



Procedure Reminders

Colonoscopy/Flexible Sigmoidoscopy

Appointment Date: _____ **Arrival Time:** _____

Your **arrival time is 45 minutes prior to your procedure time**. This allows time for check-in, health history review, and pre-procedure evaluation. Please be aware that we may contact you in the days leading up to your procedure, as your arrival time may be subject to change.

Follow all instructions carefully, as improper preparation may result in your procedure being rescheduled.

Contact our office at **(336) 448-2427 (option 6, then option 2)** if you have any questions about your prep or if there are any changes in your medical history between the day of scheduling and the appointment date.

- **Transportation:** Due to the sedation you will receive, someone at least 18 years of age MUST bring you to your appointment and drive you home afterwards. A taxi, bus, Uber, Lyft, or similar service is NOT an acceptable form of transportation. If you arrive without a driver, your procedure will be rescheduled. If you have questions about whether a method of transportation is acceptable, please contact our office.
- **Alcohol Consumption:** Do not consume any alcohol during your procedure preparation.
- **Jewelry/valuables:** We do not provide a secure area for these items.
- **Medications:** Take all necessary medications at least 4 hours prior to your arrival time.
 - **Diabetes and Weight Loss Medications:** Stop taking the below medication for the recommended time period prior to your procedure. For injectable diabetic medication not listed below, contact the prescribing physician regarding instructions for the day before and the day of the procedure. **DO NOT TAKE oral diabetic medication the day of the procedure.**

Do not take any of these the day of procedure: Adlyxin (Lixisenatide) Daily Byetta (Exenatide IR) Daily Rybelsus (Semaglutide) Daily Saxenda (Liraglutide) Daily Victoza (Liraglutide) Daily	Stop any of these 1 week prior to procedure: Bydureon BCise (Exenatide ER) Weekly Ozempic, Wegovy (Semaglutide) Weekly Mounjaro Weekly Phentermine Weekly Trulicity (Dulaglutide) Weekly Zepbound Weekly
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- **Blood Pressure Medications:** DO NOT SKIP any doses of your blood pressure medication.
- **Iron Medications:** STOP taking iron 5 days before your procedure.
- **Inhalers and Nebulizers:** May be used up to the time of your procedure.
- **Medications for Diarrhea** (i.e. Imodium, Colestipol/Colestid, Cholestyramine/Questran, Lomotil/Diphenoxylate Atropine): DO NOT TAKE these medications during the course of your prep.
- **Blood Thinner Medication:** You may remain on aspirin unless otherwise instructed. For prescription blood thinners, contact the physician who prescribes that medication to make sure it is okay to stop taking it for the recommended time period prior to your procedure. If you are on a blood thinner that is not listed, contact the prescribing physician for instructions.

Aggrenox/Plavix: 5-7 days	Pletal/Persantine: 48 hours
Arixtra: 24 hours	Pradaxa: 48 hours
Brilinta/Coumadin/Jantoven: 5 days	Savaysa: 1-3 days
Effient: 7 days	Xarelto: 24-48 hours
Eliquis: 48 hours	



SUTAB

Colonoscopy Preparation Instructions

(For patients with no history of renal disease)

FOLLOW THESE INSTRUCTIONS – NOT THOSE ON THE BOX YOU RECEIVE FROM THE PHARMACY!

Items to Purchase

Sutab (prescription)

3 Days Before Procedure

- ✓ Eat a well-balanced diet. Avoid whole grain food, nuts, seeds, popcorn, raw or dried fruits and vegetables, and salads.

Day Before Procedure Beginning at 12:01am

- ✓ For the entire day before your procedure, you should have **NO SOLID FOOD**. You should begin a clear liquid diet.
 - Clear liquids may include water, soft drinks, coffee or tea without cream, popsicles, broth/bouillon, Jell-O, non-pulpy juice, etc.
 - DO NOT consume anything red in color OR dairy products.
- ✓ At 4:00pm, complete the following steps:
 - 1) Open 1 bottle of 12 tablets.
 - 2) Fill the provided container with 16 ounces of water (to the fill line).
 - 3) Swallow each tablet with a sip of water, drinking the entire amount of water over a 15–20-minute time period.

If you experience nausea, bloating or cramping, pause or slow drinking the additional water until your symptoms go away.
 - 4) Approximately 1 hour after you take the last tablet, fill the provided container again with 16 ounces of water (to the fill line) and drink the entire amount.
 - 5) Approximately 15-20 minutes after finishing the second container of water, refill the provided container with another 16 ounces of water (to the fill line) and drink the entire amount.

Day of Procedure

- ✓ Continue a clear liquid diet.
- ✓ **6 hours prior to arrival time:** Repeat steps 1-5 (shown above) with the second bottle of tablets.
- ✓ **4 hours prior to arrival time:** You must be finished with all SUTAB tablets and your final glass of water.

ABSOLUTELY NOTHING ELSE BY MOUTH AFTER THIS TIME!



Frequently Asked Questions Colonoscopy

What foods should I avoid in the days leading up to my procedure?

Beginning 3 days prior to your procedure up until the day you begin your prep, you should avoid foods high in fiber, raw fruits and vegetables, salads, nuts, seeds, popcorn, whole grain foods, beans, and lentils. These foods take longer to pass through the colon and may cause difficulty in getting a clear view. This may result in the need for an earlier rescreening. If you have eaten a lot of these types of foods during the days leading up to your procedure, contact us.

What types of foods are “low fiber”?

Examples are white bread, white rice, pastas made with white flour, cooked fruits and vegetables, chicken, fish, dairy, and eggs.

Can I continue the clear liquid diet after I start drinking the prep solution?

Yes, you should continue the clear liquid diet up until 4 hours prior to your arrival time. At this time, you should have nothing else by mouth.

Why do I have to wake up so early for the 2nd dose of my prep?

A split-dose prep has proven to be the most effective for a successful colonoscopy. It is crucial that you follow the directions provided to you by GAP.

What is a “clear stool”?

A clear stool can have a slight yellow, green, or brown tint but is completely transparent without any solid particles.

I have not had a bowel movement yet, what should I do?

Bowel movements can take up to 5-6 hours after drinking your first dose of prep solution. Be patient and continue to drink clear liquids. If you have not had a bowel movement by the morning of your procedure, contact us for further instructions.

Can I brush my teeth the morning of my procedure?

Yes, but do not swallow any liquid.

Can I have mints, hard candy, or gum the morning of my procedure?

No, as they can stimulate gastric juices.

What if I become nauseous during my prep?

If you experience nausea or vomiting, slow down the rate at which you are drinking the prep solution. Try taking a 45-minute break then resume drinking the prep. You must finish drinking the solution, even if you take breaks and it takes longer to complete. If vomiting continues, contact us for further instructions.

What can I do if I become cold or chilled while consuming my prep?

Drink warm clear liquids such as chicken broth, coffee without creamer, or tea.

I have additional questions. Who can I talk to?

Contact our prep team at **(336) 448-2427 (option 6, then option 2)** if you have additional questions or concerns.



Colonoscopy / Biopsy / Polypectomy

Description of Procedure:

You will lie on your left side. To allow your doctor to see the inside of your colon, a flexible tube with a small camera (called a colonoscope) will be inserted into your rectum or stoma. Photos may be taken as considered advisable by the doctor. Your doctor will insert air into your colon so that they can have a better view. You may experience bloating after the procedure because of this, but this will be relieved by passing gas. Your doctor may take a small sample of tissue or remove abnormal growths (called polyps) for testing. Polyps may be removed because they may contain cancer or pre-cancerous cells. Any tissues that are removed may be reviewed by a pathologist.

Sedation:

I consent to the administration of moderate or deep sedation/anesthetics (by mouth or through a needle placed in a vein in my arm or hand) as considered necessary or advisable by the physician, certified registered nurse anesthetist, and/or registered nurse under supervision of the physician. I understand the alternatives, the risks involved, and possible complications of sedation.

Teeth in poor condition and dental prosthetics may become loose, broken, or dislodged during the protective procedures related to anesthetic. While every effort is made to protect teeth, such damage is a recognized risk. Gastroenterology Associates of the Piedmont will not accept responsibility for damage to teeth or dental prosthetics.

Potential Risks:

- Irritation of veins (5%)
- Excessive sedation (1%)
- Allergic reaction to medication (<1%)
- Aspiration (If you vomit and it gets into your lungs, pneumonia can occur) (<1%)
- Perforation (a hole or tear in the colon) (<1%)
 - Risk increases to 1% if polyps are removed.
 - Rarely, blood transfusions or surgery may be required to treat this condition.
- GI Bleeding (<1%)
 - Risk increases to 1% if polyps are removed or if patient is currently taking a blood thinning medication.
 - Rarely, blood transfusions or surgery may be required to treat this condition.
- Rectal irritation
- Infection
- Death
- There is a small chance that other organs (spleen, liver, kidneys) could be damaged during the procedure.
- Risks may increase if patient uses steroids or has significant respiratory, liver, kidney or brain impairment.

After the Procedure:

- I understand that if I am scheduled for a procedure with sedation, I must have an adult (age 18+) available to accompany me home. This adult may be given my discharge instructions.
- I agree not to drive/operate machinery for eight hours after leaving this facility.
- I agree not to drink alcohol, take tranquilizers or sedatives for eight hours after leaving this facility.



Consent for Procedure(s)
Colonoscopy
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Additional Information:

- Procedures that are presently unknown may be performed that are different from or in addition to those planned in the case that the doctor or his/her associates or assistants consider them advisable or necessary.
- Doctors in training may be present and participate during the procedure(s).
- We do not honor living wills or Do Not Resuscitate Orders (DNR) at this facility due to the fact that a terminal, incurable, vegetative state is not anticipated in this outpatient setting.
- Gastrointestinal endoscopy is generally a safe and effective way to examine the gastrointestinal tract. It is not 100 percent accurate in diagnosis. No guarantee has been given by anyone as to the result of the procedure(s). It is not guaranteed that all polyps will be seen or removed during the procedure. Other options are available, including (but not limited to) radiologic studies, surgery and medical treatment.

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