



Digestive Health Center

PER ORAL & PER ANAL DOUBLE BALLOON ENTEROSCOPY (DBE) INSTRUCTIONS

Appointment Date: _____ Arrival Time: _____ Physician: _____

**Plan to spend 4-5 hours in the GI Lab

Location 675 N Saint Clair St, **Galter** Pavilion,
4th floor, Chicago, IL

Insurance Codes:

Diagnosis Code (ICD 10): _____

Procedure Code (CPT): 44799

Upper: 44360 / 44376 (w/ ileum)

Welcome

Northwestern Medicine Memorial Hospital strives for your experience with Endoscopy Services and the hospital to be excellent. Your safety and comfort are our primary concern and we want your stay to be an exceptional experience.

Appointment Information

You will receive an arrival time for your procedure. Please be aware that your procedure may be delayed due to unforeseen circumstances.

Please keep your original appointment. If you need to re-schedule your procedure, you MUST give at least a 7-day notice.

For scheduling related matters, please call: 312.926.0628

For clinical concerns/questions, please call: 312.695.5620

Transportation and Parking

Due to the lingering effects of the sedation, you **MUST** have a trusted and capable adult accompany you home at the time of discharge. You cannot take a Taxi, Uber or public transportation by yourself. Your procedure will be cancelled if you do not have an escort arranged.

You will NOT be able to return to work after the procedure.

Parking for the Lavin location is available within the Lavin building located at 259 E. Erie Street, which is accessible from both Erie and Ontario streets. Bring your parking ticket to the GI lab for validation to receive a discount on your parking deck fee. Valet parking is available.

Parking for the Galter Pavilion is located at 222 E. Huron Street. Use second floor bridge to access Galter Pavilion.

For more information on our parking garage locations, parking deck fees, and a map, please visit www.nm.org.

About your test

An Enteroscopy is a test to evaluate the colon, leading into the ileum and possibly the jejunum visualizing the end of the small bowel. During the procedure, the physician uses a thin, flexible tube with a balloon on the end of the special enteroscope camera and an overtube. This push-and-pull method enables the physician to evaluate biopsy and potentially treat any bleeding, polyps, masses and identify rectal, sigmoid colon, ileum or other small bowel diseases. This test is done under anesthesia and may be performed through the mouth (antegrade) or through the anus (retrograde).

<u>Timeline</u>	<u>Procedure Preparation</u>
14 DAYS BEFORE THE PROCEDURE	<ul style="list-style-type: none"> ➤ If you are taking a blood thinner (Coumadin, Plavix, Eliquis, etc.) other than aspirin, please contact your prescribing physician at least 2 weeks before your procedure to discuss how long to hold these medications. Your prescribing physician will tell you how many days prior to your procedure to stop/bridge your blood thinner. You may continue to take aspirin.
7 DAYS BEFORE THE PROCEDURE	<ul style="list-style-type: none"> ➤ If you are taking a blood thinner (Coumadin, Plavix, Eliquis, etc.) other than aspirin, please begin following <u>your prescribing physician's instructions</u> for discontinuing or bridging this medication prior to the procedure. You may continue to take aspirin. ➤ If you are taking diabetic medication, please contact the prescribing physician to discuss dosage adjustments to avoid low blood sugar. ➤ Please STOP eating ALL nuts, quinoa, seeds, and corn. These foods can make the procedure more difficult, so please try to avoid them in efforts to make the procedure as easy as possible. However, if you accidentally eat some these items, there is no need to contact us or cancel/postpone the procedure. ➤ Discontinue iron supplements, fiber supplements and anti-diarrheal medications seven (7) days prior to the procedure. ➤ Please ensure you have obtained your bowel preparation supplies from your pharmacy.
3 DAYS BEFORE THE PROCEDURE	<ul style="list-style-type: none"> ➤ Please contact your insurance company to verify coverage and if you will have any out of pocket costs, or precertification requirements. Please see the insurance/billing handout for more information on billing, coding, and potential out-of-pocket costs. ➤ Make transportation arrangements utilizing the transportation and parking section of this document. ➤ You may complete pre-procedure forms ahead of time by visiting: https://www.nm.org/conditions-and-care-areas/digestive-health. <ul style="list-style-type: none"> ○ Scroll to the bottom of the page and locate Related Resources. Select GI Lab Patient Questionnaire and Medication List.
THE DAY BEFORE THE PROCEDURE	<ul style="list-style-type: none"> • If you develop any moderate to severe cold symptoms (cough, sore throat, runny nose, etc.), a fever, new cut or wounds, or experience any other changes in your health before your procedure, please contact your physician's office.

Diet Instructions:

- Follow a clear liquid diet ALL DAY the day before your procedure beginning when you wake up. Failure to follow this diet may result in cancellation and repeating the preparation. You may have clear liquids until midnight.
 - Clear liquids include any of the following (please avoid all RED and PURPLE colors):
 - Water, apple juice, white grape juice, lemonade (no pulp), broth/bouillon, Jell-O, popsicles/Italian ice, 7-up, ginger ale, Gatorade, coffee, tea (no milk or creamer).
- Do not eat anything including gum, mints, tobacco, cough drops, or smoke any substance (i.e. tobacco, vape, marijuana) after midnight.
- After midnight, you may have plain water, black coffee/tea (no milk or creamer may be added, however, sugar and artificial sweeteners are permitted), apple juice, or Gatorade up to 6 hours prior to your scheduled arrival time. All other beverages/drinks are to be avoided after midnight.

Bowel Preparation for your Per Anal/Retrograde Enteroscopy:

- Please follow the specific bowel preparation handout as instructed by our office.

**THE DAY OF
YOUR
PROCEDURE**

- You may take your morning medications with sips of water up until 6 hours before your scheduled arrival time.
- On the day of your procedure, please be available by phone. Occasionally, procedure times are adjusted if the previous cases have run longer or are finished early.
- Call your surgery center if you cannot arrive at your scheduled time at 312.926.2425.
- Bring a photo ID and insurance card.
- If you have an implanted cardiac defibrillator or pacemaker, bring your device card with you.
- If you use any inhalers or a CPAP machine, please bring these items with you to the procedure as they may be needed for the procedure.
- Wear loose-fitting, comfortable clothes.
- Avoid wearing make-up, jewelry, or contact lenses.
- If you wear contacts, please bring your glasses as your contacts will need to be removed for the procedure.
- For your privacy and safety, only one guest is allowed in the pre-operative and postoperative holding areas.
- Your personal items will be placed and remain under your procedure cart during the entire visit. We recommend bringing only essential items to the hospital and leaving any valuables at home or give them to a trusted family member or friend. The hospital is not responsible for lost or damaged personal belongings.

ENTEROSCOPY PREPARATION GUIDELINES

GENERAL

- Please follow the dosage timing as provided within the prescribed bowel preparation instructions. This method gives the best bowel preparation/cleansing possible. An excellent bowel preparation is crucial for bowel evaluation and polyp detection.
- You may have plain water, black coffee/tea (no milk or creamer may be added, however, sugar and artificial sweeteners are permitted), apple juice, or Gatorade up to 6 hours prior to your scheduled arrival time – after this, nothing by mouth. This includes gum, mints, hard candy, cough drops, and cigarettes/tobacco/vape/marijuana.
 - For example, for a 7:30 AM arrival time, nothing by mouth after 1:30 AM.

MEDICATIONS

- If you are taking a **blood thinner (Coumadin, Plavix, Eliquis, etc.)** other than aspirin, please contact your prescribing physician at least 2 weeks before your procedure to discuss how long to hold these medications. You may continue to take aspirin.
 - Do NOT wait until the day before your procedure to have this discussion, as some blood thinners need to be held several days prior to the procedure.
 - Aspirin and fish oil are okay to continue taking.
 - Taking NSAIDs (ibuprofen, naproxen, etc.) may cause irritation in your stomach, which may be seen during your endoscopy. If you need to continue NSAIDs for pain, please make sure the endoscopy team is aware of what you are taking before your endoscopy. If you are able to stop NSAIDs before your endoscopy, please stop for 1 week prior to your procedure. Tylenol (acetaminophen) maybe used in place of NSAIDs. You never should stop aspirin.
 - Please stop taking your Non-Steroidal Anti-Inflammatory Drugs (NSAIDs) (1) day prior to procedure. NSAIDs may put you at risk for bleeding if a biopsy is taken. Since Acetaminophen (Tylenol) does not affect your blood clotting ability, it may be used for headache or pain.
- If you are taking **diabetic medication**, please contact the prescribing physician to discuss dosage adjustments to avoid low blood sugar.
- You may take your other normal medications up until 6 hours prior to arrival time.

CONTACT INFORMATION

Please review this document and the FAQ section before calling our office with questions as your question may be answered from within this document.

Clinic	312.695.5620
Procedure Scheduling	312.926.0628
Pre-Certification	312.926.4645
Billing	844.669.2455
Financial counseling/price estimates	312.926.6906
Hospital	312.926.9000
Medical Records	312.926.3376
Digestive Health Fax	312.695.7095
dhc.nm.org	

FREQUENTLY ASKED QUESTIONS

What is the purpose of the preparation?

- A good or excellent bowel preparation before an enteroscopy 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.
- A sub-optimal preparation has several potential consequences.
 - First, your enteroscopy may last longer because the doctor will need to take time to clear out debris.
 - 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.

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.

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.

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.

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.

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.

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.

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.

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.

Will having my period interfere with the enteroscopy?

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

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 6 hours prior to your arrival time, or after the procedure.

Will I have discomfort after the procedure?

- Typically, no, however, some people can have a mild sore throat after the procedure, but this should be tolerable and should resolve after 1-2 days. For any severe or intolerable symptoms, please contact our office or go the emergency room.

Pregnant or breast feeding

- Please let us know if you are or could be pregnant because, except in very rare cases, a enteroscopy 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.

Pre-procedural Antibiotics

- Antibiotics are rarely needed prior to a enteroscopy. 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.

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.

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.

What if I have removable dental work?

- Please remove any loose dental work prior to the procedure if you are receiving sedation.