

COLONOSCOPY

FREQUENTLY ASKED QUESTIONS

1. What is the purpose of the preparation?

- A good or excellent bowel preparation before a colonoscopy is essential because the scope cannot see through fecal debris. If any fecal debris is left in the colon it could obscure identification of a polyp or even a small cancer.
- Several studies have shown that fewer small and large polyps are detected in patients with less-than-optimal bowel preparation. And poor preparation has several potential consequences.
 - First, your colonoscopy may last longer because the doctor will need to take time to clear out debris.
 - Second, your doctor may lack confidence that the colon lining was seen adequately and may ask you to return for a subsequent screening earlier than would be otherwise recommended – say 1 year, rather than 5 or 10 years.
 - Lastly, if the preparation is very poor, the doctor may have to stop the procedure entirely, and you will need to reschedule and repeat the preparation.
 - Therefore, strict adherence to the recommended bowel preparation is vital.

2. How long will it take for the bowel preparation to begin working?

- Individual response to laxatives does vary. This prep may cause multiple bowel movements within 30-60 minutes and may take as long as three (3) hours. Please remain within easy access of toilet facilities.

3. What if I am scheduled for a morning procedure but I have a commitment that lasts until after 5:00 p.m. on the day before the procedure, can I begin taking the preparation late (for example 6:00 p.m.)?

- If necessary, yes. However, keep in mind that you will likely be up later into the night using the toilet facilities. You should still drink the second dose 6 hours prior to arrival time.

4. Do I have to take the second half of the bowel prep 6 hours prior to the arrival time?

- Yes, we recommend this timing because it gives a better preparation of the colon. If you have more than an hour commute, you can move this time up by 1-2 hours.

5. What if I have nausea or vomiting during the preparation?

- Feelings of nausea, bloating, or chills are common during the preparation ingestion. This is usually temporary and will improve after the bowel movements begin. If the nausea becomes

severe and you are concerned that you are going to vomit (or you do vomit), stop taking the preparation for 30-60 minutes. Restart the preparation when your nausea subsides and go at a slower pace to completion. This may mean that you are awake later into the night doing the preparation, but it is preferable to you vomiting and losing the progress that you have already made.

6. What if I have a tendency towards constipation?

- You may want to purchase an over the counter stool softener called Miralax-OTC the week prior to the procedure. You can take 1 capful with 8 oz. of fluid daily in the week before the procedure to ensure that you are not trying to clear out a constipated colon on the night before the procedure. This will only improve the quality of your bowel preparation and decrease the chance of having to repeat the procedure because of a poor prep.

7. I have taken ALL of the preparation and 2-3 hours later my stools are still formed/solid, what should I do?

- As detailed above, the goal of the preparation is for your stools to be as close to a clear/yellow liquid as possible. If you are still seeing stool after completing the bowel preparation, please call the office to speak to a physician or nurse regarding additional options. If calling after business hours, please ask to have the on-call physician paged.

8. Will the preparation process cause irritation around the anal area?

- Unfortunately, going to the bathroom numerous times to cleanse your colon does often cause irritation of the anal area. Consider purchasing some baby wipes with aloe for wiping purposes and/or topical soothing cream such as Preparation H.

9. Will the procedure be performed under anesthesia?

- Unless your doctor or nurse tells you otherwise, your procedure will be performed under moderate sedation. A peripheral IV will be inserted and two medications will be administered (Versed and Fentanyl); these will make you very sleepy/drowsy during the procedure which is why you need to have a capable adult accompany you home.

10. What if I have a cold?

- If you have a mild cold with no fever, it is okay to take Tylenol and other over the counter cold medications and proceed with the preparation and the procedure. However, if you have a fever or more severe symptoms, it may be safer to call and reschedule the procedure. Please call the office to further discuss.

11. Will having my period interfere with the colonoscopy?

- Not at all. It is absolutely fine to use a tampon and/or pad.

12. Which medications should I take on the day of the procedure?

- See Medication section in the beginning of this document for information regarding diabetic and blood thinner medications. All other medications can be taken up until 4 hours prior to your arrival time, or after the procedure.

13. Pregnant or breastfeeding

- Please let us know if you are or could be pregnant because, except in very rare cases, a colonoscopy should not be performed.
- If you are breastfeeding, you may resume breastfeeding once you are awake, stable, and alert after your procedure unless otherwise instructed by your physician.

14. Pre-procedural Antibiotics

- Antibiotics are rarely needed prior to a colonoscopy. If you are a patient with kidney failure who receives peritoneal dialysis, please notify us ahead of time by calling our office at least 3 days prior to your procedure. IV antibiotics will be given prior to the procedure. If any of your other doctors feels it is necessary for you to receive antibiotics for another reason, he/she can give you a prescription for them.

15. What can I expect in terms of recovery?

- The sedation medication used during your procedure will help you feel relaxed and calm. There is a possibility you may remember parts of your procedure, but many do not. After your procedure, you may feel weak, tired, or unsteady on your feet. You may also have trouble concentrating or short-term memory loss, but these symptoms should go away in 12-24 hours. For these reasons, do not drive, make important decisions, drink alcohol, operate machinery, or return to work for the rest of the day. We strongly recommend that you go home and rest. You may return to normal activity the following day unless instructed otherwise by your physician.

16. Do I have to take this particular bowel preparation? How come my friend or family member had a different preparation? What about the pill prep?

- While we understand the preparation for this procedure is not the easiest, a good or excellent bowel preparation is critical for polyp and cancer detection. Some bowel preps do not give the best preparation. Furthermore, bowel preps are selected based on the individual (i.e. history of poor or fair preps or poor kidney function). If you still have concerns, please call our office to further discuss.