



MIRALAX (PEG) BOWEL PREP INSTRUCTIONS (2-DAY PREPARATION)



Important: Read all instructions right away. *Do not wait until the last day to read them (important if you are on blood thinners)*

Cancellation Policy: *If the procedure is not canceled 72 hours ahead, \$150 no show fee would apply. If you are booked for 2 procedures on different days and you cancel the first procedure, the second procedure will automatically be canceled unless you instruct us otherwise. This would make it fair for patients waiting to be seen.*

COLONOSCOPY CHECKLIST: *Please note that inadequate preparation will result in **rescheduling** your procedure*

- 2 Days before your procedure: **NO SOLID FOOD** (clear liquids only - see page 4 for list of acceptable liquids)
- Medications: if you are on blood thinners, see page **5**. If using Insulin, see page **2**.
- If your exam is **before 9.45 AM** you will complete the entire preparation the night before; if your exam is **at 9.45 AM or afterwards** you will split your preparation (half the night before; half the morning of your exam)
- You must have a driver who is 18 years or older present at check in and discharge or the procedure will need to be rescheduled and cancellation fee may apply.** This person must remain within 10 minutes of the facility to pick you up when you are ready to be discharged. You will not be discharged unless this person accompanies you from the facility. Because your judgment may be impaired after this procedure, you cannot be safely released to take public transportation, a taxicab/uber, or even walk home without another responsible adult present to accompany you.
- The entire **procedure appointment** may take **up to 2 to 3 hours** to complete.

PURCHASE THE FOLLOWING OVER-THE-COUNTER AT YOUR PHARMACY:

- 238-gram bottle of Miralax **AND** a 119-gram bottle of Miralax powder (over the counter)
- One (1) small box/4 tablets of Dulcolax (5mg each) (bisacodyl) tablets (over the counter)
- 64oz. of Gatorade **AND** 32 oz bottles of Gatorade, total - 96 oz. No Red, Orange or Purple Gatorade please.
- You may want to purchase Tucks pads or Desitin cream to help reduce anal soreness during your bowel prep

MEDICATIONS - Beginning 5 days before your procedure:

- If you are taking **Warfarin (Coumadin)** contact your treating physician about stopping or taking an alternative. **You need to be off of this medications beginning 5 days before your procedure. DO NOT stop your warfarin (Coumadin) without speaking to your physician first.**
- **If using other blood thinners - see page **5****
- If you are a diabetic and using insulin, **your Gastro Office Physician would have given you instructions on Insulin use by now. Using those instructions is preferred.**
 - **As a general guideline, please reduce by half your dose of long acting insulin on the day of the procedure. If taking a night dose, use half dose for long acting insulin.** If you are on oral diabetic pills, do not take them the day prior to the procedure or on the day of the procedure. Being on clear liquids the day prior, your blood sugar may drop lower with taking the medications.
- Take your other prescription medications (except those noted above) with small sips of water or **until 3 hours prior** to arrival time. Taking your **hypertension medications** is particularly encouraged.
- Drink plenty of **water/clear liquids(per the list attached)** until 3 hours before arrival time. It will keep you hydrated and help us find your vein easily to place an IV line.

TWO (2) DAYS BEFORE THE COLONOSCOPY/PROCEDURE:

Step 1: NO SOLID FOOD THE ENTIRE DAY (INCLUDING NO SOLIDS FOR BREAKFAST)

Begin a clear liquid diet and continue with **clear liquids only** for the entire day. (See attached list for allowed clear liquids). Do not have any liquids you cannot see through. You cannot have any SOLID FOODS until after your procedure. Drink plenty of extra liquids throughout the day. Please avoid clear liquids with red dye (red Jell-O, red popsicles). The more clear liquids you drink, the cleaner your colon will be for the procedure and minimizes repeat procedures.

Step 2: At 6:00 PM on the same day, mix 119 grams of Miralax with 32 ounces of Gatorade. Shake until the Miralax has dissolved. Drink a glass (8 oz.) of the Miralax solution every 15-30 minutes until you are finished. This process should be completed within 3-4 hours.

ONE (1) DAY BEFORE YOUR COLONOSCOPY/PROCEDURE:

Step 3: NO SOLID FOOD

- Continue your liquid diet. You cannot have any solid food on this day.
- At 4:00pm on _____, take 4 Dulcolax (Bisacodyl) tablets (each tablet is 5mg, total of 20mg)

*If you are scheduled to arrive for your colonoscopy **before 9.45 AM**, you will finish your prep the evening before your colonoscopy, **go to STEP 4 (skip steps 5 and 6):**

*If you are scheduled to arrive for your colonoscopy **after 9.45 AM**, you will drink **half the prep** the evening before your colonoscopy and finish **the other half** the morning of the colonoscopy, **go to STEPS 5 and 6 (skip step 4):**

Step 4: (This applies to those scheduled before 9:45 AM)

Step 4: At 6:00pm mix the entire 238-gram bottle of Miralax with 64 oz. Gatorade or two 32oz. Gatorade. Shake the solution until the Miralax has dissolved. Drink one glass (8 oz.) of the Miralax solution every 15-30 minutes until the entire solution is gone. If you feel nauseous, just use a straw and sip the liquid gradually. **No need to chug it down.** To prevent any perianal skin discomfort, you may want to apply a soothing ointment such as Desitin or A&D Ointment. Then, you are done with your preparation for colonoscopy!

Please skip steps 5 and 6 below. Please see below instructions if you are scheduled after 9:45 am

Step 5 and 6: (for those scheduled after 9:45 AM)

Step 5: At 6:00pm mix the entire 238-gram bottle of Miralax in 64 oz. Gatorade or two 32oz. Gatorade. Shake the solution until the Miralax has dissolved. Drink one glass (8 oz.) of the Miralax solution every 15-30 minutes **until half the solution is gone.** If you feel nauseous, just use a straw and sip the liquid gradually. No need to chug it down. Refrigerate the remainder of the prep solution.

Step 6: Your scheduled procedure time is _____. Starting 5 hours before your scheduled procedure time, drink the remaining half of the Miralax solution. **This must be completed within two (2) hours.** For example, if your procedure is scheduled for 11 AM, you start drinking the remaining half of the solution starting at 6 AM and you complete it in 2 hours (by 8 AM).

- To prevent any perianal skin discomfort, you may want to apply a soothing ointment such as Desitin or A&D Ointment.
- You may have clear liquid/water as needed **until THREE (3) hours** before your scheduled procedure time.

Other things to remember the DAY OF THE PROCEDURE:

- Take your other prescription medications (except those noted above) with small sips of water. Call/text your Gastro Office doctor if you have any questions about which medications you should or shouldn't take the morning of the procedure.
- **Please bring a list of your current medications** with you to the procedure for the nurse to review.
- **No further liquids may be consumed in the THREE (3) hours prior to procedure or it will need to be canceled or rescheduled.** Stop drinking liquids at _____.

Because you will receive sedating medications/narcotics during your procedure, it is required by law that **you have a responsible adult accompany and drive you home.** This is because your judgment and reflexes may be impaired, you may be somewhat groggy and dizzy, and may feel tired for about 24 hours after your procedure. A taxi/uber is NOT acceptable, as many transportation companies will not take responsibility. If you have a responsible person accompany you to and from the center (not the taxi/uber driver), then it is okay to take a taxi/Uber.

Cancellation Policy: If the procedure is not canceled 72 hours ahead, \$150 no show fee would apply. If you are booked for 2 procedures and you cancel the first procedure, the second procedure will automatically be canceled unless you instruct us otherwise. This would make it fair for patients waiting to be seen.

Clear Liquid Diet

A clear liquid diet consists of anything that you can see through and is the consistency of water at room temperature. Please avoid drinks with red dyes. (No red, orange or purple)

Water/Tea/Ice tea
Apple Juice/White Cranberry Juice/Cranberry-Apple Juice
Black Coffee (no milk or non-dairy creamer)
Sodas/Slushies
White Grape Juice
Gatorade/Powerade/Propel Pedialyte
Ensure Clear
Jell-O (no red)
Popsicles (no red)
Clear broth of any kind: beef broth, chicken broth, vegetable broth

Managing Your Blood Thinners Before Procedures

It is okay to continue ASA 325 mg and ASA 81 mg upto the date of the procedure. No need to stop iron pills or Ibuprofen (NSAIDs) etc. either.

FOR ANY OF THE FOLLOWING MEDICATIONS: *Please confirm it is safe for you to hold this medication before the procedure with the physician who is prescribing the blood thinner. DO NOT stop the medication without speaking to your physician first.*

Drug Name	Number of days prior to procedure to be held
Clopidogrel (Plavix)	5 days
Prasugrel (Effient)	5 days
Ticlopidine (Ticlid)	10 days
Ticagrelor (Brilinta)	3 days
Abciximab (Reopro)	1 day
Vorapaxar (Zontivity)	5 days
Warfarin (Coumadin)	5 days
Enoxaparin (Lovenox)	Do not take the night before/okay to take the morning prior
Fondaparinux (Arixtra)	2 days
Apixaban (Eliquis) -	2 days
Rivaroxaban (Xarelto)	2 days
Dabigatran (Pradaxa)	2 days

COLONOSCOPY: A SAFE DIAGNOSTIC CANCER SCREENING TOOL

This is a frequently performed and safe endoscopic procedure to find the cause of common symptoms such as diarrhea, constipation, abdominal pain, rectal bleeding, and other gastrointestinal problems. Recently colonoscopy has been found useful to screen both men and women who are 45 years of age and above for early signs of colon cancer. The very reason it is used in such large numbers of normal people is that it is a relatively safe procedure. The endoscope is a flexible tube with a camera inside to project a color image of the colon on a TV screen.

Nature of the procedure: You will have to follow a colonoscopy prep regimen (clear fluids and laxatives) the day before your colonoscopy. When you are in the procedure room, you will receive intravenous sedatives, which help you to relax and sleep during the procedure. Many people do not recall the procedure due to these medications. Once you are relaxed, a liberally lubricated endoscope is gently introduced into the rectum. The doctor will advance the instrument to the end of the colon. Biopsies of the inner lining of the colon and removal of polyps may be performed during this process. The procedure lasts between 20-60 minutes, followed by a recovery period of approximately 15-30 minutes. You will be discharged when fully awake and in the company of your friend or relative. Because you have been given sedatives, you should not drive for 24 hours following your procedure. Your physician will be happy to answer your questions prior to the procedure. After the procedure is over, the doctor will explain the results and treatment to you and your friend or relative.

Sedation: Intravenous sedation is given to help maintain your comfort during the procedure. You may sleep throughout the procedure, or you may be intermittently awake. You may not recall any of the procedure, or you may recall parts of the procedure afterwards.

Benefits of the procedure: Colon cancer screening – Colon cancer is a common cancer for both men and women (6% of the population has colon cancer). If there is a relative with colon cancer in your family, the risk for other relatives increases 2-3 times. Colon cancer arises from a smaller abnormality called a polyp. Polyps are very common with 30-40% of the population having polyps. A polyp usually takes 8-10 years to grow into cancer. This gives enough time to inspect the colon and remove the polyps. A polyp removal is a simple endoscopic procedure. A screening colonoscopy is therefore not only diagnostic but also involves treatment. Removing polyps has been shown to significantly prevent colon cancer related deaths.

Safety: A colonoscopy is safe. Complications of the procedure are rare-intestinal bleeding after a polyp removal is reported in 0.7-2.5% of cases. The most serious complication is bowel perforation and is reported in 0.25-0.4% and requires immediate surgery. Sedation can rarely lead to complications, such as slowed breathing. Your doctor will talk with you about the risks and benefits of colonoscopy.

Colonoscopy and Insurance:

Screening or Diagnostic: With changes in health care laws, many insurance companies, including Medicare, are required to cover the entire cost of preventative services, such as colonoscopies. You should always check with your insurance company to determine what they cover.

A **screening colonoscopy** is performed for patients who do not have any symptoms (such as blood in the stool, anemia, abdominal pain, change in bowel habits), and are of the recommended age for screening (generally above the age of 50), who do not have a personal history of colon cancer or colon polyps, and are getting a colonoscopy at the recommended screening interval (every 10 years). If you are at higher risk for colon cancer, such as if you have a family history of colon cancer, the insurance company may or may not consider the colonoscopy to be a screening procedure. If you had a colonoscopy less than 10 years ago, if you are younger than 50, if you have symptoms, or if

you have had colon cancer or colon polyps in the past, your insurance company may not consider a colonoscopy to be a screening procedure. Many times, at the time of the screening colonoscopy, a polyp may be found, or a biopsy taken. Generally, if the original indication for the colonoscopy was for screening, it will still count as screening even if a biopsy is done, but this varies with different insurance companies. You may be required to pay deductibles or copays for pathology or lab services.

A **diagnostic colonoscopy** is done because of worrisome symptoms, such as blood in the stool, abdominal pain, anemia, or change in bowel habits.

A **surveillance colonoscopy** is generally done in patients who have a personal history of polyps or cancer or another diagnosis and is being performed more frequently than every 10 years. Insurance companies generally consider this the same as a screening colonoscopy procedure.

Generally speaking, all insurances cover screening and surveillance colonoscopy fully as a test for prevention.

We encourage you to contact your insurance for estimated costs/benefits/coverage with below details :

Screening colonoscopy:

ICD-10: Z12.11 (Encounter for screening for malignant neoplasm of colon) (if no family history of colon cancer)

ICD-10: Z80.0 (Family history of cancer of colon) (use this if family history of colon cancer is present)

CPT: 45385

Surveillance colonoscopy:

ICD-10: Z86.010 (Personal history of colonic polyps)

ICD-10: Z80.0 (Family history of cancer of colon) (use this if family history of colon cancer is present)

CPT: 45385

For any further questions regarding billing or insurance, please call our office at 614-385-5900 or text us at 614-412-3587