

1349 S. Rochester Rd, Ste 210 Rochester Hills. MI 48307 Office (586) 254-7955 Fax (586) 254-5355

COLONOSCOPY PREP WITH BISACODYL, MIRALAX, AND CITRATE OF MAGNESIUM

Your examination is scheduled for	 ·	@ :
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Location: Rochester Endoscopy & Surgery Center: PLEASE ARRIVE 30 MINUTES EARLY 1349 S. Rochester Rd Suite 150, Rochester Hills, MI 48307 Phone #: 248-844-3800

You will receive a confirmation call 24 to 48 hours prior to procedure with your exact arrival time as small changes to the schedule are sometimes made.

One week before your colonoscopy:

- 1. Thoroughly read all of your prep instructions.
- 2. Review our recommendations about taking certain blood thinners. Call us if you have any questions. Our office hours: Monday thru Friday 8:00am 4:30pm.
- 3. Arrange for a driver for your procedure. Driver is required to stay on premises. You can expect to be at the facility for up to 3 hours.
- 4. Avoid grainy breads, granola, nuts, seeds, raw fruits and vegetables with seeds, and popcorn for at least three days before your procedure.

Before your procedure you must:

- 1. Complete any forms you may have received as far as your history and current medications. Bring names and addresses of any physicians you wish to receive a copy of the report
- 2. Obtain the bowel prep products from your pharmacy:
 - 1. Bisacodyl 5mg tablets (Dulcolax Laxative not stool softener) either four (4) or six (6) tablets depending on constipation tendency.
 - 2. PEG 3350 Powder (e.g. Miralax) approx. 238 gram bottle.
 - 3. Citrate of Magnesium (8 oz bottle)
 - 4. Purchase 64 ounces of a clear liquid sports drink such as Gatorade, Propel, G2, etc. (NO RED OR PURPLE).
 - 5. Barrier creams to soothe your bottom: Vaseline, zinc oxide, or Calmoseptine.

Two days prior to your procedure:

1. Take four Dulcolax tablets two nights before your procedure

The day before your procedure:

- 1. You must follow a 24 hour clear liquid diet the day before your procedure. Be sure to drink ample clear liquids thoughout the day.
- 2. You must take one 8oz. bottle of Magnesium Citrate before noon the day before your procedure.
- 3. Drink ample clear liquids throughout the day.

Clear Liquid Diet

- No red or purple colored drinks.
- Water, plain coffee (sugar is allowed), tea, clear juices (apple or white grape), lemonade (no pulp), Fruit flavored drinks ex: powder drinks, sodas, flavored waters, sports drinks, etc.
- Fat free broth / bouillon / consommé
- Plain / flavored Jello®, fruit ices / Italian ices, sorbet popsicles (without milk or added fruit pieces)
- Hard candy

Mix the whole 238 gram bottle of PEG 3350 (Miralax) powder with two quarts (64 oz.) of Gatorade or other clear liquid, until dissolved. Keep cold in refrigerator.

Between 4:00 and 6:00 pm begin drinking the powder/Gatorade solution. Drink one (1) 8 oz. glass every 15-30 minutes until finished. Do your best to drink this solution over 2 hours. If nauseated slow down, take a break, and restart as soon as possible.

If your procedure is scheduled for 10:00 am or later, you must do the split dose prep which allows a better cleaning. You should drink half of solution the day before (4pm-6pm) and half (day of procedure) in the **early** morning, 3-4 hours before your scheduled test and having nothing by mouth for 2 hours before procedure. Anesthesia requires nothing by mouth for two (2) hours before the procedure.

Expect several frequent bowel movements. Stay close to a restroom. A thorough bowel prep is achieved when there is no solid content and the return is nearly clear liquid.

You may liberally apply a barrier ointment such as Vaseline, zinc oxide, or Calmoseptine to the rectal area after each stool to help avoid discomfort from the frequent stools.

Have nothing to drink after midnight if procedure is before 10:00 am. Have nothing to drink for 2 hours before your procedure if doing the split regimen (procedure is 10:00 am or after).

The day of your colonoscopy:

Please carry a list of **all** medications that you take and the amount you take. Include vitamins, herbal supplements and over-the-counter drugs. Always tell your doctor and nurse about any allergies, side effects or problems you have had with medications.

Before your procedure you will be taken to a pre-procedure room where an I.V. will be started and a nurse will assist you in preparing for your procedure. You will be given medications through the I.V. to facilitate a comfortable procedure. Once your procedure is completed you will go to a recovery room. Your companion/family member will be allowed to visit in this area. Your doctor will speak to you about the results of the procedure at this time. Your stay in this area is usually less than one hour. Here your I.V. will be removed and soon after you will be discharged home.

General Medication Notes:

- 1. Do not take **antidiarrheal** medications (Imodium, Lomotil) or **irritable bowel** medications (Bentyl, Levsin, Donnatal, hyoscyamine) while prepping for your procedure.
- 2. If you are **diabetic** and:
 - On insulin: take half your usual insulin dose on the day before your procedure and morning of your procedure.
 - On oral diabetic medications: do not take these medications on the day before and morning of your procedure.

GLP-1 INHIBITORS FOR DIABETES OR WEIGHT LOSS:

If you take these medications daily, please hold the day of your procedure. If you take them weekly, you must hold injection for at least 7 days prior to your procedure.

Please note: Noncompliance to these instructions will result in cancellation of procedure due to risk of aspiration while under anesthesia.

Examples:

Ozempic/Wegovy.....(semaglutide)

Trulicity......(dulaglutide)

Mounjaro/Zepbound.....(tirzepatide)

Bydureon BCise/Byetta..... (exenatide)

Saxenada/Victoza......(liraglutide)

Adlyxin/ Rybelsus.......(lixisenatide)

You may be asked to hold some of the following blood thinners, depending on the type of procedure that you are having and the condition for which you are taking these medications:

NSAIDS WITH ANTI-PLATELET EFFECT:				
Generic Name for Medicine	Brand Name	How Long to Hold Medicine		
Aspirin	Ecotrin, various	5 days		
Aspirin Dipyridamole	Aggrenox	5 days		
Diclofenac	Arthrotec, Cataflam, Voltaren, Voltaren XR	5 days		
Etodolac	Lodine, Lodine XL	3 days		
Fenoprofen	Nalfon, Nalfon Pulvules	3 days		
Flurbiprofen	Ansaid	3 days		
Ibuprofen	Advil, Motrin, Vicoprofen	3 days		
Indomethacin	Indocin, Indocin SR	3 days		
Ketoprofen	Orudis, Oruvail	3 days		
Ketoralac	Toradol	3 days		
Meclofenamate	Meclomen	3 days		
Mefenamic Acid	Ponstel	3 days		
Nabumetone	Relafen	5 days		
Naproxen	Aleve, Anaprox, Naprelan, Naprosyn	3 days		
Oxaprozin	Daypro	10days		
Sulindac	Clinoril	3 days		
Tolmetin	Tolectin, Tolectin DS	3 days		

SPECIFIC ANTI-PLATELET AGENTS:				
Generic Name for Medicine	Brand Name	How Long to Hold Medicine		
Cilostazol	Pletal	3 days		
Prasugrel	Effient	7 days		
Ticagrelor	Brilinta	3 days		
Ticlopidine	Ticlid	14 days		
Clopidogrel	Plavix	May continue		

ANTICOAGULANT AGENTS:				
Generic Name for Medicine	Brand Name	How Long to Hold Medicine		
Dabigatran	Pradaxa	Day before & morning of procedure		
Dalteparin	Fragmin, (heparin derivative given SQ)	24 hours		
Enoxaparin	Lovenox (heparin derivative given SQ)	24 hours		
Tinzaparin	Innohep	24 hours		
Warfarin	Coumadin	3 days		
Rivaroxaban	Xarelto	Evening before & morning of procedure		
Apixaban	Eliquis	Day Before & morning of the procedure		
Edoxaban	Savaysa	Day Before & morning of the procedure		

BILLING INFORMATION FOR YOUR OUTPATIENT PROCEDURE

Whether your procedure is done at William Beaumont Hospital, Troy or Rochester Endoscopy & Surgery Center, there may be up to five (5) separate providers billing your insurance company: the doctor himself, the facility, the anesthesiologist, the lab that preps the pathology, and the pathologist.

You should receive an EOB (Explanation of Benefits) from your insurance company for any of these services. You may then receive a bill for any balance from each of the providers.

If you have a billing question from any provider other than our office, please contact them directly. We can only answer questions regarding <u>OUR</u> charges.

SCREENING COLONOSCOPY AND YOUR INSURANCE

A screening colonoscopy is considered a preventative benefit and may or may not be a covered benefit under your insurance policy. Please be advised that we urge you to contact your insurance company for verification.

For patients who are over age 50 and have no family history of colon cancer, no personal history of colon polyps, and have no symptoms, the procedure code to verify with your insurance for coverage is procedure code G0121 and the diagnosis code is Z12.11. This stands for screening colonoscopy (average risk) and screening for malignant neoplasm of the colon.

For patients who have a family history of colon cancer (biological mother, father, sister, or brother), personal history of colon cancer, personal history of colon polyps, family history of colon polyps (familial adenomatous polyposis), or inflammatory bowel disease such as Crohn's disease or ulcerative colitis, the procedure code to verify with your insurance is procedure code G0105. The diagnosis code is as follows:

Z800 – immediate family history of colon cancer

Z850.38 – personal history of colon cancer

Z850.48 – personal history of rectal cancer

Z83.71 – family history of colon polyps

Z860.10 – personal history of colon polyps

K5090 - Crohn's disease

K5190 – ulcerative colitis

Procedure code G0105 stands for screening colonoscopy (high risk)

IMPORTANCE NOTICE: SHOULD A PHYSICIAN NEED TO TAKE A BIOPSY OR REMOVE A POLYP(S) THE COLONOSCOPY IS NO LONGER CODED AS A SCREENING COLONOSCOPY. YOUR BENEFITS MAY CHANGE. THE DIAGNOSTIC CODES ARE 45380, 45383, 45384, AND 45385.