

Colonoscopy Bowel Prep Instructions

This page is a timeline of how to prepare for your procedure. If you still have questions after reading all the instructions in this document, please call the clinic Monday-Friday 8:00am-5:00pm at (509) 755-5220 option 2

When scheduling procedure	<ul style="list-style-type: none"> <input type="checkbox"/> For your safety, certain medications will need to be stopped or adjusted before you can have your procedure. Please read and follow instructions for medications outlined on page 2. <input type="checkbox"/> You MUST arrange for a responsible adult to drive you to the endoscopy center, check in with you, and be able to return within 15 minutes of a phone call to drive you home and be available to stay with you after you receive sedation. You will need to be rescheduled if you don't have an adult to accompany you to and from your procedure.
8 days Prior to Procedure	<ul style="list-style-type: none"> <input type="checkbox"/> Pick up bowel prep and anti-nausea medications at your pharmacy <input type="checkbox"/> Purchase a small box of simethicone (Gas-X) 125 mg tablets (over the counter) <input type="checkbox"/> Hold weekly dosing GLP-1 medications. You must be off these medications for a full 7 days. <input type="checkbox"/> Stop taking iron supplements, fish oil, vitamin E, fiber supplements, and other vitamins <input type="checkbox"/> If you suffer from constipation, please refer to the special instructions for constipation on page 3.
3 days prior to procedure	<ul style="list-style-type: none"> <input type="checkbox"/> Stop eating high fiber foods and start eating a low fiber diet. (See page 4) <input type="checkbox"/> Stop taking ALL fiber supplements such as Metamucil or Benefiber <input type="checkbox"/> Hold SGLT-2 oral antihyperglycemic Type 2 diabetes medications (see page 2) <input type="checkbox"/> Confirm your responsible adult driver that will drive you to and from your procedure and stay with you after you receive sedation. You cannot drive for 24 hours after receiving sedation.
The day before procedure	<ul style="list-style-type: none"> <input type="checkbox"/> Hold daily dosing GLP-1 medication. You must be off these medications for a full 24 hours. <input type="checkbox"/> Before 9 AM you may have a low fiber breakfast, such as eggs and white toast (see page 4). After this you will not eat solid food until after your colonoscopy <input type="checkbox"/> After 9 AM, follow a clear liquid diet, do not eat any solid food. (See page 4) <input type="checkbox"/> You can mix your bowel prep at any time today and place it in the refrigerator to chill. <input type="checkbox"/> At 5:30 pm follow the instructions for your prep outlined on page 5 of this document.
Day of Procedure	<ul style="list-style-type: none"> <input type="checkbox"/> 6 Hours prior to check-in, stop the use of ALL smokeless tobacco products <input type="checkbox"/> 4.5 hours prior to your check in time, follow the instructions for the second half of your prep outlined on page 5 of this document. <input type="checkbox"/> 2 hours prior to check-in, do not take anything by mouth. Do not drink any fluids, chew gum, candies, mints, tobacco etc., or your procedure could be canceled. <input type="checkbox"/> 1-2 hours after completing your prep, your stool should be clear and have the appearance of urine (please see example on page 3). If your stool is not clear please contact the appropriate endoscopy center (see page 5), as soon as possible for guidance. <p style="text-align: center;">When you arrive, please check in with the registration desk to obtain an armband and they will direct you to the location of the endoscopy center.</p>

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Medications:

You can take most of your regularly prescribed medications up to the day of your procedure, unless told otherwise by a provider or pre-procedure nursing.

Iron supplements, fish oil, vitamin E, fiber supplements, and other vitamins need to be stopped 7 days before your colonoscopy because they impair visualization of the colon.

Blood Thinners

- Blood thinners may need to be temporarily stopped prior to your procedure. The length of time you will need to be off your medication depends upon which drug you are taking. **For your safety, please reach out to your prescribing provider at least 2 weeks before your procedure for guidance on how to safely adjust your blood thinning medication.** For your safety, do not stop taking these medications without first speaking to the prescribing doctor.
- Aspirin 81-325 mg/day is safe to take up to and after your procedure
- If you have questions about holding your blood thinning medication, please contact the pre-call RN at your endoscopy center: **Deaconess Endoscopy 509.603.4877 option 3, Valley Endoscopy 509.603.5423 option 3**

Diabetes Medications and Blood Sugar Management

- Please contact the prescriber of your diabetic medications for guidance on adjusting your medications and managing your blood sugars while you are preparing for your procedure.
- GLP-1 medications need to be stopped before your procedure as outlined in the GLP-1 section below. Please speak with your prescribing provider for guidance on blood sugar management while needing to be off these medications.
- SGLT-2 are a group of oral antihyperglycemic medications used to treat Type 2 diabetes. Examples of SGLT-2 medications are canagliflozin (Invokana), dapagliflozin (Farxiga), empagliflozin (Jardiance), and ertugliflozin (Steglatro). **These medications need to be held for a minimum of 72 hours before your procedure.**
- Check your blood sugar frequently while on the clear liquid diet and during the prepping process.
- It is a good idea to have some non-diet clear liquids, such as apple or white grape juice on-hand in case your blood sugar drops.

GLP-1 and Weight Management Medications

GLP-1 medications can decrease the rate at which the stomach becomes empty and increase the risk of aspiration during a procedure. For your safety, please follow the guidelines below for holding these medications. Medications in the GLP-1 drug class include: Dulaglutide (Trulicity), Exenatide (Byetta), Liraglutide (Victoza), Lixisenatide (Adlyxin), Semaglutide injection (Ozempic), Semaglutide tablet (Rybelsus), Tirzepatide (Mounjaro).

- If you take it daily, hold the GLP-1 medication 1 day prior to the procedure, you need to be off this medication for a full 24 hours. You can resume the medication after the procedure.
- If you take it once a week, hold the medication starting 7 days prior to the procedure, you will need to be off this medication for a full 7 days. Example: if you take your GLP-1 injection on a Monday, the

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earliest you can have your procedure is the following Tuesday. You can resume the medication after the procedure.

Special Instructions for Patients Who Struggle with Constipation

If you have less than 3 bowel movements per week or many of your stools are hard and require straining when passing, then you may have chronic constipation and will need a bit more help to achieve a proper prep for your procedure. We recommend purchasing a 10 oz bottle of Magnesium Citrate (an over-the-counter laxative) and drinking it the day before you start the prep (2 days prior to the procedure). **If you have impaired kidney function, do not drink Magnesium Citrate. Instead, use Miralax one capful two times daily, starting 7 days prior to the procedure.**

Bowel prep frequently asked questions

What is a clear stool and why is it so important?

A good colon prep should look like urine. It will be completely transparent or yellow, and will not contain any solid matter. It should not be cloudy. Please use the picture below as reference. If your stools are not clear, you may have to drink additional prep or be rescheduled. An excellent bowel preparation is critical for the colonoscopy procedure because it allows the doctor to see 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 does NPO mean and why is it important?

NPO means “nothing by mouth”. This means no sips, no drinks, no gum, no candies, no mints, no ice chips, no tobacco, absolutely nothing by mouth after the instructed NPO time. It refers to the time before a procedure during which you CANNOT eat or drink anything to ensure there is no fluid in your stomach. This is important for your safety during your colonoscopy and to avoid a rare complication known as aspiration pneumonia which can lead to hospitalization. Please help us keep you safe during your procedure and prevent complications by following the NPO times written in these instructions.

What is the Zofran (ondansetron) and simethicone used for?

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

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an anti-gas medication that helps decrease bubbles in the colon and improves the visualization of your colon during the procedure.

How can I make the bowel prep taste better and do I really need to drink all of it?

Mixing your prep and placing it in a refrigerator can make it more tolerable. Some people find that drinking prep through a straw is easier. You may also use yellow Gatorade or a similar clear liquid to mix the prep solution. The prep is not weight dependent and does not change if you have had gastric surgery. **Yes! You really do need to drink all of it.**

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.

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. The endoscopy centers are open at 6:30AM. **Deaconess Endoscopy 509.603.4877 option 2, Valley Endoscopy 509.603.5423 option 2**

Dietary Instructions

Foods you CANNOT eat starting 3 days prior to procedure: High fiber foods such as: beans, nuts, seeds, legumes, lentils, popcorn, whole grains, brown rice, oatmeal, raw/uncooked vegetables, salad/leafy green vegetables, fresh or dried fruit, whole wheat/multigrain breads. Stop taking any fiber supplements such as Metamucil or Benefiber.

Foods you CAN eat starting 3 days prior to procedure: Low fiber foods such as: meat, white bread, flour tortillas, white rice, pasta, pureed pasta sauces, eggs, cheese, dairy products, yogurt without fruit chunks, tofu, smooth nut butters, jelly without seeds, canned fruits without skin and without seeds, well-cooked vegetables without skin and without seeds, puddings, cream of wheat, pretzels, creamy 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, fruit juices without pulp, **Fat-Free broth (NO bone broth)**, plain Jell-O or gelatin, plain clear popsicles, clear carbonated beverages, clear sports drinks, , coffee or tea (without milk or creamer), powdered or liquid water enhancers such as Crystal Light. Please try to drink as many fluids as possible while prepping to avoid dehydration. **If you cannot see through it, then it is not a clear liquid!**

Do not drink RED, BLUE, or PURPLE colored liquids or Jello/Gelatin

Do not drink any dairy products, nut milk, coffee creamers, opaque liquids or alcohol of any kind.

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Golytely/Colyte/Peg-based preps:

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

- ◆ At 5:30 pm- Take one ondansetron (Zofran) and one Simethicone tablet.
- ◆ At 6:00 pm- Start drinking your bowel prep. Drink one 8 oz glass of the prep solution every 5-10 minutes until the jug is half empty (usually about 8 glasses). If nausea develops while drinking the prep, you can take 1 additional anti-nausea tablet (Zofran).
- ◆ The next morning, 4.5 hours prior to your check in time, take one Zofran and one Simethicone tablet. Drink the second half of your bowel prep following the same process as the evening before.
- ◆ You may continue to drink clear liquids until 2 hours before your check-in time.
- ◆ **2 hours prior to check-in, do not take anything by mouth. Do not drink any fluids, chew gum, candies, mints, tobacco etc. This is for your safety.**
****If using a thickening agent, bowel prep needs to be finished 7 hours before your check-in time. ****

Patient safety is our top priority at MultiCare and we want to perform your procedure in the safest way possible. It is for your safety that you follow all the instructions outlined in this document. Failure to follow these instructions may result in the need to reschedule your procedure.

How to contact us

- If you have any questions or concerns about the bowel prepping process, please call the MultiCare Rockwood Digestive Health Clinic at 509.755.5220, option 2 Monday-Friday 8:00am-5:00pm.
- If you need to cancel or reschedule your procedure for any reason, please call the MultiCare Rockwood Digestive Health Clinic at 509.755.5220, option 2 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 option 2

Valley Hospital Endoscopy

12606 E Mission Ave
Spokane Valley, WA 99216

509.603.5423 option 2

If you develop cold/flu like symptoms, a cough, chest congestion, fever or test positive for Covid or Influenza prior to your procedure date, please call our office at 509-755-5220. Unfortunately, you may need to be rescheduled.