

GREATER BOSTON GASTROENTEROLOGY

George Dickstein, MD FASGE Steven N. Fine, MD Jennifer Lewis, MD Andres D. Mogollon, MD
Jaime A. Oviedo, MD FACG Mark A. Painter, MD Greta Taitelbaum, MD CM FRCP(C) FACG

Phone: (508) 620-9200

Facsimile: (508) 620-6483

Website: <http://www.greaterbostongi.com>

Please read the materials in this packet as soon as you get them - do not wait until the day of your test. This is important because your some of preparation may begin as early as one week before the day of your test.

You are scheduled for a **procedure** on: _____ at: _____.

Please report to the location checked below 45 minutes early at: _____

MetroWest Medical Center
115 Lincoln Street
Endoscopy Dept 1st Floor
Framingham, MA 01702

Boston Endoscopy Center
175 Worcester Street
Wellesley Hills, MA 02481

Charles River Endoscopy
571 Union Avenue
Framingham, MA 01702

MetroWest Medical Center
67 Union Street
Surgical Day / 3rd Floor
Natick, MA 01760

UMass Memorial at Southboro
Endoscopy Center
28 Newton Street, 1st Floor
Southboro, MA 01772

1. It is extremely important that you make arrangements to have a responsible adult available to take you home after your procedure. **You may not drive yourself home after the test.** If you take a cab, someone must ride home with you in the cab (in addition to the cab driver). This is a policy that is strictly enforced for your safety. **No exceptions** are made unless you plan to undergo the procedure without sedation. If you wish to do this, you should discuss with your doctor in advance.
2. You must have the entire day off, no working, no driving, and no plans. You will receive sedatives for your procedure. As you recover from the sedatives, you should not go back to work or school and you should not make important decisions. If you normally care for children or disabled relatives, get help with these responsibilities on the day of your test.
3. **Important** –Do not stop taking any medicine that a doctor has asked you to take without talking first with that doctor. He/she may want you to continue to take the medicine even during your preparation for procedure. If this is the case, please **let us know** as special arrangements, including a possible pre-procedure office visit may be necessary. Your prescribing physician may need to speak to one of our doctors. This is particularly **important** for patients on **insulin** or other diabetes medications and those on **Pradaxa (Dabigatran), Coumadin (Warfarin), Plavix (Clopidogrel), Eliquis (Apixaban) Xarelto (Rivaroxaban)**. Do not assume that it is safe to stop one of these medications even if you have done so before.
4. A \$50.00 cancellation fee will be billed directly to the patient for any appointment not cancelled with a 48 hour notice.

When this procedure was scheduled, the insurance on file for you was: _____
If your insurance changes, you must notify the office at 508-620-9200 at least 14 days prior to your procedure.
You will be responsible for any charges due to lack of correct insurance information.

YOU MUST COMPLETE THE ATTACHED FORMS AND BRING WITH YOU:

1. PRE PROCEDURE ASSESSMENT FORM
2. CURRENT MEDICATIONS LIST

If your colonoscopy has been scheduled for screening (you have no symptoms with your bowels*), and your doctor finds a polyp or tissue that has to be removed during the procedure, this colonoscopy is no longer considered a screening procedure. It is considered a surgical procedure and your insurance benefits may change. Please check with your insurance company prior to starting the bowel preparation to assure that you understand your insurance benefits and coverage.

*Symptoms such as change in bowel habits, diarrhea, constipation, bleeding, anemia, etc.

Preparation of your bowel for colonoscopy consists of a complete flushing of all waste material prior to the examination. Please follow these instructions completely. If you have any questions regarding the preparation, do not hesitate to call us.

There are some very important facts that you need to be aware of:

- 1) If you take **Coumadin (Warfarin)**, in general it will need to be discontinued 5 days before the procedure.
- 2) If you take **Plavix (Clopidogrel)**, in general it will need to be discontinued 7 days before the procedure.
- 3) If you take **Pradaxa (Dabigatran), Eliquis (Apixaban) or Xarelto (Rivaroxaban)**, in general it will need to be discontinued for 2 days before the procedure (3 days if you are on dialysis).
- 4) **Important** – **do not stop taking any medicine that a doctor has asked you to take without talking first with that doctor.** He/she may want you to continue to take the medicine even during your preparation for procedure. If this is the case, please let us know as special arrangements, including a possible pre-procedure office visit may be necessary. Your prescribing physician may need to speak to one of our doctors. This is particularly important for patients on insulin or other diabetes medications and those on **Pradaxa (Dabigatran), Coumadin (Warfarin), Plavix (Clopidogrel), Eliquis (Apixaban) or Xarelto (Rivaroxaban)** Do not assume that it is safe to stop one of these medications even if you have done so before.
- 5) **Important** – you must notify the office if you take any narcotics like Percocet, oxycodone, methadone, morphine and or suboxone.
- 6) You should continue taking all other regular medications, even on the day of the examination.
- 7) It is very important that you drink extra fluid on the day that you are completing your bowel prep. This helps avoid complications such as dehydration, dizziness and fainting.
- 8) If you have **Diabetes**, preparing for a procedure involves some temporary changes in your diet. It is important that you know how to adjust your insulin or your oral medicines during this time.
 - **If you take oral diabetes medication for your diabetes, you should not take it the day before or the night before your procedure. Please consult your doctor when to resume your oral diabetes medication after your procedure.**
 - **If you take Insulin, you MUST consult the doctor who takes care of your diabetes for any temporary changes to your insulin dosing.**
- 9) **The next page are your prep instructions, please make sure to read it over carefully and if you have any questions, please contact the office.**

SPLIT DOSE *PREPOPIK* PREPARATION FOR COLONOSCOPY

Fill the enclosed prescription for the Prepopik Prep as soon as possible as it may need to be ordered..

*******YOU MUST FOLLOW DIRECTIONS ON THIS PACKET AND DO NOT FOLLOW DIRECTIONS ON THE BOX*******

➤ **ONE WEEK PRIOR:**

- Do not take iron supplementation for seven days prior to the examination. If you take a vitamin every day, check to see if it has iron. If it does, stop taking it for the seven days before your test.
- You may take Tylenol or acetaminophen any time before or after the procedure.

➤ **THREE DAYS PRIOR:**

- Do not eat legumes, peas, carrots, corn, tomatoes, watermelon, seeds or nuts for three days before your colonoscopy.

➤ **DAY BEFORE EXAM:**

○ **CLEAR LIQUIDS ONLY ALL DAY!!**

The following items are those that may be used in a CLEAR LIQUID diet:

Broth, Bouillon, Ginger ale, Sprite, 7-up, Apple juice, White grape juice, Water, Popsicles, Jell-O (no red or purple colored, no fruit or cream added) Black coffee or tea (may have sugar but no milk or cream)

- Any time between 3:00 PM to 6:00 PM Prepare the the solution as follows
- Fill the dosing cup provided with cold water up to the lower 5 ounce line
- Pour the contents of ONE (1) packet into dosing cup, Stir for 2 – 3 minutes until dissolved and drink entire contents
- Follow with at least FIVE (5) 8-ounce glasses of clear liquid within the next five hours.

➤ **DAY OF EXAM:**

○ **6 (Six) hours before your scheduled procedure**

- Fill the dosing cup provided with cold water up to the lower 5 ounce line
- Pour the contents of Second packet into dosing cup, Stir for 2 – 3 minutes until dissolved and drink entire contents.
- Follow with at least THREE (3) 8-ounce glasses of clear liquid within the next 2 hours.
- **You can take clear liquids up to four hours before the procedure.**

The examination will take approximately 45 minutes, but this may vary from patient to patient. After the examination is completed, you will spend approximately one hour in our recovery area.

Please keep in mind that this is an estimated appointment time. Because the time involved in each procedure is often unpredictable, and procedures are scheduled to follow each other consecutively; there are occasions when the schedule runs behind. Your patience and understanding are appreciated.

➤ **DAY AFTER EXAMINATION:**

- You can expect to resume normal activities again unless otherwise indicated. After the procedure, you will be given instructions about diet and medications.

INFORMATION REGARDING A COLONOSCOPY

What is a colonoscopy?

A colonoscopy is a procedure which allows the doctor to examine the inside of the colon (also called the large intestine). Colonoscopy is a highly reliable method for determining the presence and severity of diseases of the colon. It can reveal details not seen on x-ray.

What is a colonoscope?

The colonoscope is a flexible instrument with an optical system which allows the doctor to “see around corners”. It has a “steering” mechanism by which the lenses can be pointed in any direction and “operating” channels through which biopsies can be taken and instruments passed, if necessary. A bright light illuminates the inside of the colon after it has been inflated with air. Intestinal liquids can be removed through the instrument by suction, for better visualization.

How is the procedure performed?

The procedure is performed on an outpatient basis. You will be given intravenous medications (versed and fentanyl, or propofol). If propofol is administered it will be given by an anesthesiologist to make you sedated and comfortable. You will be lying on your left side. The colonoscope will be passed into the rectum and guided through the entire length of the colon. If an abnormality is seen or suspected, a small portion of tissue (biopsy) may be removed for microscopic study. Small growths can frequently be removed (polypectomy) and vascular abnormalities can often be destroyed with an electrical current (electrocoagulation). The visual appearance of pertinent areas may be recorded on photographic film. You may experience cramping sensations as the colonoscope is moved around the corners in the colon, or as air is introduced for better visualization. We will make every effort to minimize the discomfort.

What preparation is necessary?

The colon must be thoroughly cleaned and empty at the time of the procedure. This will involve a one-day preparation, which is enclosed. Please follow it exactly. Colonoscopy is a visual test. Unless your colon is very clean, certain abnormalities may be missed. Please be responsible about ensuring a good preparation for your colonoscopy.

Can there be complications?

The risk of colonoscopy complications is small. Nevertheless, there is a possibility of colonic perforation or hemorrhage or adverse reaction to medications. Also, as with any procedure, other unforeseen complications may rarely occur. Please read the attached consent form, this is just a sample for your review. You will be asked to sign one just like it at your procedure.

We hope this helps you understand better the procedure you are scheduled to have.
If you have any further questions, please feel free to call us.