

DIGESTIVE DISEASE SPECIALISTS, INC.

Mercy-McAuley Office
Ross S. Keener, M.D.
4205 McAuley Blvd, Suite 465
Oklahoma City OK 73120
(405) 751-7664

Name: _____

Date of Procedure: _____

Arrival Time: _____

Procedure Time: _____

Procedure Location:

- 1 Ambulatory Endoscopy Center (AEC)

3366 NW Expressway

Baptist Physician's Building D, Ste. 400

SEE MAP ON BACK

- 2 Mercy Outpatient Diagnostic Center

4300 West Memorial Road

Mercy Health Center

CHECK IN AT ADMISSIONS

Trilyte Bowel Preparation

There have been many times we've had to cancel the procedure midway and reschedule due to an incomplete prep. Therefore, you must complete a bowel preparation regimen as follows:

For the doctor to have a clear view of your colon, it is essential that the colon be completely free of stool. **If you have problems with constipation you may consider 2 (TWO) days of the full liquid diet instead of just one day. The doctor may also ask that you drink a bottle of MAGNESIUM CITRATE (over the counter laxative NOT cherry or grape flavored) two nights prior at 5-6:00 pm THIS WILL BE CONSIDERED THE PROLONGED PREP IF ASKED TO DO SO.**

If you take medication, you may have it on the morning of the procedure with a small sip of water. **STOP ASPIRIN and IRON four (4) days** prior to your procedure date. Inform the nurse immediately if you are taking other blood thinners (such as Coumadin or Plavix). If you use **INSULIN or diabetic medications**, you may need to adjust your dose to ½ your normal dose the day prior, and NONE on the day of your procedure until afterwards. **Do not** take your oral diabetes medication the day of your procedure until afterwards.

THE DAY BEFORE THE PROCEDURE: _____

1. In the morning, choose one of the flavor packs and add it to the four-liter bottle. Shake well to mix.
2. Add water to the fill line and shake well until the powder is dissolved then place in refrigerator.
3. Have clear liquids ALL DAY. See the diet list on page two.
4. **Begin drinking the solution between 4 p.m and 6 p.m.** It is best to drink the solution in a short amount of time so have a goal to drink an 8oz glass every 10 minutes until the solution is gone. You may have consumed several glassfuls before having the first watery bowel movements. Initially, you may feel bloated with abdominal fullness and nausea, but will become more comfortable as you continue to have bowel movements.
5. **DO NOT EAT ANY SOLID FOODS**, not even orange juice because of the pulp.

THE DAY OF THE PROCEDURE: _____

1. Nothing to eat or drink after _____ **and only liquids only prior.**
2. Arrive at the facility above **ONE HOUR** prior to the time of your procedure.
3. **Please fill out** your paperwork and **bring with you to the facility** if you have not done so at the office recently and bring your photo ID, insurance cards and medication list.

A DRIVER MUST ACCOMPANY YOU: You will not be able to drive, use a taxi, or a bus after the procedure. Your driver must be on the premises during the procedure or the procedure will be rescheduled.

******IF YOU ARE A NEW PATIENT OR IF YOU HAVEN'T BEEN SEEN BY YOUR PHYSICIAN WITHIN ONE (1) YEAR, PLEASE PRINT THE FORMS AT THE FOLLOWING LINK: [Pre-Registration Forms](#). PLEASE FILL OUT ALL FORMS AND BRING THEM WITH YOU TO YOUR PROCEDURE. THANK YOU.******

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Start morning of: _____

Day of Procedure: **NOTHING AFTER** _____

FULL LIQUID DIET

<u>Food Groups</u>	<u>Food Allowed</u>	<u>Food to Avoid</u>
Fruit	Apple Juice Grape Juice Cranberry Juice	Any Juice with Pulp (no orange juice)
Soup	Fat-Free or Low Fat: Chicken Broth Beef Broth Chicken Bouillon Beef Bouillon	All Others
Dessert	Jell-O, any flavor plain <u>(No red or purple dyes)</u> Ice Popsicles <u>(No red or purple dyes)</u>	All Others
Beverages	Water, Ice Coffee, <u>no milk or cream</u> Tea Any Carbonated Drinks <u>Boost (1-2 drinks maximum)</u>	All Others
Miscellaneous	Salt Sugar Hard Candy	All Others

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PROCEDURE CANCELLATION POLICY

In the event that a procedure needs to be cancelled, please notify our office as soon as possible. This allows us to provide timely care to our other patients.

Failure to notify our office at least 24 hours prior to your appointment time may result in a charge of \$75.00. **This charge will be the responsibility of the patient** and will not be billed to your insurance company.

Understanding Colonoscopy

Your physician has determined that Colonoscopy is necessary for further evaluation or treatment of your condition. This brochure has been prepared to help you understand the procedure. It answers frequently asked questions and should be read carefully. If you have additional questions, please feel free to discuss them with the endoscopy nurse or your physician before the examination.

What is a colonoscopy?

Colonoscopy is a procedure that enables your physician to examine the lining of your colon (large bowel) for abnormalities by inserting a flexible tube that is about the thickness of your finger into the anus and advancing it slowly into your rectum and colon.

What preparation is required?

The colon must be completely clean for the procedure to be accurate and complete. Your physician will give you detailed instructions regarding the dietary restrictions to be followed and the cleansing routine to be used. In general, preparation consists of either consumption of a large volume of a special cleaning solution or several days of clear liquids, laxatives, and enemas prior to the examination. Follow your doctor's instructions carefully. **If you do not, the procedure may have to be cancelled midway and repeated at a later date with prolonged bowel prep.**

Due to the sedation medications used during the procedure you will need a driver present to drive you home. **If you do not have a driver, the procedure will be rescheduled to another date.**

What about my current medications?

Most medications may be continued as usual, but some medications can interfere with the preparation of the examination. It is therefore best to inform your physician of your current medications as well as any allergies to medications you may have several days prior to the examination.

Aspirin products, arthritis medications, anticoagulants (blood thinners), insulin and iron products are examples of medications whose use should be discussed with your physician prior to the examination. You should alert your doctor if you require antibiotics prior to undergoing dental procedures, since you may need antibiotics prior to your colonoscopy as well.

What can be expected during colonoscopy?

Colonoscopy is usually well tolerated and rarely causes much pain. There is often a feeling of pressure, bloating, or cramping at times during the procedure. Your doctor will most likely give you medication through a vein to help you relax and better tolerate any discomfort from the procedure. You will be lying on your side or on your back while the colonoscope is advanced slowly through the large intestine. As the colonoscope is slowly withdrawn, the lining is again carefully examined. The procedure usually takes 15 to 60 minutes. In some cases, passage of the colonoscope through the entire colon to its junction with the small intestine

cannot be achieved. The physician will decide if the limited examination is sufficient or if other examinations are necessary.

What if the colonoscopy shows something abnormal?

If your doctor thinks an area of the bowel needs to be evaluated in greater detail, a forceps instrument is passed through the colonoscope to obtain a biopsy (a sample of the colon lining.) This specimen is submitted to the pathology laboratory for analysis. If colonoscopy is performed to identify sites of bleeding, the areas of bleeding may be controlled through the colonoscope by injecting certain medications or by coagulation (sealing off bleeding vessels with heat treatment.) If polyps are found, they are generally removed. None of these additional procedures typically produce pain. Remember, the biopsies are taken for many reasons and do not necessarily mean that cancer is suspected.

What are polyps and why are they removed?

Polyps are abnormal growths from the lining of the colon, which vary in size from a tiny dot to several inches. The majority of polyps are benign (non-cancerous) but the doctor cannot always tell a benign from a malignant (cancerous) polyp by its outer appearance alone. For this reason, removed polyps are sent for tissue analysis. Removal of colon polyps is an important means of preventing colorectal cancer.

How are polyps removed?

Tiny polyps may be totally destroyed by fulguration (burning), but larger polyps are removed by a technique called snare polypectomy. The doctor passes a wire loop (snare) through the colonoscope and severs the attachment of the polyp from the intestinal wall by means of an electrical current. You should feel no pain during the polypectomy. There is a small risk that removing a polyp will cause bleeding or result in a burn to the wall of the colon, which could require emergency surgery.

What happens after a colonoscopy?

After colonoscopy, your physician will explain the results to you. If you have been given medications during the procedure, someone must accompany you home from the procedure because of the sedation used during the examination. Even if you feel alert after the procedure, your judgment and reflexes may be impaired by the sedation for the rest of the day, making it unsafe for you to drive or operate any machinery.

What are the possible complications of colonoscopy?

Colonoscopy and polypectomy are generally safe when performed by physicians who have been specially trained and are experienced in these endoscopic procedures.

One possible complication is a perforation or tear through the bowel wall that could require surgery. Bleeding may occur from the site of biopsy or polypectomy. It is usually minor and stops on its own or can be controlled through colonoscope. Rarely, blood transfusions or surgery may be required. Other potential risks

include a reaction to the sedatives used and complications from heart and lung disease. Localized irritation of the vein where medications were injected may rarely cause a tender lump lasting for several weeks, but this will go away eventually. Applying hot packs or hot moist towels may help relieve discomfort.

Although complications after colonoscopy are uncommon, it is important for you to recognize early signs of any possible complications. Contact your physician who performed the colonoscopy if you notice any of the following symptoms: severe abdominal pain, fever and chills, or rectal bleeding which is more than one-half cup. Bleeding can occur several days after polypectomy.

To the patient:

Because education is an important part of comprehensive medical care, you have been provided with this information to prepare you for this procedure. If you have questions about your need for colonoscopy, alternative tests, the cost of the procedure, methods of billing, or insurance coverage, do not hesitate to speak with your doctor or your doctor's office staff. Most endoscopists are highly trained specialists and welcome your questions regarding their credentials and training. If you have questions that have not been answered, please discuss them with the endoscopy nurse or your physician before the examination begins.

American Society for Gastrointestinal Endoscopy

Thirteen Elm Street

Manchester, MA 01944

Telephone: (978) 526-8330