



Medical Clinic of Houston, L.L.P.

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COLONOSCOPY INSTRUCTION SHEET

John T. Dugan III, M.D.

Procedure Date: _____

Check-in Time: _____

Procedure Time: _____

Please call the procedure center at least **5 days in advance** and pre-register for your endoscopy.

Your procedure is scheduled at one of the following facilities:

Medical Center Endoscopy

6560 Fannin Street
Suite 600, Scurlock Tower
Ph: 713-796-0500

The Methodist Hospital TMC Endoscopy Center

6501 Fannin Street 7th Floor
Jones Neurosensory Building
Ph: 713-441-5470
Registration: 713-394-6805

Memorial Hermann Hospital TMC Ertan Endoscopy Center

6400 Fannin Street
14th Floor
Ph: 713-704-6500

The results of this test depend on your colon being carefully cleansed and emptied. Feces (stool) in the colon can hide disease and tumors that may be present. Please follow these instructions as carefully as possible; otherwise the exam may be inaccurate or need to be repeated.

Prior to your procedure, you may receive a call from the Business Office at Medical Clinic of Houston. If you do not, please call the clinic and ask for the Business Office.

You will be receiving sedation for your procedure. Therefore, **you must have a responsible adult available to transport you home** after the procedure. If you do not have someone available to drive you home, your procedure will be rescheduled.

If you are taking any **blood thinners (for example: Plavix, Coumadin, Warfarin, Xarelto, Eliquis, Effient, Pradaxa, Brilliant etc.) or diabetic medications**, please call our office immediately to discuss how to manage your medications.

Additional information: <http://patients.gi.org/topics/colonoscopy>

Additional information: <http://patients.gi.org/topics/sedation-for-endoscopy>

Should you have any other questions or concerns, please contact our office.

7 DAYS BEFORE THE PROCEDURE:

- Arrange an escort for transportation after the procedure. You will be given anesthesia, so you cannot drive a car or take a bus/taxi/uber home.
- Stop taking iron supplements, vitamin E, ginkgo, garlic and fish oil.
- Stop taking any fiber supplements (Metamucil, Citrucel, Fibercon, etc.).
- Stop taking Aspirin for 5 days before the procedure. If you have a STENT, you can continue Aspirin, 81 mg daily.

3 DAYS BEFORE THE PROCEDURE:

- Confirm your escort for transportation.
- Review the diet you need to follow for the next 2 days, and plan your meals accordingly.

- Stop taking all anti-inflammatory medications. These include, but are not limited to, Nuprin, Bufferin, Anacin, Advil, Motrin, Indocin, Voltaren, Aleve, Ecotrin, Relafen, Alka Seltzer, Naprosyn and Meloxicam. If you need a pain reliever, the only medication we advise is Tylenol.

2 DAYS BEFORE THE PROCEDURE:

- Drink at least 8 glasses of water throughout the day.
- Stop eating seeds, popcorn, nuts, and whole grains.
- Start a low residue diet. **Allowed:** soup, fish, chicken, eggs, white rice, white bread, crackers, plain yogurt, pasta, potato with no skin, gelatin, broth, bouillon, and all liquids. **Avoid:** fresh/dried fruit, raw vegetables or those with seeds, corn, whole grain bread, raisins, cloves, and any other meat besides what is listed above.

24 HOURS BEFORE THE PROCEDURE: START A CLEAR LIQUID DIET.

If your procedure is in the morning: start the clear liquid diet a whole day before the procedure.

If your procedure is in the afternoon: start the clear liquid diet on the afternoon before. So you may have a light breakfast (toast & coffee) on the morning before the procedure date.

If you put a liquid in a clear glass, and you can see through it, it is probably safe to drink. A clear liquid diet can include:

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| • Apple, white grape, and white cranberry juices. | • Tea or coffee without milk. |
| • Clear beef or chicken broth, without solid pieces of food in it. | • Clear sodas, Gatorade, Kool-Aid (no red colors). |
| | • Popsicles, various Jello flavors (no red colors) |

AVOID:

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| • Red and purple coloring in any of the beverages that you drink. | • Juices with pulp. |
| | • Milk, cream, ice cream, and all solid foods |

EVENING BEFORE THE COLONOSCOPY: Start the laxative bowel prep. Follow the detailed instructions on the attached sheet (Suprep, Prepopik, Moviprep, etc.).

- **The prep will consist of two separate doses.**
- **Dosing instruction will be provided by Dr. Dugan or his staff.**

THE DAY OF YOUR PROCEDURE:

- ***Do not eat or drink anything, including water, with the exception of your laxative prep.***
- You must be on an empty stomach for the procedure; otherwise we may have to reschedule the procedure.
- You may take important medications (like heart or blood pressure meds, etc.) with a small sip of water on the morning of your procedure. If your procedure is scheduled early (before 10 am), you may want to wait until after the procedure to take your medicines.
- If you are on Insulin, please contact your prescribing physician for instructions.
- Bring a complete list of all your medications with you to the endoscopy center.
- Wear comfortable clothing. Please leave all your jewelry and valuables at home.

HELPFUL TIPS:

- Some people develop nausea or vomiting during the bowel prep. The best remedy for this is to take a break from drinking the solution for about 30 minutes and then resume. It is important to drink the entire prep solution.
- Walking between drinking each glass can help with the bloating.
- Use baby wipes instead of toilet paper.
- Apply some Vaseline or Desitin to the anal area prior to starting the laxative prep and re-apply as needed.
- Remain close to toilet facilities as multiple bowel movements may occur.
- If you are diabetic, use sugar-free drinks during the prep and monitor your blood sugar closely to prevent low blood sugar. Use an insulin sliding scale if needed for high values.

General Colonoscopy Information

COLONOSCOPY: It is an endoscopic procedure performed on a clean, prepared colon using a flexible scope with fiber optics to visualize the entire colon (also known as the large intestine) and possibly the last part of the small intestine. It is often performed for colon cancer screening. It also allows for treatment such as removal of polyps, biopsies of unusual areas or control of bleeding.

LENGTH OF PROCEDURE: The procedure usually lasts from 20-30 minutes but can take longer if polyps are present, if the colon is excessively long or twisted, or if excessive scar tissue exists. The extent of time required from check-in to check-out is approximately 3 to 4 hours.

AWARENESS DURING THE PROCEDURE: The procedure is usually done with either moderate “conscious” sedation (where you are comfortable during the exam, may fall asleep but are easily aroused) or with MAC (Monitored Anesthesia Care, using medications such as Propofol). Which one used depends on a variety of issues including your medical history and past experience with anesthesia. You may experience some cramping or “gassiness” during the procedure or after. If you have had prior problems with anesthesia, please let our office know immediately.

PREPARATION: Please follow the attached instruction sheets. Sometimes, depending on your other health problems and symptoms, your consult visit can be done at the time of the procedure to save you time. If you have any significant symptoms or medical problems, please schedule an office consultation prior to your procedure.

AFTER THE PROCEDURE: You cannot drive home after the procedure due to the IV sedation and you should not drive that day. You should take the rest of the day off and not operate any machinery, go to work, or sign any legal documents for the rest of the day. It is preferable that someone stay with you until the following morning. You should be able to return to work the following morning.

COMPLICATIONS: Complications are rare, and can include (but are not limited to) bleeding, infection, pain, missed lesions, respiratory distress, or bowel perforation. If one does occur, it will be treated appropriately and may require hospitalization, medication, additional procedure(s), blood transfusion, or surgery. Please contact our office immediately if you experience any of the following:

- Temperature of 101 F degrees or higher at any time within 72 hours after the procedure.
- Blood from the rectum of greater than one teaspoon.
- Severe abdominal pain or vomiting.
- Any other symptoms that may concern you.

ALTERNATIVES: Alternative methods for colon cancer screening include sigmoidoscopy (only looks at the left side / lower part of the colon), barium enema (radiology study), 3-D virtual colonoscopy (not yet approved as a screening tool and usually not covered by insurance), and stool hemoccult testing. Please make an appointment in the office if you would like to discuss the alternatives further.

RESULTS & FOLLOW-UP: Procedure results will be given both verbally and in written form right after the procedure. They will be discussed with you and anyone waiting for you (if you allow). Pathology results will be mailed to you within a few weeks. We will contact you by phone if anything needs immediate follow-up. If you have not received your pathology results within 2 weeks, please contact the office for results. Follow-up office appointments will be made based on procedure findings. The timing of your next recommended colonoscopy is usually based on family history, findings at the time of colonoscopy, pathology results, and other risk factors.

INSURANCE: Colonoscopies are usually covered by insurance companies. You may still be responsible for a deductible or a co-payment. While our office will generally pre-certify your procedure, IT IS YOUR RESPONSIBILITY TO CALL YOUR INSURANCE COMPANY TO VERIFY YOUR BENEFITS FOR THIS PROCEDURE. Medicare does not require precertification.