

(7,7:30,8,8:30 AM) Colonoscopy Instructions Miralax

PATIENT: _____

ARRIVAL TIME: _____

DATE: _____

PROCEDURE TIME: _____

Please read these instructions at least 1 week prior to your colonoscopy

- Following this schedule will prepare you for a safe experience. The cleaner the colon, the better the exam
- Please visit <http://www.acg.gi.org/media/colonoscopy> for a short informational video about colonoscopies

Five (5) days before your procedure

STOP:

1. Aspirin unless prescribed by a physician
2. NSAIDs including: Ibuprofen (Motrin, Advil), Naproxen (Aleve, Naprosyn), and similar medications
3. Fish oil and vitamin E
4. All seeds, nuts, popcorn, grapes, peas, onions, beans, tomatoes

OKAY/APPROVED:

1. Any regular medications (especially blood pressure and/or cardiac medications)
2. Acetaminophen (Tylenol)
3. Foods such as: meat (chicken, pork, beef), fish, tofu, white bread, white rice, noodles, yogurt, fruits and vegetables (remove skin and seeds), pasta, eggs, pancakes, cheese and dairy products

► **You will receive instructions guided by your cardiologist or primary care physician if you are taking:**

- Blood thinners such as: Warfarin (Coumadin), Heparin, Lovenox, Plavix, Aggrenox, Ticlid, Pradaxa, Xarelto
- Diabetes medications

► **Purchase an over the counter laxative called Miralax which will be used to clean your colon:**



- Purchase either the **30 dose (510g) bottle** or both the **14 (238g) and 7 dose (119g) bottle**
- Purchase A&D ointment, Desitin ointment or petroleum jelly to help prevent anal irritation during the bowel prep

One (1) day before your procedure

STOP (in addition to above):

1. Any solid food
2. Dairy products
3. Alcohol
4. Diuretics
 - Hydrochlorothiazide
 - Aldactone, Spironolactone
 - Triamterene, Amiloride
 - Lasix, Furosemide, Torsemide

OKAY/APPROVED:

1. Any regular medications, especially blood pressure and/or cardiac medications, and Tylenol
2. Water and clear liquids such as: **(NO RED/PURPLE)**
 - Juices:* apple, white grape, white cranberry, lemonade
 - Broth:* chicken, beef or vegetable
 - Soda:* 7-Up, Coke
 - Other:* Tea, popsicles, Jello, sports drinks such as Gatorade or Powerade

Make sure to drink clear liquids throughout the day to keep yourself well-hydrated.

► Transportation Reminders

1. You must arrive at Waverley Surgery Center at the **arrival time, which is one (1) hour before your scheduled procedure time**. Your entire stay will be between 2 to 3 hours.
2. **Arrange for a ride home for the day of your exam.** This person should be known to you and by law has to be at least 18 years of age. If you are disabled or anticipate difficulty with mobility in a semi-sedated state, it would be advantageous to have this person stay with you for a few hours after arriving home. **Taxis and trains are acceptable only if you are accompanied by an adult companion.** If needed, an acceptable transportation service is Older Adults Care Management (650)329-1411

DRINKING THE MIRALAX SOLUTION

► You will need to drink 14 doses of Miralax the day before and then an extra 2 doses of double strength Miralax at midnight.

- The 2 extra doses at midnight the night before your colonoscopy are **VERY IMPORTANT TO ENSURE ADEQUATE CLEANSING OF YOUR ENTIRE COLON.**

► Mix 1 capful of Miralax with 8 ounces of any warm or cold clear liquid and stir to dissolve the powder

- Take the first glass of Miralax between **1-5 pm** the afternoon prior to your colonoscopy.
- **DRINK 1 GLASS OF MIRALAX EVERY 15-20 MINUTES FOR A TOTAL OF 14 GLASSES.**
- If you get nauseated or vomit, then stop for 30 minutes and resume.
- Using warm liquids such as chicken/vegetable broth to use with the Miralax is helpful to prevent chills
- Drinking through a straw is also helpful
- Bowel movements can begin as soon as 60 minutes after the 1st glass or may take up to 4-6 hours to have 1st bowel movement.
- Apply petroleum jelly, Desitin or A&D ointment around the anus before starting the prep and after each bowel movement to minimize irritation from passing many bowel movements.
- Complete bowel cleansing can take between 6-10 hours to complete
- Feelings of bloating, nausea, abdominal cramping or chills are common. This should decrease over the course of the bowel preparation.
- If you feel like you need to have some protein, then drink a meal supplement such as Ensure Clear, Isopure or Resource Breeze. These can be purchased at a local supermarket or drug store.

► 12:00 AM the night before your colonoscopy

- **Mix 2 capfuls of Miralax with 8 ounces of any warm or cold clear liquid. This is a double strength dose. Make 2 of these extra strength doses for a total of 16 ounces. These 2 extra doses are very important to ensure adequate cleansing of your colon.**
- **Drink two 8 ounce glasses of double strength Miralax spaced 15 minutes apart**

THE DAY OF YOUR PROCEDURE

► 2 HOURS BEFORE YOUR PROCEDURE TIME:

- **No eating or drinking until after your procedure**

WHAT TO EXPECT PRIOR TO YOUR PROCEDURE

1. Prior to the procedure, a nurse will ask you questions to ensure that you understand the procedure and the reason for it, and to ensure that you prepared properly for it. Drs. Selling, Chan and Nguyen will also review the procedure with you.
2. The nurse will start an intravenous line to administer medications. The intravenous line is similar to having blood drawn. Your vital signs (blood pressure, heart rate, oxygen saturation) will be monitored closely before, during and after the procedure.
3. The colonoscopy will be performed while you are lying on your left side. Medications to help you relax (sedative) and narcotic (to help with discomfort) will be administered intravenously. Some people sleep during the examination, while others are very relaxed, comfortable and awake. This is NOT general anesthesia. This is CONSCIOUS SEDATION.

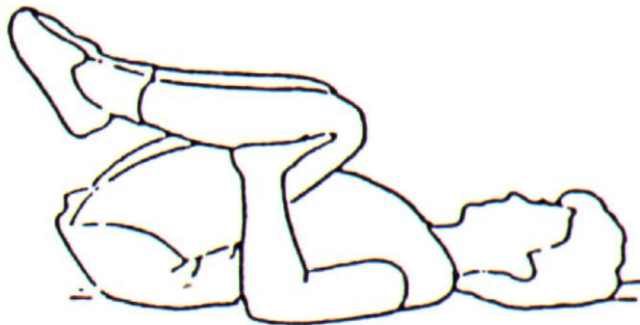
AFTER THE PROCEDURE

1. Rest for the remainder of the day for your health and safety!
2. Do not participate in any activities which require coordination or judgment including business, medical, financial and/or legal decisions. You may return to regular activities the day after the procedure.
- 3. You cannot drive until the following morning**
4. At the conclusion of your procedure, you will receive specific information about findings, post-procedure instructions and precautions
5. You may experience some bloating or distension after the procedure, though we attempt to remove as much air as possible during the procedure. Walking or lying on the left side can help to promote air passage as well as 2 different positions.

A) Sleeping baby position



B) Knees to chest position

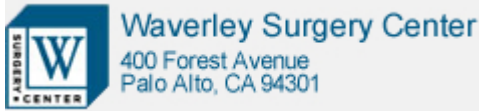


CANCELLING OR RESCHEDULING YOUR PROCEDURE

- Please call our scheduling line at (650) 498-6549

WAVERLEY SURGERY CENTER

- Your procedure will be performed at Waverley Ambulatory surgery center
- **Please arrive 1 hour before your scheduled procedure time. This time is allotted for pre-procedure check-in, review of your medical history and medications and placement of an intravenous line.**



Address

Waverley Surgery Center
400 Forest Avenue
Palo Alto, CA 94301

Phone: (650) 324-0600

Fax: (650) 289-1620

Directions

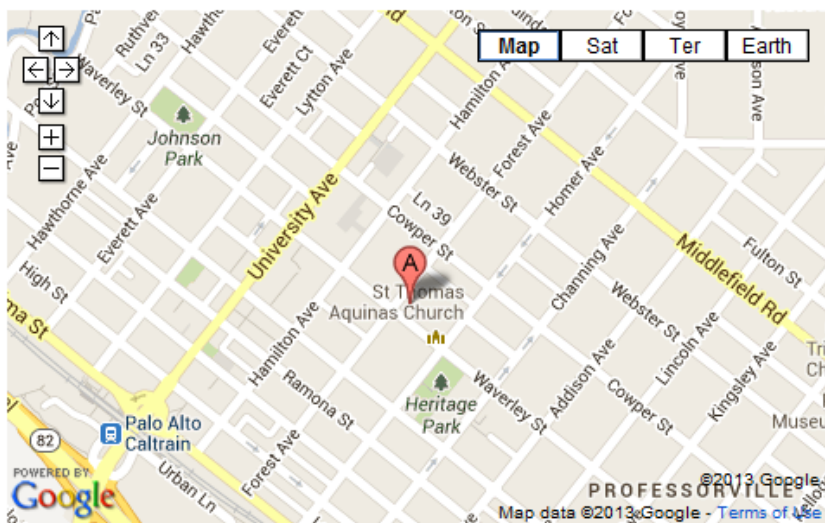
Directions from Highway 101

Take University Avenue exit west to Palo Alto; turn left on Waverley Street; the entrance to the valet parking lot will be on your left just after you cross Forest Avenue. If you reach Homer Avenue, you've gone too far.

Directions from Highway 280

Take Sand Hill Road exit east to El Camino Real; turn right on El Camino and exit to the right on University Avenue after the first traffic light; turn left on University Avenue and proceed in the right hand lane under the overpass and turn right on High Street; turn left at Forest Avenue (second street) and turn right on Waverley Street; the entrance to the parking lot will be on your left just after you turn onto Waverley Street.

Map



[View Larger Map](#)

Frequently Asked Questions about Colonoscopy

What is a colonoscopy?

A colonoscopy is a routine and commonly performed procedure, in which a highly trained doctor (called a gastroenterologist) will insert a colonoscope (a flexible tube containing a camera at the tip) into the rectum and colon (large intestine), to carefully inspect the colon. The scope is about the width of your finger, and the procedure is typically painless, as patients are sedated. A typical colonoscopy takes about 20-30 minutes.

Why is a colonoscopy recommended?

Your physician has recommended that you get a colonoscopy. The most common reason to have a colonoscopy is as a screening test for colon (and rectal) cancer. **Colorectal cancer is the third leading cause of cancer deaths in the United States; the average risk for developing colorectal cancer is about six percent.**

Colonoscopy is a safe, proven and effective means to detect colon cancer. Colonoscopy can also be useful for the evaluation of conditions, such as bleeding, abdominal pain, chronic diarrhea and anemia (low blood counts).

What is a polyp?

Polyps are abnormal growths of tissue that form on the lining of the colon. Polyps are almost always benign. While many benign polyps are harmless, others are considered “precancerous.” Precancerous polyps carry the potential to turn into cancer. They are generally slow growing, so a small precancerous polyp may take 10-15 years to turn into cancer. Approximately 30 percent of people over the age of 50 have precancerous polyps. Colonoscopy permits the early detection and removal of polyps. Because almost all colorectal cancers start as small polyps, the removal of these polyps at the time of colonoscopy is an effective means to prevent colorectal cancer. The removal of polyps (polypectomy) is a painless procedure.

What can I expect during a colonoscopy?

A colonoscopy is generally a well-tolerated procedure. Most patients are given a sedative and pain medication through an IV that is placed by the nurse before the procedure. Because of these medications, most patients do not experience pain or remember the procedure. You will typically lie on your left side during the procedure, although in some cases, you may be repositioned. Most colonoscopies last 20-30 minutes, and are followed by another 30 minutes in the recovery area. During a colonoscopy, your doctor is carefully inspecting the colon and may remove polyps (polypectomy) or take biopsies (which involves the painless removal of a small sample of the tissue lining).

What are the risks of complications of colonoscopy?

Colonoscopy is a safe and routine procedure, but like any procedure, it does carry some risks which are small and uncommon. The most serious complication is a perforation, or a tear of the wall of the colon. In some cases, this might require emergency surgery. Bleeding is another possible complication, which can occur at the site where a polyp is removed (or biopsied). Bleeding typically stops on its own, but may require further treatments (including blood transfusions).

Will I be sleeping during the procedure?

Patients receive a sedative (medication related to Valium) and a pain killer (medication related to morphine) during the procedure. This type of sedation is called “moderate sedation,” sometimes described as “twilight sleep.” Most patients are very comfortable and experience no pain, and have no memory of the procedure. Technically, patients are “conscious” during these procedures, are able to respond to questions, and can maintain their blood pressure and breathing at safe levels on their own. Some patients may wake up towards the end of the procedure. They may even watch the procedure on a monitor and remain completely comfortable. If needed, sedatives can be increased. This type of sedation is different from “general anesthesia,” which is a deeper level of sedation in which patients are “unconscious.” In these cases, an anesthesiologist is needed to help the patient to regulate their blood pressure and breathing. Any form of sedation does carry risks (of breathing and heart problems), but these risks are very low with moderate sedation.

What can I expect after a colonoscopy?

You will be monitored closely in the recovery area as the sedatives wear off. You may experience some cramping and bloating and you will be encouraged to pass flatus which will help you to feel better. Because sedatives may impair your judgment and coordination, you will be required to have someone drive you home and to stay with you for a short time after the procedure. Your doctor will give you specific instructions on whether you should take or avoid certain medications, depending on the findings of your colonoscopy. If your doctor took biopsies or removed polyps, you will be contacted separately with those results.

Do I have to drink ALL of the prep?

Yes, you need to finish all of the prep. National studies have demonstrated that the most effective way to cleanse the colon is to take the entire bowel preparation solution split into two separate doses. This will help ensure that the colon will be optimally cleaned and minimize the need to reschedule your procedure and help to ensure that small polyps can be detected.

Do I need to be at home for the prep?

It is best to be at home when you begin the prep; bowel movements can start very quickly after beginning the prep.

If I take a lot of medications, do I stop them all?

Please take all of your medications as prescribed by your other physicians, unless specifically instructed otherwise.

Can I have other fluids that are not “clear”?

The general rule is: if you can see through it, you can have it. You should stay well hydrated while drinking the prep, please feel free to have as much of the clear liquid diet the night before as is tolerable to you. If you feel like you need to have some protein, then drink a meal supplement such as Ensure Clear, Isopure or Resource Breeze. These can be purchased at a local supermarket or drug store.

What should I do for anal discomfort?

A & D ointment, Desitin and petroleum jelly can be applied to the affected area. Non-alcohol containing wipes (baby wipes, Wet Wipes) can be used for cleansing.

Why do I need a ride home and someone to stay with me after the procedure?

Medications commonly given during colonoscopy can temporarily impair judgment and coordination.

When can I return to work and normal activity?

You should be back to normal by the day following your procedure.