparinux (Arixtra)

Our general recommendations for medications are included in the chart on the next page. **Do not stop taking your blood thinning medicine without first talking to the doctor who prescribes this medicine.**

Medication	Recommended time to stop
Aspirin	Continue
Warfarin (Coumadin)	Call the doctor who prescribes these medications to find out how to manage them before and after your procedure
Rivaroxaban (Xarelto) Apixaban (Eliquis) Dabigatran (Pradaxa) Edoxaban (Savaysa)	
Dipyridamole (Aggrenox)	
Clopidogrel (Plavix) Prasugrel (Effient) Ticagrelor (Brilinta)	
Iron supplement: Ferrous sulfate, Ferrous gluconate, Ferrous fumarate	
MAOI's: Rasagiline, Selegiline, Phenelzine, Tranylcypromine	Discontinue 7 days prior to procedure
	Call and report this to the GI clinic (802) 847-8865

2. Plan for your procedure:

OBTAIN the prescription bowel prep (**Golytely® or equivalent**). When your doctor requested this test, the prescription should have been automatically sent to your preferred pharmacy.

ARRANGE for someone to drive you home on the day of your procedure- taxicab, uber or bus transportation is not an acceptable option.

AVOID eating foods with seeds, including multigrain breads, raspberries, blackberries, popcorn, cucumbers etc, as the seeds tend to remain in the colon for a long time and may clog the scope during the procedure.

The Day Before Your Procedure

3. Prepare for your procedure:

START a clear liquid diet as soon as you wake up in the morning. This includes breakfast, lunch and dinner.

REVIEW the chart below to find a list of what clear liquids are allowed.

OKAY TO EAT OR DRINK	DO NOT EAT OR DRINK
Apple or white grape juice	ANY RED/PURPLE COLORED FOODS/DRINKS
Kool-Aid (not red/purple)	Any solid food including GUM
Sports Drinks (not red/purple)	Dairy products (milk, yogurt, ice cream)
Water	Coffee
Tea	Creamer or non-dairy creamer
Clear soda (7-UP, lemon-lime or gingerale)	Dark colored soda (Dr. Pepper, colas, root beer)
Clear soup broth or bouillon	Orange or grapefruit juice
Popsicles (not red/purple)	Beverages containing alcohol
Hard Candies (not red/purple)	Chocolate or caramel hard candies
Plain jello (not red/purple)	Red/Purple jello or jello with added fruit

4. Begin your bowel preparation:

BEGIN drinking the bowel preparation (Golytely®) around **6 PM**. *Please follow only the instructions written on this form rather than those written on the bottle of Golytely®*

Preparation (Around 4 PM): Fill the Golytely® container with luke-warm drinking water up to the fill line. Cap the container and shake to dissolve the powder. Once the powder is dissolved, keep solution refrigerated.

- You may only use water to dissolve the powder. Do not use juice, soda or any other liquid.
- Only approved flavor packs that come with the Golytely (or generic) or crystal light lemonade packets may be used. Do not mix anything else with the bowel prep.

Administration: Drink 8 ounces (average-sized glass or medium-sized paper coffee cup) every 15 minutes = 1 quart per hour. Continue drinking until you have completed half of the gallon (2 quarts).

- This medication is designed to cause diarrhea and may also cause nausea, abdominal bloating and cramping
- The goal is to make your stool a clear liquid, similar to the consistency and color of urine

The Day of Your Procedure

5. **Prepare for your procedure:**

ARRANGE a driver to take you home after your procedure.

TAKE your morning medications with small sips of water.

5 HOURS PRIOR to your scheduled procedure time, begin drinking the remaining portion of the Golytely® (8 ounces every 15 minutes = 2 hours total). **Nothing to eat or drink by mouth 3 hours before your procedure.**

You may continue drinking clear liquids until you begin the second half of the bowel prep. After you finish the bowel prep, no food or drink is permitted until after your procedure. **Failure to observe this rule will result in cancellation of the procedure.**

It is important to drink **ALL** of the Golytely®, even if your stools appear clear. After you complete the Golytely® prep, if the stool consistency is not a clear liquid or similar to the color of urine, please call the GI office at (802) 847-8865.

Leave any valuables you might have at home. Remove all jewelry you are wearing.

6. **Arriving For Your Procedure:**

ARRIVE AT LEAST 1 HOUR prior to your procedure time to check in at Registration on the 3rd floor. You should check in at registration even if you have received a pre-screen phone call from the endoscopy office.

Estimated time of stay after registration is **approximately 2 hours.**

Your driver must park and pick you up from the Endoscopy Suite (West Pavilion, 4th floor). You are not permitted to walk unaccompanied to meet your ride at the front of the hospital. Please ensure that your driver is on time, sedated patients can not be left unattended.

Frequently Asked Questions

1. I'm nauseated, what do I do?

Many people will have nausea and even vomit during preparation for the colonoscopy due to the poor taste of the Golytely® (or equivalent) and/or the large volume required to clean the bowels. The taste can be 'improved' by adding the accompanying flavor packets or mixing the prep with Crystal Light Lemonade flavoring only. The volume of the preparation cannot be reduced. If you do have severe nausea or vomit, do not drink any prep for approximately 30 minutes, then resume at the usual rate. Oftentimes, this will provide enough time for the stomach to empty and permit you to finish. Keep at it. It's tough, but you can do it.

2. Stool is clear, can I stop now?

No. The intestines are greater than 25 feet long. We are attempting to clean out the colon, which means it is necessary to flush out everything above the colon (stomach and small intestine). It is common to have material in the lower intestine or colon flush through initially, and hours later the material from the upper intestine is cleared. In addition, as you sleep material accumulates, cells slough off the surface, and thick mucus is produced which needs to be cleared in the morning to ensure an adequate prep. **If the colon is not completely cleaned, the procedure may be cancelled and rescheduled**, so it's important to take the entire prep.

3. Nothing is happening, what now?

Keep going. In some people, the action of the prep can be delayed (even for several hours). Please keep drinking. Eventually the preparation will begin working and diarrhea will occur.

4. What should I do if I am menstruating?

You can still have your colonoscopy. If possible, wear a tampon to the procedure and make sure to let the nurse know you are menstruating.

5. What tips will make the bowel prep easier?

Keep the bowel prep refrigerated after mixing.
Use a straw to drink to avoid the taste of the prep as much as possible.
Mix the prep with approved flavor packet.
Eat a popsicle prior to beginning bowel prep.

What is a Colonoscopy?

A Colonoscopy is an examination of the colon (large intestine) using a specialized video camera called an endoscope. This instrument is inserted into the anus and advanced up into your large intestine until where it meets the small intestine. It shows images of the lining of the large intestine. Tissue samples (biopsies) may be taken during the test.

Why is a Colonoscopy Performed?

This test can help diagnose and potentially treat:

- Early signs of cancer in the colon and rectum, specifically remove these abnormal growths called polyps
- Causes of unexplained changes in bowel habits
- Causes of inflamed tissue, abnormal growths, ulcers and bleeding

How to Prepare

Please see sheet labeled "**Patient Instructions for Colonoscopy**". You will need to alter your diet before the procedure and take colonoscopy prep. This is the hardest part of the process. Keep motivated.

A colonoscopy is generally well-tolerated and rarely causes much pain. You may feel pressure, bloating or cramping during the procedure. Medications will be given to help you relax and better tolerate any discomfort.

The Procedure

Please arrive ONE HOUR prior to your scheduled procedure time.

When you arrive at the Ambulatory Care Center (ACC) please;

- Tell the nurse about **any drug allergies, medications you take regularly and any health problems (such as heart, breathing, sugar or bleeding problems)**.
- Change into a hospital gown.

An intravenous (IV) line will be inserted into a vein in your arm. The IV will allow you to receive medications and fluids for the procedure.

After you arrive into the procedure room, you will;

- Receive medications through the IV, a combination of a sedative (relaxing) and narcotic (pain reliever).
- Be instructed to lie on your left side.

The physician will insert an endoscope into your rectum and slowly guide it through your colon. The scope transmits an image of the inside of the colon, so the physician can carefully examine the lining of the colon. The scope bends, enabling the physician to move it around the curves of your colon. You may be asked to change position occasionally to help the physician move the scope. The scope also blows air into your colon, which inflates the colon and helps the physician see the walls of the colon.

Colonoscopy takes 15 to 60 minutes. The sedative and pain medicine should keep you from feeling much discomfort during the exam. The entire process, from the time you arrive to when you leave, is estimated at two to three hours.

- **You will NOT be permitted to drive yourself home secondary to the sedative effects of the medications given for the exam. Bring someone to drive you home. A taxi driver is not acceptable.**

Risks of The Procedure

Bleeding and puncture of the colon (perforation) are possible complications of colonoscopy. Some patients may have a reaction to the sedatives. However, such complications are uncommon.

After The Procedure

If any of these symptoms occur after the test, please contact our office at 802-847-8865:

- Severe abdominal pain
- Fever or chills
- Rectal bleeding of more than one-half cup

If biopsies were taken, results will be mailed to you within a 2 to 3 week period.

What is an Upper GI Endoscopy?

Also known as:

Esophagogastroduodenoscopy; EGD; Upper Endoscopy; Gastroscopy

An Upper GI endoscopy is an examination of the upper gastrointestinal (GI) tract using a specialized video camera called an endoscope. This instrument is inserted down the throat and shows images of the lining of the esophagus, stomach and upper duodenum.

Why is an Upper GI Endoscopy Performed?

This test can help diagnose and potentially treat:

- The cause of upper GI (gastrointestinal) bleeding
- The cause of swallowing difficulties, removal of foreign objects
- The presence of tumors or other abnormalities of the upper GI tract
- Inflammation, narrowing, or tumors of the esophagus
- Acid reflux, gastroesophageal reflux disease (GERD)

How to Prepare

See **“Patient Instructions for Colonoscopy & Upper Endoscopy”**

How the test will feel:

The local anesthetic makes your throat numb. This wears off shortly after the procedure. The endoscope may stimulate some gagging in the back of the throat. There may be a sensation of gas and the movement of the scope may be felt in the abdomen. Biopsies, if needed, cannot be felt. Because of the intravenous sedation, you may not feel any discomfort and may have no memory of the test.

The Procedure

Please arrive one hour prior to your scheduled procedure time.

When you arrive at the Ambulatory Care Center (ACC), please:

- **Bring your medication list and tell the nurse about any drug allergies, medications you take regularly and any health problems (such as heart, breathing, sugar, or bleeding problems.)**
- Change into a hospital gown.

An intravenous (IV) line will be inserted into a vein in your arm. The IV will allow you to receive medications and fluids for the procedure.

After your arrival in the procedure room, you will:

- Be asked to remove dentures.
- Be asked to swallow a special type of paste that will numb your throat. This medication will help suppress the need to cough or gag when the endoscope is inserted.
- Receive medications through the IV, a combination of a sedative (relaxing) and narcotic (pain reliever).
- Be given a mouth guard to protect your teeth and the endoscope.
- Be instructed to lie on your left side.

The endoscope will be advanced through the esophagus to the stomach and duodenum (the first part of the small intestine). The endoscope will not affect your breathing. Air will be introduced through the endoscope to enhance viewing. This may make you burp. The exam typically lasts about 5 minutes, depending on examination findings.

After the test is completed, food and liquids will be restricted until your gag reflex returns. The entire process, from the time you arrive to when you leave, is estimated at two hours.

- **You will NOT be permitted to drive yourself home due to the sedative effects of medications given for the exam. Bring someone to drive you home. A taxi driver is not acceptable.**

Risks of The Procedure

There is a small chance of perforation (hole) of the stomach, duodenum, or esophagus or bleeding at the biopsy site. A patient could have an adverse reaction to the medication. The overall risk is less than 1 out of 2,500 people.

After The Procedure

If any of these symptoms occur after the test, please contact our office at 802-847-8865:

- Difficulty swallowing
- Fever or pain
- Black stools or blood in vomit

If biopsies were taken, results will be mailed to you within a 2 to 3 week period.