

Patient Instructions for Colonoscopy and Upper GI Endoscopy

This handout will help you get ready for your procedures. It has information about:

- Where to go for your procedures
- What are the procedures and why are they done
- Preparing ahead of time for your procedures
- Bowel preparation instructions
- Medication and diet instructions before your procedures
- What to expect during your procedures

WHERE TO GO FOR YOUR COLONOSCOPY/UPPER ENDOSCOPY

UVM Medical Center
111 Colchester Ave
Endoscopy Outpatient Clinic
West Pavilion, Level 4
Burlington, VT 05401

Check in at registration first: Level 3, Main Lobby

WHAT IS A COLONOSCOPY?

A colonoscopy is an examination of the colon (large intestine) using a specialized video camera called an endoscope. This instrument is inserted into the rectum and advanced up into your large intestine until it meets the small intestine. It shows images of the lining of the large intestine. Tissue samples (biopsies) may be taken during the test.

This test can help diagnose and potentially treat:

- Early signs of cancer in the colon and rectum, specifically remove these abnormal growths called polyps
- Causes of unexplained changes in bowel habits
- Causes of inflamed tissue, abnormal growths, ulcers and bleeding

WHAT IS AN UPPER ENDOSCOPY?

Also known as: Esophagogastroduodenoscopy; EGD, Gastroscopy. An upper GI endoscopy is an examination of the upper gastrointestinal (GI) tract using a specialized video camera called an endoscope. This instrument is inserted down the throat and shows images of the lining of the esophagus, stomach and upper duodenum.

This test can help diagnose and potentially treat:

- The cause of upper GI (gastrointestinal) bleeding
- The cause of swallowing difficulties
- The removal of foreign objects
- The presence of tumors or other abnormalities of the upper GI tract
- Inflammation, narrowing, or tumors of the esophagus
- Acid reflux, gastroesophageal reflux disease (GERD)



PREPARING AHEAD OF TIME FOR YOUR PROCEDURES

7 Days Before Your Procedure

- Stop eating foods with seeds and nuts (corn, multigrain breads, chia seeds, quinoa, raspberries, blackberries, popcorn)
- Stop taking iron pills
- You may continue to take aspirin
- If you are diabetic, please call your primary care provider and ask how you should manage your diabetes medications
- If you take blood thinners, call the prescribing doctor and ask what you should do. These medications include: Warfarin (Coumadin), Rivaroxaban (Xarelto), Apixabin (Elequis), Dabigatran (Pradaxa), Edoxabon (Savaysa), Dipyridamole (Aggrenox), Clopidogrel (Plavix), Prasugrel (Effient), Ticagrelot (Brillinta), Heparin, Enoxaparin (Lovenox), Fondaparinux (Arixtra). **Do not stop taking your blood thinning medicine without first talking to the doctor who prescribes this medicine.**
- If you take a MAOI (Rasagiline, Selegiline, Phenelzine, Tranylcypromine) call our office at (802) 847-8865.
- You may continue taking any acid suppressing medications. These medications include: Omeprazole (Prilosec), Pantoprazol (Protonix), Esomeprazole (Nexium), Lanoprazole (Prevacid), Rabeprazole (Aciphex), Famotidine (Pepcid), and Ranitidine (Zantac).

3 Days Before Your Procedure

- Pick up your prescription bowel prep called Golytely. When your doctor requested this test, the prescription should have been automatically sent to your preferred pharmacy.
- Find someone to come with you to your appointment. You may **not** drive home alone or take a bus, cab or Uber.

1 Day Before Your Procedure

- Do not eat any solid food; no breakfast, lunch or dinner.
- Stop any antacids: TUMS, Roloids, milk of magnesia, sucralfate, Carafate, or any stomach coating products.
- Start a clear liquid diet as soon as you wake up in the morning. You may drink: apple juice, white grape juice, Kool-Aid, sports drinks, water, tea, clear soda, clear chicken or beef broth, popsicles, hard candy, Jell-O. Please avoid any liquids that are red or purple. You may **not** have coffee, milk, yogurt, ice cream, dark colored soda, chocolate or alcohol.
- **At 3 pm**, mix the Golytely powder with 1 gallon of water, shake to dissolve and then refrigerate. Please follow our instructions and not those which come with the bottle. Mix the powder only with water; do not use juice, soda or any other liquid. You may add approved flavor packs that come with the Golytely or Crystal Light lemonade packets.
- **At 6 pm**, start drinking the Golytely. Drink an 8oz glass every 15 minutes, drink a total of eight glasses until half the gallon is finished. This medication is designed to cause diarrhea and may also cause nausea, bloating and cramping.

THE DAY OF YOUR PROCEDURES

- Do not eat, suck on hard candy or chew gum.
- Drink only clear liquids and/or prep solution.
- You may take your morning medications with small sips of water.
- **5 hours** before your exam: begin drinking the remaining portion of your Golytely solution (8oz every 15 minutes). The goal is to make your stool a clear liquid, similar to the consistency and color of urine.
- Drink **all** of the Golytely solution, even if your output is clear. If after you complete the prep your stool is not clear liquid or the color of urine, please call the GI office at (802) 847-8865.
- **Do not drink anything else after this.** After you finish the bowel prep, no food or drink is permitted until after your procedure. Failure to observe this rule will result in cancellation of the procedure.
- **If you do not follow these instructions, your colon may not be cleaned out well enough for your doctor to clearly see the inside of your colon. Your colonoscopy may then need to be rescheduled.**
- Leave all jewelry and valuables at home.

- Arrive at least one hour before your procedure time and check in at registration on the third floor. You should check in at registration even if you have received a pre-screen call from the endoscopy office.
- After registration, come up to the fourth floor Endoscopy Outpatient Clinic.

THE COLONOSCOPY PROCEDURE

- You will have a short interview. Please tell the nurse of any drug allergies, medications you take and health problems. Please bring a list of your medications if needed.
- You will change into a hospital gown.
- An intravenous (IV) line will be inserted into a vein in your arm. The IV will allow you to receive medications and fluids for the procedure.
- After you arrive in the procedure room, you will be asked to lie on your left side.
- During the exam, you will receive medication through the IV, a combination of a sedative (relaxing) and a narcotic (pain reliever).
- The physician will insert the endoscope into your rectum and slowly guide it through your colon. The physician will carefully examine the lining of the colon. The scope bends, enabling the physician to move it around the curves of your colon.
- You may be asked to change position occasionally to help the doctor move the scope through your colon.
- The scope also blows air into your colon, which inflates the colon and helps the doctor see the walls of the colon. You may feel some mild cramping during the procedure. This is normal. You may communicate with your nurse and physician if you are uncomfortable.
- The colonoscopy takes 15-60 minutes.
- The entire process, from the time you arrive to when you leave, is estimated to take two hours.

THE UPPER ENDOSCOPY PROCEDURE

After your arrival in the procedure room, you will:

- Be asked to remove dentures
- Be asked to swallow a special lidocaine gel that will numb your throat. This medication will help suppress the need to cough or gag when the endoscope is inserted.
- Receive medications through the IV, a combination of a sedative (relaxing) and narcotic (pain reliever)
- Be given a mouth guard to protect your teeth and the endoscope
- Be instructed to lie on your left side
- The endoscope will be advanced through the esophagus to the stomach and duodenum (the first part of the small intestine. The endoscope will NOT affect your breathing.
- Air will be introduced through the endoscope to enhance viewing. This may make you burp.
- The exam typically lasts about 5 minutes, depending on examination findings
- After the test is completed, food and liquids will be restricted until your gag reflex returns.

RISKS OF THE PROCEDURES

Bleeding and puncture of the colon (perforation) are possible complications of colonoscopy. Bleeding and perforation (hole) of the stomach, duodenum, esophagus, or at the biopsy site are possible complications of an upper endoscopy. Some patients may have a reaction to the sedatives. However, such complications are uncommon.

AFTER THE PROCEDURES

- You will remain with us for 30-45 minutes after the procedure.
- *You will **not** be permitted to drive yourself home* due to the sedative effects of the medications. Taxi, Uber and bus are not permitted. Your driver must park and pick you up from the Endoscopy Clinic. *You are not permitted to walk unaccompanied* to meet your ride in front of the hospital.
- Report severe abdominal pain, fever, chills, pain, black stools, bloody vomit or rectal bleeding to (802) 847-8865.
- If biopsies are taken, results will be mailed to you within a 2-3 week period.

FREQUENTLY ASKED QUESTIONS

I'm nauseated, what do I do?

Many people will have nausea and even vomit while prepping for the colonoscopy due to the poor taste of the Golytely and/or the large volume required to clean the bowels. The taste can be improved by adding the accompanying flavor packets or mixing the prep with Crystal Light Lemonade flavoring only. The volume of the preparation cannot be reduced. If you do have severe nausea or vomit, do not drink any prep for approximately 30 minutes, then resume at the usual rate. Oftentimes this will provide enough time for the stomach to empty and permit you to finish. Keep at it. It's tough, but you can do it.

Output is clear, can I stop?

No! The intestines are greater than 25 feet long. We are attempting to clean out the colon, which means it is necessary to flush out everything above the colon (stomach and small intestine). It is common to have material in the lower intestine or colon flush through initially and hours later the material from the upper intestine is cleared. In addition, as you sleep, material accumulates, cells slough off the surface and thick mucus is produced which needs to be cleared in the morning to ensure an adequate prep. **If the colon is not completely cleaned, the procedure may be cancelled and rescheduled**, so it's important to take the entire prep.

Nothing is coming out, what now?

Keep going. In some people, the action of the prep can be delayed, even for several hours. Please keep drinking. Eventually the preparation will work and diarrhea will occur.

What should I do if I am menstruating?

You can still have your colonoscopy. If possible, wear a tampon to the procedure and make sure to let the nurse know that you are menstruating.

What tips will make the bowel prep easier?

- Keep the prep refrigerated.
- Use a straw to drink to avoid the taste of the prep as much as possible.
- Mix the prep with approved flavor packet.
- Eat a popsicle prior to beginning bowel prep.
- Take a sip of clear soda after each glass of prep to get rid of the taste.

Questions? Call (802) 847-8865 or visit [UVMHealth.org/MedCenterColoPrep](https://www.uvmhealth.org/medcentercoloprep) for more information.