

PATIENT INSTRUCTIONS

Thank you for choosing us for your care. PLEASE READ THESE INSTRUCTIONS AT
LEAST **ONE WEEK PRIOR** TO YOUR PROCEDURE.

➤ You are scheduled for _____ on _____ (date).

➤ Procedure Check-In Time: _____ Procedure time: _____

If you need to cancel your procedure, we ask that you please be courteous regarding your appointment and give at least a one-week notice, so please contact 714-446-5831

- Knott Family Endoscopy Center
1839 Sunnycrest Drive
Fullerton, CA 92835
- GI Lab @ St. Jude Medical Center
101 E. Valencia Mesa Drive
Fullerton, CA 92835

PRE-PROCEDURE CHECKLIST

TRANSPORTATION

- Your driver must be a responsible adult (18+) and stay with you for 4 hours post procedure at home. **On the day of your procedure, your driver must check in with you and provide a valid working phone number.** This is to ensure proper communication with the doctor and the nurse when the procedure is complete, and you are ready to be picked up. The wait time for your driver may be up to 3 hours, and we ask that they remain 15 minutes from the facility.
- **Arranging transportation is necessary, we will not perform your procedure if you have driven yourself or have not arranged a ride home. If needed, a list of concierge transportation services can be provided upon request.** If you plan to take a taxi/Lyft/Uber, you must still be **accompanied** by a responsible adult to/from the facility and arrange for after-care at home.

PRE-PROCEDURE BILLING

- To inquire about your estimate for your procedure, please contact our pre-services department M-F 8am-5pm excluding holidays at **844-617-7547, option 1. If you have a change in insurance prior to your scheduled procedure, then please notify us at 714-446-5831. We may need to submit a new authorization which may result in rescheduling your procedure.**

PRE-PROCEDURE SCREENING

- An important step in preparing you for your procedures is the pre-procedure screening. A registered nurse will call you 1-3 days prior to your procedure between 8am and 4pm. They will review pre-procedure instructions, what to expect during your recovery, and any concern regarding your comfort post procedure. This call is about 30 minutes and is very important, so please take the time to complete the call. If you have not received our call the day before your procedure, please do not hesitate to contact them at 714-992-3000 x7250 (Monday through Friday, excluding holidays).

MEDICATIONS

- Take your **blood pressure or heart medications** the morning of the procedure with only a sip of water.
- If you are currently taking **BLOOD THINNERS** (Plavix, Coumadin, Warfarin, Xarelto, Pradaxa, Eliquis, Effient, Aggrenox, Clopidogrel), please make sure you receive instructions from our office on when to stop. You may take Tylenol and Aspirin.
 - Hold _____ **for _____ days.** Do not assume that you can safely stop this medicine without consulting your doctor.
- If you are currently taking an **Anti-inflammatory/ NSAIDs** (Advil, Aleve, Ibuprofen, Motrin, Excedrin, or others) that are not prescribed by your physician, please stop taking this medicine **6 days before** your procedure. If this medicine is prescribed, you will need to contact your prescribing Doctor to obtain recommendations on holding these medicines.
- If you are **DIABETIC**, and take oral diabetic medicine, please do not take oral diabetic medicines the day before or the day of your procedure. **Do not take non-insulin injectable medicines on the day of your procedure.** If you are taking insulin, please contact the Doctor who prescribed your insulin for pre-procedure instructions.

COLONOSCOPY PREPARATION INSTRUCTIONS

To allow the doctor to have a clear view of your colon, it must be free of stool. **IT IS VERY IMPORTANT YOU READ ALL THE DIRECTIONS. CALL YOUR DOCTOR'S OFFICE AT 714-446-5831 IF YOU HAVE ANY QUESTIONS OR ARE UNABLE TO COMPLETE YOUR PREPARATION.**

❑ SHOPPING LIST OF ITEMS NEEDED FOR COLONOSCOPY

The attached list shows items that are found over the counter/at a pharmacy. *If you have any questions finding the laxative or MiraLAX, ask the pharmacist for assistance.*

The day BEFORE your procedure, DO NOT EAT ALL DAY; ONLY DRINK CLEAR LIQUIDS (at least 8 ounces every waking hour) to avoid dehydration.

Q: What are clear liquids?

A: **(NO RED, ORANGE or PURPLE)**
Beverages: Sprite, 7-Up, Black coffee or tea (no cream/dairy)

Gatorade, Sport drinks with electrolytes,

Soda (Sprite, 7-Up, Root beer, Colas are fine, including diet soda)

Clear fruit juices: Apple and white grape juice

clear soups: Chicken/ beef broth

Desserts: Popsicles, Jell-O, hard candy

Do not drink alcohol

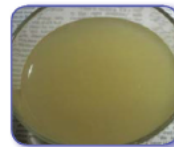
No whole nuts, seeds, whole grain or popcorn 3 days prior to the procedure.

Q: I want to have a good colon exam. When am I ready for the procedure?

As you get ready for your colonoscopy, you must only drink clear liquids. A liquid is considered "clear" if you can read something through it. Use this simple test to figure out what you can drink, and what you cannot drink.



This is orange juice. Orange juice is not clear because you can't read the newspaper through it. **Don't drink this.**



This is pineapple juice. It's also not clear. **Don't drink this.**



This is apple juice. Apple juice is clear because you can read newspaper print through it. **You can drink this.**



Dark and murky.
NOT OK

Brown and murky.
NOT OK

Dark orange and semi-clear.
NOT OK

Light orange and mostly clear.
ALMOST THERE!

Yellow and clear, like urine.
YOU'RE READY!

A: You are ready if your stool looks yellow and clear like urine. If, after completing our preparation, your stool looks like the first jar pictured at right, please notify your physician prior to coming to the center.

DAY BEFORE YOUR PROCEDURE (Date: _____)
YOU CANNOT EAT ANY SOLID FOODS TODAY; ONLY DRINK CLEAR LIQUIDS (at least 8 ounces every waking hour) to avoid dehydration.

- ✓ **At 3:00 pm**, you must take 2 laxatives **Dulcolax** (5 mg pill each) with 8 ounces of clear liquids.
- ✓ **At 4:00 pm**, mix 8 capfuls of **MiraLax** with one 28 ounce bottle of water or Gatorade drink. Drink this mixture 8-10 ounces at a time, every 10-15 minutes so that you **finish within one hour**. Once complete, take 1 **Gas-X**.
- ✓ **At 7:00 pm**, mix 8 capfuls of **MiraLax** with one 28 ounce bottle of water or Gatorade drink. Drink this mixture 8-10 ounces at a time, every 10-15 minutes so that you **finish within one hour**. Once complete, take 1 **Gas-X**.

ON THE DAY OF YOUR PROCEDURE (Time: _____)

- ✓ Mix 8 capfuls of **MiraLax** with one 28 ounce bottle of water or Gatorade drink. Drink this mixture 8-10 ounces at a time, every 10-15 minutes so that you **finish within one hour**. Once complete, take 1 **Gas-X**.
- ✓ **No more liquids after this!**
- It is recommended that you protect the skin in the anal area with Vaseline or vitamin A & D ointment to prevent irritation during bowel preparation.
- If you have a pacemaker or implanted defibrillator, please bring your information card.**
- Please leave all jewelry at home, including your wedding ring.**
- Please bring a photo ID and your insurance card. Patients are responsible to pay for all known co-pays at the time of service.**
- Female patients age 55 and under may be asked to provide a urine specimen to test for pregnancy the day of the procedure. Upon arrival, please do not use the restroom until you have checked in with a nurse.