



## GASTROENTEROLOGY SPECIALISTS, INC.

Date of Exam: \_\_\_\_\_  
Check In Time: \_\_\_\_\_  
Exam Time: \_\_\_\_\_  
Provider: \_\_\_\_\_

### Colonoscopy GoLytely/GaviLyte 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 \***

**Follow instructions listed below. DO NOT follow the instructions on the box provided by the pharmacy.**

- **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).
  - Last day to cancel or reschedule your appointment.
- **2 DAYS BEFORE EXAMINATION:**
  - Stop blood thinners Eliquis, Pradaxa, and Xarelto
- **1 DAY BEFORE EXAMINATION:**
  - Upon awakening, Begin **RESTRICTED LIQUID DIET** only \*
  - 1:00pm:** Begin drinking the colon preparation (mixed with Crystal Lite Lemonade powder if desired) as follows: One 8 ounce glass every 30 minutes or one 4 ounce glass every 15 minutes until the entire contents have been consumed. If your stomach becomes too full to hold more solution, stop drinking the solution for 30 minutes and begin again as before.
  - 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 BloodPressure Patients:** Take your morning dosage of blood pressure medication.
- Females:** A urine sample will be required prior to anestheisa/procedure unless one of the following applies:Hysterectomy; Uterine Ablation without menstruation for greater than one year; or Menopause withoutmenstruation for greater than one year.

<b>*RESTRICTED LIQUID DIET:</b> (NO red or purple!) (NO solid foods, dairy products, alcohol!)	
<b>Approved clear liquids:</b>	
-Soda	-Black coffee
-Sports drinks	-Popsicles
-Clear broth or bouillon	-Plain jello
-Water	-White grape or apple juice



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## **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**

**[www.gsitulsa.com](http://www.gsitulsa.com)**



## **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