



GASTROENTEROLOGY SPECIALISTS, INC.

Date of Exam: _____
Check In Time: _____
Exam Time: _____
Provider: _____

Colonoscopy Miralax Prep

*** You must bring a driver who can remain in the office throughout your entire procedure.
If your driver is not present at your check-in time, your procedure will be rescheduled. ***

*** If you are taking any of the blood thinning medications listed below, you must have a blood thinner release signed by your prescribing physician ***

• **7 DAYS BEFORE THE EXAMINATION:**

-Stop Plavix (Clopidogrel), Aggrenox, Effient (prasugrel), and Brilinta (Ticagrelor).

• **5 DAYS BEFORE THE EXAMINATION:**

-Stop Coumadin (warfarin), anti-Inflammatories (NSAID's), and fish oil.

• **3 DAYS BEFORE EXAMINATION:**

-Stop iron and bulk laxatives (Metamucil, Effersyllium, etc.) and avoid foods that are high in fiber (whole wheat breads, nuts, seeds, breaded/fried foods, corn, peas, beans).

-Take 2 tablespoons of Milk of Magnesia in the morning and 2 tablespoons in the evening

- Last day to cancel or reschedule your appointment.

• **2 DAYS BEFORE EXAMINATION:**

-Stop blood thinners Eliquis, Pradaxa, and Xarelto

-Take 2 tablespoons of Milk of Magnesia in the morning and 2 tablespoons in the evening

• **1 DAY BEFORE EXAMINATION:**

-Upon awakening, Begin RESTRICTED LIQUID DIET only *

-2:00pm: Take **four (4) 5-mg. Dulcolax (bisacodyl)** laxative tablets (all at one time).

-3:00pm: Mix 8 ounce bottle of **Miralax (238 grams) in 64 ounces** (two quarts) of Crystal Light or Gatorade (no red or purple). Begin drinking the **Miralax mixture between 3-6 PM**. Try to drink an 8 ounce glass every 10-15 minutes. It is best to drink each glass quickly rather than sipping it. The entire prep should be consumed in 1-2 hours.

-Diabetic Patients: Take 1/2 dose of your PM insulin the day before your examination; do not take any insulin or diabetic medication by mouth the day of your procedure **UNLESS** your blood sugar is higher than 300g/dL. If this occurs, take insulin according to your sliding scale.

• **DAY OF EXAM:**

-NOTHING BY MOUTH AFTER MIDNIGHT including water, coffee, cigarettes, or chewing tobacco.

-You may brush your teeth.

-You may take your other medications with a small sip of water as directed by your physician.

-High Blood Pressure Patients: Take your morning dosage of blood pressure medication.

-Females: A urine sample will be required prior to anesthesia/procedure unless one of the following applies: Hysterectomy; Uterine Ablation without menstruation for greater than one year; or Menopause without menstruation for greater than one year.



***RESTRICTED LIQUID DIET: (NO red or purple!) (NO solid foods, dairy products, alcohol!)**

Approved clear liquids:

-Soda

-Sports drinks

-Clear broth or bouillon

-Water

-Black coffee

-Popsicles

-Plain jello

-White grape or apple juice



John R. Hood, M.D.
Michael J. Martin, M.D.
William K. Briggs, M.D.
Jeffrey L. Bigler, M.D.

Sheldon C. Berger, D.O.
David W. Morris, D.O.
Roy L. Thompson, M.D.
Geoffrey A. Fillmore, D.O.

10210 East 91st Street
Tulsa, OK 74133

230 SE Howard Ave
Bartlesville, OK 74006

918-940-8500
918-940-8399 Fax

Home Care Instructions for Sedation Procedures

During your procedure you will be given medication that may affect your memory of the day's events. Other normal side effects of the medicine may include confusion, irritability, drowsiness or a drunken-like state. Resting at home is the best way to recover.

Your speech, posture, hand control and ability to work may be affected for 24 hours.
A responsible person needs to drive you home after the procedure, and someone should stay with you for your safety until the effects of the medication have subsided.
Do not make any important decisions or sign important documents for 24 hours.
Do not drive or operate any machinery for 24 hours.

IF THIS ARRANGEMENT HAS NOT BEEN MADE, YOUR PROCEDURE WILL BE CANCELLED.

After your procedure, resume your usual diet unless instructed otherwise by your physician.
Do not drink alcoholic beverages for 24 hours.

If you take blood thinning medication you should ask your physician when it is safe to resume.

If you take prescription medicines on a regular basis, ask your physician which ones you should take after your procedure.
Do not take any muscle relaxants, sedatives, hypnotics or mood altering medicines for 24 hours unless ordered by your physician.
If you have pain, you may take over the counter medicines such as Tylenol.

Call Your physician for any questions or if you notice any of the following:

**Blue skin color
Unable to arouse
Bleeding**

**Difficulty breathing
Pain not relieved by medicine
Fever or chills**

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What is the Difference Between Screening and Diagnostic Colonoscopy?

Before you have your colonoscopy, it is important to call your insurance company about your benefits. There are two types of colonoscopies: screening and diagnostic. Most insurance companies will cover screening colonoscopies, but most diagnostic colonoscopies will be subject to deductibles and co-insurance.

Insurance providers have very specific criteria for both types of colonoscopies, so it is advantageous for you to call your insurance provider to inquire about your benefits and out-of-pocket estimates for your screening or diagnostic colonoscopy. Here are some factors that influence whether your procedure will be billed to your insurance company as a screening colonoscopy or a diagnostic colonoscopy:

Screening Colonoscopy Criteria:

- No family history of colon cancer or colon polyps (some insurance providers consider this high risk for colon cancer)
- No personal history of colon cancer or polyps
- No symptoms before the procedure (abdominal cramping, blood in the stool, weight loss, anemia, vomiting, diarrhea, etc.)
- Most insurance providers will only cover a colonoscopy as a screening once every 10 years

Diagnostic Colonoscopy Criteria:

- Family history of colon cancer or polyps (some insurance providers consider this high risk for colon cancer)
- Personal history of colon cancer or polyps
- Symptoms are present before the procedure (abdominal cramping, blood in the stool, weight loss, anemia, vomiting, diarrhea, etc.)
- Previous colonoscopy(ies) had findings of polyps, colon cancer, diverticulitis, etc.)

YOUR SCREENING COULD CONVERT TO A DIAGNOSTIC.

This may mean your insurance will process the claim differently. Please contact your insurance to find out. When you are on the phone with your insurance company, you should also verify that your preferred gastroenterologist and facility are both in-network to keep the cost down. It is important to remember that these are just guidelines, and benefits may vary. Get the facts before you go in for your colonoscopy. Asking the right questions will help you be prepared and confident on the day of your procedure.

If you have any questions, please call us at (918) 940-8500, Option 4 for Billing