

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

COLONOSCOPY PREP WITH BISACODYL AND MIRALAX

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 8:00 am 4:30 pm.
- 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.

Two or more days before your colonoscopy:

- 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. Purchase 64 ounces of a clear liquid sports drink such as Gatorade, Propel, G2, etc. (NO RED OR PURPLE). You may also use water.
 - 4. Barrier creams to soothe your bottom: Vaseline, zinc oxide, or Calmoseptine.

If you have a tendency for constipation, you will ease the cleansing phase by taking a laxative such as bisacodyl, senna, milk of magnesia, or citrate of magnesia 2-3 days before the procedure to get things started and ease the final day's preparation.

The day before your procedure:

- 1. You may have a low residue breakfast and lunch before 1:00 pm. (Example: scrambled eggs, cooked cereal, yogurt, cottage cheese, pancake or waffles, white bread, fruit cocktail).
- 2. Drink ample clear liquids throughout the day.
- 3. Between 8:00am and 11:00am take four (4) bisacodyl tablets. (starting at 8am, take one every hour)
- 4. After a low residue lunch, you may only have clear liquids. NO SOLID FOOD.

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
- 5. 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.
- 6. 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.
- 7. 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 the solution the day before (4pm-6pm) and half (day of procedure) in the <u>early</u> 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.
- 8. 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.
- 9. 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.
- 10. 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.

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:		
Brand Name	How Long to Hold Medicine	
Pradaxa	Day before & morning of procedure	
Fragmin, (heparin derivative given SQ)	24 hours	
Lovenox (heparin derivative given SQ)	24 hours	
Innohep	24 hours	
Coumadin	3 days	
Xarelto	Evening before & morning of procedure	
Eliquis	Day Before & morning of the procedure	
Savaysa	Day Before & morning of the procedure	
	Brand Name Pradaxa Fragmin, (heparin derivative given SQ) Lovenox (heparin derivative given SQ) Innohep Coumadin Xarelto Eliquis	

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.



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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.