

Lower Endoscopic Ultrasound (EUS) Bowel Prep Instructions

- Page 1: Day by day bowel prepping instructions
- Page 2: Bowel prep types we offer and instructions for each
- Page 3: Special notes for patients
- Page 4: FAQ of bowel prepping,
- Page 5: Guide to pre-colonoscopy diet
- Page 6: What to expect during procedure & contact information

7 days prior
to
colonoscopy



Patient Responsibilities

- Pick up your bowel prep and Zofran prescriptions at your pharmacy.
- Purchase a small box of Simethicone (Gas-X) 125 mg tablets (over the counter).
- Continue taking all your regular medications.
- Check the special notes section on pg 3 for detailed information on medical conditions and/or medications that may impact your prepping and take all necessary actions.

5 days prior
to
colonoscopy



Patient Responsibilities

- STOP eating any high fiber foods and START eating low fiber foods (see pg 5).
- Arrange a driver who can bring you to the hospital, drive you home, and monitor you at home after the procedure. You will not be allowed to drive, take a bus, take a taxi, or leave the facility alone after receiving sedation. If you do not have someone to sign you out, drive you home, and monitor you at home afterwards, your appointment will need to be rescheduled.

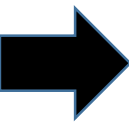
The day
before
colonoscopy



Patient Responsibilities

- Prior to 9AM- you may have a low fiber breakfast, such as eggs and white buttered toast. This is the last solid food you will eat until your colonoscopy is over.
- Diabetics should follow the special notes section on pg 3
- The rest of the day follow a clear liquid diet, do not eat solid food. See pg 5 for a list of foods and drinks that are OK to have while on the clear liquid diet.
- 6PM-Complete the first half of your bowel prep following the directions on pg 2

Day of
colonoscopy



Patient Responsibilities

- Complete the second half of your bowel prep following the directions on page 2
- You may continue to drink clear liquids up until 2 hours prior to check in.
- You may take your regular medications up until 2 hours prior to check in.
- 2 hours prior to check in-STOP drinking everything, including water. Do not use gum, mints, hard candy, or lozenges. You may brush your teeth but do not swallow any water.

Lower Endoscopic Ultrasound (EUS) Bowel Prep Instructions

Which bowel prep have you been prescribed? Prep types are chosen for you by the Digestive Health office based on your health history and insurance co-pays.

Golytely/Colyte/PEG-based preps



Mix your bowel prep with water to the indicated line on the jug, shake until dissolved. Once dissolved it may be chilled in the refrigerator.

- 1. 5:30PM**-Take one Zofran tab and one Simethicone tab.
- 2. 6PM**-Start your bowel prep. Drink one 8oz glass of the prep solution every 10 mins until the jug is half empty (usually about 8 glasses). You can take 1 additional Zofran if needed for nausea develops during the prep.
- 3. The next morning, 4 hours prior to check in**-Take one Zofran tab and one Simethicone tab.
- 4. 3-4 hours prior to check in**- Drink the second half of your bowel prep. Repeat the process from the evening before (step 2 above). You may continue to drink clear liquids until 2 hours prior to check in.
- 5. 2 hours prior to check in-STOP drinking everything, including water.** You may take your regular medications at this time (except for those listed on pg 3). ****if you are using a thickening agent, then bowel prep needs to be finished 7 hours prior to arrival.**

Sutab-tablet based prep



- 1. 5:30PM**-Take one Zofran tab and one Simethicone tab.
- 2. 6PM**-Open one bottle of Sutab tablets (12 tablets). Fill the provided container up to the fill line (16 oz) with water. Swallow each tablet and then drink the entire amount over 15-20 mins. **One hour** after the last tablet is swallowed, refill the container with water and drink the entire amount over 30 mins. **30 mins** after finishing the second container of water, refill it and drink the entire amount for a 3rd time. You can take 1 additional Zofran if needed for nausea develops during the prep.
- 3. The next morning, 5.5 hours prior to check in**-Take one Zofran tab and one Simethicone tab.
- 4. 5 hours prior to check in**-Open the second bottle of Sutab tablets (12 tablets) and repeat the process from the evening before (step 2 above). *Ensure you drink 3 full containers of water.*
- 5. 2 hours prior to check in-STOP drinking everything, including water.** You may take your regular medications at this time (except for those listed on pg 3).

Suprep



- 1. 5:30PM**-Take one Zofran tab and one Simethicone tab.
- 2. 6PM**-Start your bowel prep. Pour the contents of one bottle of Suprep into the mixing container provided. Fill the mixing container with water to the 16oz fill line. Mix and drink ALL the liquid in the container. Drink two additional containers filled to the 16oz line with water over the next hour. Do NOT skip this step.
- 3. The next morning, 4 hours prior to check in**-Take one Zofran tab and one Simethicone tab.
- 4. 3-4 hours prior to check in**-Drink the second half of your bowel prep. Repeat the process from the evening before (step 2 above). You may continue to drink clear liquids until 2 hours prior to check in.
- 5. 2 hours prior to check in-STOP drinking everything, including water.** You may take your regular medications at this time (except for those listed on pg 3). ****if you are using a thickening agent, then bowel prep needs to be finished 7 hours prior to arrival.**

Lower Endoscopic Ultrasound (EUS) Bowel Prep Instructions

Special Notes for Patients on Blood Thinning Medications

- **ALL prescription blood thinners will need to be stopped prior to procedure, no exceptions.** It is your responsibility to call the provider who manages your blood thinners ASAP for guidance on how and when to stop taking them. Do not stop taking your blood thinners without consent from your prescribing provider.
- Some common prescription blood thinning medications: clopidogrel (Plavix), warfarin (Coumadin), ticagrelor (Brillinta), prasugrel (Effient), rivaroxaban (Xarelto), dabigatran (Pradaxa), apixaban (Eliquis), dipyridamole (Aggrenox), fondaparinux (Arixtra), dalteparin (Fragmin), cilostazol (Pletal), enoxaparin (Lovenox), edoxaban (Savaysa), or ticlopidine (Ticlid).
- Aspirin 81-325 mg/day is safe to take up to and after your procedure.
- If you routinely see a cardiologist, please call their office and ensure you have medical clearance to receive anesthesia. For your safety, anesthesia providers may request a medical clearance letter from your cardiologist.

Special Notes for Diabetic Patients

- While on the clear liquid diet the day before procedure and morning of procedure, you should primarily drink sugar-free clear liquids. Additionally, all diabetic medications (pills, insulin, and injectables) should be reduced in dose by half while on the clear liquid diet. Check your blood sugar frequently during this time. It is a good idea to have some non-diet clear liquids, such as apple juice, on hand in case your blood sugar drops.
- See “Other Medication Notes” for guidance on GLP-1 medication (medication name ends in “-tide.”)
- If you typically have issues controlling your blood sugars or have questions about your diabetic medications, we highly recommend contacting your endocrinologist or PCP for guidance on how to best manage your blood sugar while bowel prepping.

Other Medication Notes & Tips for Prepping if Constipated

- **If you take the following medications:** iron supplements, fish oil, vitamin E, Metamucil, or fiber supplements, please **STOP** taking these 7 days prior to your procedure.
- Prescription pain medications, Tylenol ibuprofen/naproxen/diclofenac/meloxicam (NSAIDs) are safe to take leading up to and after your procedure.
- **GLP-1 medication is most often prescribed for diabetes and weight management. Regardless of the reason why you take this medication, you will need to STOP this medication prior to your procedure due to increased risk of aspiration when sedated.** Examples include: dulaglutide (Trulicity), exenatide (Byetta or Bydureon), liraglutide (Victoza or Saxenda), Lixisenatide (Adlyxin), Semaglutide (Ozempic, Wegovy or Reyblsus), and tirzepatide (Mounjaro.)
 - If you are on daily dosing, hold GLP-1 medication the day of the procedure. You can resume after procedure.
 - If you are on weekly dosing, hold medication starting 7 days prior to the procedure. You can resume after procedure.
 - If your GLP-1 medication is prescribed for diabetes management and held for more than 7 days, ask your prescribing provider for bridging anti-diabetic therapy to avoid high blood sugars.
 - If you are taking any medication for weight loss, regardless of the medication this needs to be stopped 7 days prior to procedure. You can resume after the procedure.

If you struggle with constipation, you may have a hard time getting a clean colon even if you follow the diet and bowel prep instructions closely. You may have chronic constipation if you have any of the following: <3 stools per week, hard stool with at least 25% of bowel movements, or straining or difficulty passing at least 25% of stools. We recommend purchasing a 10 oz bottle of Magnesium Citrate (OTC laxative) and drink it the night before you start the clear liquid diet (2 days prior to procedure). If you have impaired kidney function, you should not use Magnesium Citrate, or if you cannot find Magnesium Citrate, please use MiraLAX instead (one capful three times daily starting 7 days prior to procedure.)

Lower Endoscopic Ultrasound (EUS) Bowel Prep Instructions

If you develop cold/flu symptoms or test positive for Covid prior to your procedure date, please call our office. Unfortunately, you will likely need to be rescheduled. See contact info on page 3.

Bowel Prep Frequently Asked Questions

What is a clear stool?

A clear stool should look like urine. It will be completely transparent or yellow, and will not contain any solid matter. It should not be cloudy. If your stools are not clear, you may have to be rescheduled or reprep.

Why is it so important that my stools are clear?

An excellent bowel preparation is critical for colonoscopy because it permits visualization of the entire colon lining. A poor preparation leads to increased procedure time, risk of complications, and increases the probability of missing polyps that could eventually turn into colon cancer.

What is the Zofran (ondansetron) used for?

Zofran is a medication used to reduce nausea. We prescribe it as a courtesy with all of our bowel preps. It works best if taken 30 minutes prior to starting each half of the bowel prep. Taking Zofran is optional.

What is the Simethicone used for?

Simethicone is an over-the-counter anti-gas medication that reduces gas and bubbles in the colon. You can find it in any drug store or grocery pharmacy aisle. It significantly increases visualization for the doctor during procedure. We recommend using simethicone 125 mg tablets.

I am a small or petite person. I probably don't need to drink all of the prep, right?

Not true. The prep is not weight dependent. It is important to finish all the prep and required water.

Why do I have to wake up so early for the 2nd dose, can't I take it all the night before?

The split-dose technique has been proven to be the most effective for a successful colon prep. Even if your stools are clear the night before your colonoscopy, the morning dose of bowel prep will eliminate the thick bile coating in your colon that has formed during the night. It is essential that you follow the directions provided here.

How can I make the bowel prep taste better?

Many people find that drinking the prep through a straw is easier. You may also use sweet clear liquids to cleanse your palette after each glass of the prep. Other people prefer to lick a lemon or lime wedge after each drink of the prep.

I drank my evening prep and my morning prep and my stools are still not clear, what should I do?

You must call the endoscopy center to which you are assigned and speak to a nurse for guidance. See contact info on pg 5. The endoscopy centers are open at 6:30AM.

I recently tested positive for Covid or I have cold/flu symptoms and my procedure is coming up, what should I do?

Please call our office, you will likely need to reschedule your procedure. See contact info on page 5.

Lower Endoscopic Ultrasound (EUS) Bowel Prep Instructions

Diet Recommendations

Foods to avoid starting 5 days prior to procedure: beans, nuts, legumes, lentils, whole grains, brown rice, oatmeal, smoothies, dried fruit, seeded breads, whole wheat breads, popcorn, sesame Seeds, poppy seeds, sunflower seeds, fresh fruit (including soft fruits such as bananas, avocados, berries), raw veggies, corn, corn bread, kale, salad greens, black pepper, salsa, chunky tomato sauces. Also avoid tough, processed or cured meats such as bacon, gristly steaks, over-cooked chicken, jerky, or hot dogs.

Foods OK to eat starting 5 days prior to procedure: tender cuts of beef, chicken, pork, ground meats, fish, shellfish, lunch meats, white bread, condiments, butter, flour tortillas, white rice, pasta dishes, pureed pasta sauces, eggs, cheese, dairy products, yogurt without fruit chunks, tofu, smooth nut butters, jelly without seeds, canned fruits with skin and seeds removed, well-cooked vegetables with skin and seeds removed, crackers without seeds or whole grains, puddings, cream of wheat, pretzels, cream soups, pizza without veggies, baked goods such as cakes/croissants/cookies/bagels, cream cheese, protein shakes, ice cream.

Foods OK to eat and drink on a clear liquid diet: water, apple juice, white grape juice, white cranberry juice, grapefruit juice with no pulp, lemonade with no pulp, beef broth, chicken broth, vegetable broth, bone broth, Jell-O or gelatin, sodas, sports drinks, popsicles that do not contain pureed fruit or dairy, coffee without cream (sweetener is OK), tea without cream (sweetener is OK), powdered or liquid water enhancers such as Crystal Light. Try to avoid **RED**, **BLUE**, or **PURPLE** colored liquids. Please try to drink as many fluids as possible while prepping to avoid dehydration. **Do not drink any alcohol. Do not drink any dairy products, nut milks, creamers, cocoa, or opaque liquids of any kind.**

Lower Endoscopic Ultrasound (EUS) Bowel Prep Instructions

What to expect at the endoscopy center

Before	During	After
<ul style="list-style-type: none"> You will check in through hospital registration and be called back into the patient care area by the Endoscopy staff. A nurse will go over your health history, medications, and get you ready for the procedure. Your GI doctor will meet with you to discuss the procedure, any symptoms or concerns you may have, and answer your questions. Your anesthesia provider will meet with you to discuss the procedure, your health history, and answer any questions you may have. 	<ul style="list-style-type: none"> You will be wheeled into the procedure room and move yourself into a left side lying position. Once you are sedated, your GI doctor will perform your procedure. Any abnormalities he encounters will be removed or biopsied at that time. The procedure usually takes around 30 minutes and most patients spend 3 hours at the endoscopy center, check in to check out. 	<ul style="list-style-type: none"> You will wake up back in the recovery area. You may have some mild bloating, but most people wake up feeling good. Once you are awake, your GI doctor will meet with you again and go over the details of the procedure with you, including pictures. A nurse will get you ready to go home and go over your discharge instructions with you. You cannot drive for 24 hours after receiving sedation. After you leave the facility, you may resume your medications and normal diet but start slowly to avoid GI upset. If your doctor recommends limitations with your diet or medications, your nurse will discuss these with you before discharge home. Rest for the remainder of the day and make sure you have someone checking on you regularly. You may return to normal activities the next day.

How to contact us

- If you have any questions or concerns about the bowel prepping process, please Multicare Rockwood Digestive Health office **509.755.5220, option 2** M-F 8:00am-5:00pm.
- If you are unable to keep this appointment, please be courteous and cancel or reschedule as soon as possible so we can fill your slot with one of our many patients waiting for an appointment. Call the Digestive Health office at 509.755.5220, option 1 for scheduling.**
- For questions regarding failed bowel prepping, check in times, hospital visitor restrictions, directions to the endoscopy centers, or questions about your procedure, please call your assigned endoscopy center.**

Deaconess Hospital Endoscopy
 910 W 5th Ave, suite 500
 Spokane, WA 99204
509.603.4877

Valley Hospital Endoscopy
 12606 E Mission Ave
 Spokane Valley, WA 99216
509.603.5023