



CENTER FOR DIGESTIVE HEALTH & NUTRITION 725 CHERRINGTON PARKWAY • MOON TOWNSHIP, PA 15108

COVID-19 2024 NOTICE

If you have a fever, unexplained cough, or respiratory symptoms or have been exposed to someone with symptoms or confirmed COVID-19 infection in the last 4 weeks, CALL and reschedule your colonoscopy procedure. Don't do the prep and risk being turned away.

NuLYTELY (4 Liter PEG) Colonoscopy Prep

Modern colonoscopy is a diagnostic procedure to examine the colon or large intestine. Over the past 40 years, it has become the gold standard in screening for colon polyps and prevention of colorectal cancer.



Most exams are quick, painless, and very safe with modern sedation methods and newer thin, flexible instruments. For an accurate and safe exam, however, it is very important that your colon is purged of all waste material by means of a restricted diet and laxative preparation, or "prep." Colonoscopy is an important test. Read this carefully and take the time to prepare correctly. REMEMBER: An accurate colonoscopy requires an excellent prep.

Special Instruction for Diabetics (READ LAST PAGE)

We realize our patients with diabetes may be wondering about the safety of a colonoscopy prep. The bottom line is it can be done safely if you follow instructions. If you are taking medication for Diabetes, please read the last page for special instructions

THREE (3) DAYS BEFORE YOUR COLONOSCOPY

Make arrangements for a companion to accompany you to your appointment and drive you home. It is best that this person is someone we can share the examination results with. *Bring a driver who can remain in the PARKING LOT (due to Covid) the entire time you are here. Arriving late or without a driver may require canceling and rescheduling your procedure.*

Eat normally, but don't overeat to compensate for the upcoming fast. Please avoid Metamucil, vitamins containing iron, raw vegetables, corn, and foods with small seeds such as tomatoes, sesame seeds, kiwi, and cucumbers for a few days before your exam. Go to the drug store and purchase your prep kit with the attached prescription if this was not already called into your pharmacy.

□ one 4-liter bottle of NuLYTELY lavage solution (or GoLytely , Colyte, PEG, etc)

For this preparation, you may use any brand of PEG lavage solution. None can claim to taste good, but probably the least offensive is NuLYTELY which is less salty and comes with flavor packs. Other commonly prescribed solutions include GoLytely, CoLyte, and PEG generic. They all work the same way. Some come pre-flavored. Golytely and generic PEG are unflavored, but you may add some lemon or iced tea-flavored Crystal Light.

Purchase the prep items at least one day before the day of preparation and read these instructions carefully before you begin.

TWO (2) DAYS BEFORE YOUR COLONOSCOPY

Regular activity and diet, but don't overeat. Also, don't go into the prep constipated. If you feel that is the case, we suggest you take an over-the-counter laxative (such as 4 TBSP of Milk of Magnesia) and 4 glasses of water after dinner TWO nights before your exam to "prime the pump."



We also recommend that you also purchase:

- □ A soft brand of toilet tissue. We suggest Charmin Plus.
- □ A box of baby wipes such as Huggies or Pampers Aloe wipes
- □ One small tube of diaper rash or Zinc Oxide cream (such as A & D Zinc Oxide)
- □ Two bottles of Boost Plus drink, (Diabetics use Boost Glucose Control.)
- □ A small box of Animal Crackers or Vanilla Wafers.
- □ Clear liquids and Jello. See list at end. (NO red, green, blue, or purple.)

ONE (1) DAY BEFORE YOUR COLONOSCOPY

Food will be restricted this day, but you MUST drink plenty of clear fluids to prevent dehydration from the effects of the laxative. You may have as much Gatorade, clear broth, bouillon, iced tea, hot tea, black coffee, strained or clear fruit juices, flavored jello, sodas, Kool-Aid, clear hard candy, Italian ice, or popsicles as you like. <u>Please avoid bright red, purple, or blue-colored items such as Cherry Jello or Cherry Popsicles.</u> The best choice is banana, pineapple, orange, or lemon flavored. No solids. No milk or cream products are allowed.

Have a light breakfast such as one large or two medium eggs *or* a small portion of skinless chicken, turkey, or fish with 1 slice of white toast, pulp-free orange juice, and cream less coffee or tea. You may take all of your normal prescription medications. If you are taking blood thinners such as Coumadin, Plavix, Ticlid, Aggrenox, or if you are taking Insulin or pills for diabetes, call for special instructions before you begin your prep. Prepare the PEG solution according to the instructions on the bottle. (To improve the flavor of the unflavored lavage solution, you may add one packet of Lemonade or Ice Tea Flavored Crystal Light mix from your grocery.) Chill the solution in your refrigerator. You may go to work, but bring two bottles of Boost Plus and a box of animal crackers.

Approximately 10 AM

To minimize hunger and maintain your energy, have:

One 8 oz bottle of chilled Boost Plus or Ensure Plus and just four (4) Animal Crackers or Vanilla Wafers. Follow with 8 oz of any clear liquid.

Approximately Noon

To minimize hunger and maintain your energy, have another:

One 8 oz bottle of chilled Boost Plus or Ensure Plus and just four (4) Animal Crackers or Vanilla Wafers. Follow with 8 oz of any clear liquid.

Approximately 6:00 PM

Begin drinking the PEG lavage solution. You should drink 8 ounces every 15 minutes until half of the solution (8 glasses) is consumed. This will take about 2 hours. Drinking each glass quickly rather than slowly sipping it is best, although some patients prefer drinking it through a straw. It is better chilled. If you develop nausea or vomiting, pause for an hour and try to resume the preparation.

Approximately 8:00 PM:

You will have finished drinking half of the bottle. You can expect most of the fluid to be evacuated within an hour or so. You may drink as much clear liquid as you wish - the more, the better. Put the remaining PEG solution in your refrigerator overnight. Go to bed early and get a good night's sleep. Don't forget to set your alarm.

MORNING OF YOUR COLONOSCOPY

Four and 1/2 Hours before your appointment

Do NOT eat breakfast. Resume drinking the PEG lavage solution. Please drink four (4) more full glasses of the remaining solution. *You must finish this at least 4 hours before your exam and remain fasting the last 4 hours before your procedure time*. NO additional fluids. NO gum, candy, or mints. If you are diabetic, please do not take your diabetic medication on the morning of the exam. Unless otherwise instructed, you may take all of your other regular medications with a sip of water. It is normal to continue to pass small amounts of clear or yellow liquid.

You should plan to arrive at your scheduled appointment time. This allows time for registration, preop preparation, and any special orders your physician may require, and to answer any questions you may have.

Wear loose, comfortable, easily removable clothing and leave high heels, jewelry, and other valuables at home. Please bring your insurance card and driver's license. If there is a deductible or copay, be prepared to pay it.

Plan to arrive ONE HOUR before your procedure time.

Plan to arrive <u>ON TIME</u> for your appointment. Wear comfortable clothing and shoes that are easily removed. Leave jewelry and other valuables at home. No firearms are permitted. Bring your insurance card and driver's license. If there is a copay or deductible, be prepared to pay it PRIOR to your procedure.

YOUR DRIVER

Bring a driver who can remain here the entire time you are here. The average visit is about two hours. Arriving late or without a driver may require canceling and rescheduling your procedure. Patients that would like to have their driver come to recovery after their procedure must have their driver remain in the waiting room the entire time. If the nurse comes to the waiting room to call your driver back and they have left the waiting room, they may miss the opportunity to come to recovery when the doctor goes over the results.

After the exam, you must be driven directly home, not to a restaurant. You may then gradually resume a normal diet and take a nap as the sedation wears off. You should not plan to work or drive until the following morning. You may resume normal activities the day after your exam. It is best that you do not plan to fly or travel long distances or to remote areas away from medical care for the first week, especially if a polyp was removed.

Note: "CLEAR" LIQUIDS ALLOWED: This includes clear fat-free broths, bouillon, coffee, and tea (without cream or non-dairy creamer), Kool-Aid, Crystal Light, carbonated beverages, clear sodas like ginger ale, orange juice, and other fruit juices without pulp, popsicles without pulp, Jell-O, hard candies, and Italian ices. **You are not allowed:** orange juice with pulp, fruit nectars, liquids you cannot see through, milk, cream, and non-dairy creamer. Avoid anything red or purple in color. No alcoholic drinks.

YOU SHOULD CALL THE OFFICE AT 412-262-1000 AFTER 8:30 AM ON THE MORNING OF YOUR TEST IF YOU ARE STILL HAVING SOLID OR BROWN STOOLS.

Three Rivers Endoscopy Center

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Special Instruction for Diabetics

We realize our patients with diabetes may be wondering about the safety of a colonoscopy prep. The bottom line is it can be done safely if you follow instructions. Your colonoscopy prep will mean significant changes to what and how much you eat, which can easily cause unpredictability of blood sugar. This will require a temporary adjustment in your diabetic medications. The biggest fear is low blood sugar (hypoglycemia). You should monitor your blood sugar. We don't want you going low. We advise patients with diabetes to tolerate a slightly higher blood sugar for a day or two, which will not cause long-term harm. One day of glucose readings that are slightly higher or "permissive hyperglycemia" is way better than having a hypoglycemic event," Follow the guidelines below. If you have brittle diabetes or your diabetes is difficult to control, discuss the prep adjustments with your endocrinologist or PCP. A Feb 2023 review offers some standard recommendations:

- **Metformin/Glucophage:** Stop taking it when the liquid diet begins and resume once you're back to eating regular meals after the procedure.
- Semiglutide: (Ozempic/semiglutide, Rybelsus/semuglutide, Wegovy/semiglutide, Mourjero/trizepatide). IF daily capsule, stop 24 hours before the exam; IF weekly injection, stop 1 week before the exam. Resume afterward at normal dose.
- Other GLP-1 receptor agonists: (Trulicity/dulaglutide, Byetta/exenatide Victoza/liraglutide): Stop taking when the liquid diet begins and resume once you're back to eating normal meals after the procedure. If your regular weekly injection is scheduled during your colonoscopy prep period, hold off until you're back to eating normally.
- **DPP-4 inhibitors:** (such as Januvia/sitagliptin, Tradjenta/linagliptin, and Onglyza/saxagliptin): Stop the morning of the procedure and resume that evening.
- **SGLT-2 inhibitors:** (such as Jardiance/empagliflozin, Farxiga/dapagliflozin, Brenzavvy/bexagliflozin, and Invokana/canagliflozin): Stop taking <u>three</u> days before the procedure and resume once you're back to eating normal meals *and* are adequately hydrated.
- **Sulfonylureas:** (Such as Glucotrol/Glipizide) Stop taking the day before the procedure and resume once you're back to eating normal meals.

Insulin, the diabetes drug with the highest risk of hypoglycemia and an absolute necessity for people with type 1, requires special attention. Please speak to your endocrinologist or PCP because the following are only starting points:

- **Rapid insulin:** People who use an insulin-to-carb ratio to determine how much rapid insulin to use for meals can continue to follow their normal dosing strategy. Those who use fixed doses for each meal must substantially cut their usual dose during the clear liquid prep phase.
- **Basal insulin:** Beginning the day before the procedure, patients will be asked to cut their basal insulin dose by 20 to 50 percent, depending on the insulin they use and the type of diabetes they experience.