



MIRALAX COLONOSCOPY INSTRUCTIONS

Please read and follow these instructions carefully.

Procedure Date: _____ Arrival time: _____ Dr.: _____

Location: **Cascade Medical Center**

817 Commercial St, Leavenworth WA 98826, 509-470-2042, Central admitting, inside the main entrance. *If you arrive prior to 8 am, please check in at the ER entrance.

PRE-PROCEDURE CALL	5 DAYS BEFORE	3 DAYS BEFORE	1 DAY BEFORE	PROCEDURE DAY	AFTER PROCEDURE
To avoid cancelation, please return our call; we must talk to you at least <u>one week</u> before your procedure!	<p>Meals and snacks: <u>Avoid eating any nuts or seeds. (!)</u></p> <p><u>If you tend to be more constipated,</u> take a capful (17 grams) of Miralax twice a day until the procedure day.</p> <p>Stop all iron, fiber, antidiarrheal, and fish oil supplements.</p> <p>Arrange a ride: Arrange a responsible driver (neighbor, friend, family) to drive you home or your procedure will be canceled. Public transport is not allowed.</p> <p>Purchase your bowel prep medications.</p> <ol style="list-style-type: none"> 64 ounces lemon lime or orange Gatorade (No red, blue, green, or purple). You may need to purchase ONE 32oz, ONE 20oz and ONE 12oz bottle. ONE (1) Miralax 238g bottle- Have more on hand if you tend to be more constipated Clear liquid Magnesium Citrate (10 ounces) Dulcolax tablets: You only need two (5 mg) tablets. Purchase the stimulant laxative, not stool softener. <p>Optional purchases:</p> <ol style="list-style-type: none"> Wet wipes (unscented, alcohol-free) Petroleum jelly/diaper rash ointment to help reduce anal irritation. 	<p>Start the low-fiber diet (see attached). <u>Avoid eating any nuts or seeds. (!)</u></p> <p>Hydrate well throughout the day.</p> <p>2 DAYS BEFORE</p> <p>Continue the low fiber diet. <u>Avoid eating any nuts or seeds. (!)</u></p> <p>Hydrate well throughout the day. Drink 4-6 (8 oz) glasses of water.</p> <p>Blood thinners: You may need to stop your blood thinner. Please contact your provider for instructions.</p> <p>Diabetics: Please contact our office to discuss medications.</p>	<p>Continue drinking clear liquids. NO EATING! Drink 4-6 (8 oz) glasses of water</p> <p>10:00am: Mix 1 bottle of Miralax in 64 ounces of Gatorade and refrigerate.</p> <p>2:00pm: Take both Dulcolax tablets.</p> <p>3:00pm: Drink the 10-ounce bottle of Magnesium Citrate. This should be completely consumed in 30 minutes.</p> <p>3:30pm: Start drinking the Miralax/Gatorade. You should drink 8 ounces every 15 minutes until you finish HALF. Using a straw may be helpful. Refrigerate the remaining 32 oz for tomorrow.</p> <p>If you get nauseated: stop drinking for 30-60 minutes.</p> <p>Continue drinking clear liquids, NO EATING! The clearer the liquids, the better.</p> <p>Evening medications: You may take your medications 1-2 hours after finishing the Miralax/Gatorade.</p>	<p>Continue drinking clear liquids. NO EATING! The clearer the fluids you drink the better.</p> <p>Do NOT take any morning medications. Plan on taking your medications, if any, after you return home from the procedure unless directed otherwise by your provider.</p> <p>4 hours before leaving home: Drink 8 oz. of Miralax/Gatorade every 15 minutes until you finish 32 more ounces. At this point, you will have finished a total of 64 ounces. Your stool should be clear or light-yellow in color.</p> <p>Within 2 hours of the arrival time: nothing by mouth.</p> <p>Arrive at your arrival time and expect 2-3 hours for the procedure. Please leave all valuables and jewelry at home (glasses/phone OK). If you have trouble with IV placement, please arrive 15 minutes early.</p>	<p>You will be receiving light to moderate sedation. Plan on doing nothing strenuous for 12-24 hours.</p> <p>Ease back into your regular diet. Avoid eating any fatty, fried, or spicy foods.</p> <p>Do not drink any alcohol for 24 hours.</p> <p>If you had polyps or biopsies removed, check with your provider if you should continue your blood thinner. You will receive a call on your pathology results in 7-10 days.</p> <p>Do not operate heavy machinery or drive for 12-24 hours.</p> <p>You will receive a post-procedure, check in call from the nurse.</p>
MEDICATIONS					
<p>Blood thinners: Please contact your doctor who manages your blood thinner for instructions.</p> <p>Diabetic patients: <u>Metformin:</u> hold for 24 hours prior to procedure <u>Insulin with meals:</u> skip the morning dose the day of procedure. <u>Long-acting Insulin in the evening:</u> take only half of your normal dose the evening before the procedure.</p> <p>Weight loss injections: (Zepbound, Ozempic, Wegovy etc.) Hold for 7 days prior to procedure.</p> <p>Anti-inflammatories: Talk with your doctor if you take NSAIDS more than a couple times per week.</p>					



Clear Liquid Diet (1 day before)

OK to drink ✓	Do NOT drink X
<ul style="list-style-type: none"> • Water • Black coffee (with sugar OK) • Soda • Coconut water • Sports drinks i.e. Gatorade, Propel, Pedialyte • Clear Juice without pulp (i.e. apple or lemonade without pulp) • Flavored waters (no red or purple dyes) • Clear beef, chicken, or vegetable broth • Tea (with sugar okay) • Jello (no whole fruits; no red or purple dyes) • Popsicles (without fruit or cream; no red or purple dye) • Hard candies 	<ul style="list-style-type: none"> • Milk or cream (no cow, soy, almond, oat, rice, or hemp milk) • Coffee with creamer • Fruit juices with pulp • Smoothies • Ice cream or milkshakes • Yogurt • Pudding • Vegetable juices • Tomato juice • Alcohol • Orange juice • Grapefruit juice • Cream soups (other than clear broth)

Low Fiber Diet (3 days before)

Food Groups	OK to eat	Do NOT eat
Fats and Oils	<ul style="list-style-type: none"> • Butter, oil, mayonnaise • Salad dressing without seeds or nuts 	<ul style="list-style-type: none"> • ANY NUTS(!) i.e. granola bars, trail mix, almonds, • ANY SEEDS(!) i.e. chia or sunflower seeds, kiwis raspberries, apples, strawberries, blueberries
Fruit	<ul style="list-style-type: none"> • Canned fruits (no skin or seeds) • Soft melon (no seeds) • Fruit juice (no pulp) • Jelly without pulp 	<ul style="list-style-type: none"> • All dried fruits • All raw fruits • Prunes or prune juice • Bananas
Breads and Grains	<ul style="list-style-type: none"> • Waffles, pancakes, or bagels made from white refined flour • Cereal (cheerios or corn flakes) • Cream of wheat • Crackers (without seeds) • English muffins (no bran) • Pasta, rice or noodles 	<ul style="list-style-type: none"> • Popcorn • Brown or wild rice • Granola or cornbread • Whole wheat bread or crackers
Milk and Dairy products	<ul style="list-style-type: none"> • Milk or cream or cream sauces • Cheese or cottage cheese • Yogurt • Ice cream and milk puddings 	<ul style="list-style-type: none"> • Yogurt with granola, seeds, nuts or fruits in them
Meat and Proteins	<ul style="list-style-type: none"> • Tender, skinless chicken, beef, pork, fish • Tofu • Creamy peanut butter • Eggs 	<ul style="list-style-type: none"> • Tough meat with skin or gristle • All beans, nuts, seeds, peas, lentils, legumes • Chunky peanut butter
Vegetables	<ul style="list-style-type: none"> • Potatoes without skin • Vegetable juice without pulp 	<ul style="list-style-type: none"> • All raw or steamed vegetables • CORN (!) • Broccoli, cauliflower, brussel sprouts, sauerkraut • Salad
Miscellaneous	<ul style="list-style-type: none"> • Sugar, salt, pepper, honey, syrup, lemon/lime juice 	<ul style="list-style-type: none"> • Jam or marmalade • Relish or pickles • Olives

Colonoscopy: What to Expect

What is a colonoscopy?

A colonoscopy is a procedure that allows your provider to detect abnormalities or changes within your large intestine (colon) and rectum. Viewing your colon tissues may also help diagnose the cause of any ill symptoms such as bloody stool, diarrhea, constipation, or abdominal pain. It is important to clean out your bowels prior to the procedure so please follow the instructions carefully to ensure the best possible exam.

Preparation:

- Plan for the prep time: Plan for a few hours the evening before and morning of your procedure to drink the solution and evacuate your bowels. Plan to be close to a bathroom. Diarrhea and urgency will usually begin 15 minutes to 4 hours after you begin your prep.
- Take the day off: It is recommended that you take the day off work on the day of your procedure. You should not make any important, legal, or business decisions for the rest of the day. You should not drive or operate heavy machinery for the rest of the day.
- Pick up your bowel prep medications at least five days before your procedure.
- If you have had trouble with IV placement, please arrive an additional 15 minutes early.

Billing:

Please note that screening colonoscopies are often not subject to deductibles, copays or co-insurance. We will always try to bill a screening colonoscopy as a screening colonoscopy. However, if a polyp needs to be removed or biopsies need to be done during the colonoscopy, then by law we are obligated to use the code for “colonoscopy with polypectomy” or “colonoscopy with biopsy.” In such cases, deductibles, co-pays and coinsurance may apply. Please consult with your insurance company for details.

Before your procedure:

You will go over your health history and medications upon admission. You will put on a hospital gown and an IV will be placed in your arm for fluids and medication. You will be informed of the procedure risks and sign a consent form.

During your procedure:

You will be placed on your left side. Your care team will give you medications through your IV to make you more comfortable during the procedure. Air will be inserted into your colon to allow the doctor to better visualize the lining of your colon. Your body will want to expel the air, do not try to hold in the air as this may cause some discomfort. You may feel mild cramping during the procedure. If it becomes worse, you will be able to tell the doctor, and more medication can be given. Most patients do not remember part or all of the procedure due to the medications. The procedure lasts approximately 30-60 minutes. You will then be taken to the recovery area.

After your procedure:

You will remain in the recovery area until you are ready to go home. You may feel mild abdominal cramping or bloating. Releasing air will help you feel more comfortable. The doctor or nurse will speak to you about your plan of care and discharge you when you are alert and stable. Ensure you have a responsible driver to drive you home. You may return to work the morning after your colonoscopy (not the evening of the colonoscopy).



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Colonoscopy Procedures & Insurance Coverage

Insurance coverage for colonoscopies can vary greatly depending on your coverage, and whether your policy is through private insurance or Medicare/Medicaid. One point to be aware of is that while some policies cover “screening” procedures at 100%, they still often charge a co-pay for “diagnostic” procedures (procedures performed because of disease or symptoms).

A complicating factor for most health insurance policies, however, is that a screening colonoscopy turns into a diagnostic colonoscopy if a polyp or other issue is found. We want you to be aware of this ahead of time to understand why you may receive a bill for services which originally appeared to be a fully covered benefit. *See important pre-approval information in the box below.*

Cascade Medical will contact your insurance company on your behalf if your health insurance requires that pre-approval for diagnostic services be obtained prior to your procedure. Patricia Steiger, the Cascade Medical referral coordinator, will contact you regarding the pre-approval outcome. If you have not heard from Patricia BEFORE scheduling your colonoscopy, please contact her at 509-548-3420. PLEASE BE ADVISED THAT WITHOUT PRIOR AUTHORIZATION, YOU MAY BE RESPONSIBLE FOR ANY BALANCE NOT COVERED BY YOUR INSURANCE.

If you have specific questions regarding your insurance coverage, please contact the customer service line, website or coverage publications from your insurance carrier for details. [If there is anything we can help you with \(regarding insurance\), please let us know by contacting Patricia Steiger at the Cascade Medical Family Practice Clinic at 509-548-3420.](#)

By signing this document, I understand that if my colonoscopy procedure is for “diagnostic” reasons I will be responsible for the balance not covered by my insurance company.

No sig required, info only

Patient Signature

Date

Witness (CM Employee)

Date



Colonoscopy Consent Form

This procedure involves looking into your colon with a flexible tube. If polyps or other unusual tissue is seen, a sample of that tissue will likely be removed. Removed tissue is sent to a laboratory for further analysis.

The benefits include the early diagnosis and potential cure of disease. Cancer would be one example, but there are others. As with any procedure, there are possible risks. We believe, however, that the potential benefits outweigh the possible risks for you at this time. Please read and understand that the risks include, but are not limited to, the following:

1. Infection can occur rarely. You might need medications after the procedure.
2. Bleeding may occur. It is possible you could have some spotting or even enough bleeding to need a transfusion.
3. Perforation means a hole in the intestine. If this should occur, you will need to go to the hospital and may need an operation.
4. Sometimes the sedatives and pain medications can decrease your blood pressure and breathing rate to low levels. We monitor you closely during the procedure to minimize this risk.
5. Rarely, the bowel cleanser can cause problems with kidney function or fluid balance in the body.
6. Sometimes we are unable to visualize polyps or other lesions. This might result in missed or delayed diagnosis.
7. Again, the complications listed above are quite unusual. If you have specific concerns or questions, please discuss them with us before the procedure.

There are *alternatives* to Colonoscopy, including X-ray studies, but they do not allow us to directly see the areas or to take biopsy samples. If you have questions about this procedure, please ask us. If you want more time to consider this procedure, we can provide it, but you may be subject to the risks of a delayed diagnosis - especially of cancer.

Informed Consent

Having read and understood the above, I feel the benefits of this procedure outweigh its risks. I have read and understood the patient instruction handout and the patient education handout. I agree to allow Dr. Butruille to perform the Colonoscopy procedure, with biopsies and removal of polyps if needed.

no signature required, info only

Signature

Date

Witness