



Vipin Gupta, MD
Mayuri Gupta, MD
Board Certified in Gastroenterology and Hepatology

INSTRUCTIONS FOR COLONOSCOPY

Patient Name: _____

Procedure Date: _____ Estimate Arrival Time: _____

North Broward Medical Center
(954) 941-8300
201 East Sample Rd
Pompano Beach, FL

Northwest Medical Center
(954) 974-0400
2801 N State Rd 7
Margate, FL 33063

Surgery Center at Coral Springs
(954) 509-1367
967 North University Drive
Coral Springs, FL 33071

Boca Outpatient Surgical Center
(561) 362-4400
501 Glades Road
Boca Raton, FL 33432

Coral Springs Medical Center
(954) 344-3000
3000 NW 96th Ave
Coral Springs, FL 33065

Broward General Medical Center
(954) 355-4400
1600 S Andrews Ave
Fort Lauderdale, FL 33316

Follow up Appointment: Date: _____ Time: _____

Coral Springs office Lighthouse Point Office

5340 N Federal hwy., suite 110
Lighthouse Point, Florida 33064
Phone: 954-428-2480
Fax: 954-428-2904

1500 N University Drive Ste 100
Coral Springs, Florida 33071
Phone: 954-428-2480
Fax: 954-757-4003

CHECK LIST

Please contact our office immediately if you have any questions or concerns about the procedure.

Please answer the following questions:

- Do you have your colonoscopy preparation medications?
 - Yes, only mixed it the day of the preparation.
 - No, please call your pharmacy then our office. Dulcolax is over the counter medication, if your insurance does not cover it, please pick it up over the counter.
- Do you understand how to do the preparation for colonoscopy?
 - Yes, please proceed accordingly.
 - No, please call our office and we will be able to go over it with you.
- Do you take any medication in the morning?
 - Yes, please ask our procedure coordinator which medication to hold and which one to take the morning of the procedure.
 - No, please start your preparation as instructed.
- Are you on Blood thinner?
 - Yes, please let us know immediately before your procedure. Approval must be obtained prior to stop taking the medication.
 - No, please start your preparation as instructed.
- Marijuana use?
 - Yes, please do not use it the day of the procedure.
 - No, please start your preparation as instructed.
- Are you taking Ozempic, Wegovy, Mounjaro, Rybelsus and or other Glucagon like peptide-1
 - Yes, please let us know immediately before your procedure. Approval must be obtained prior to stopping taking the medication.
 - No, please start your preparation as instructed.

******Preparation Day (the day before your colonoscopy) ******

(More detail of the preparation is in this package)

➤ Colonoscopy Preparation Outline (if your procedure is in the AM)

- **NO SOLID FOOD**
- **STAY ON CLEAR LIQUID DIET**
- Avoid any red or purple products.
- At 1:00 pm, take 2 tablets of Dulcolax
- At 3:00 pm, take 2 more tablets of Dulcolax
- At 3:05 pm, take $\frac{1}{2}$ gallon of Golytely or similar preparation. Drink it slowly 8 oz throughout 10-15 minutes.
- At 9:00 pm, take $\frac{1}{2}$ gallon of Golytely or similar preparation. Drink it slowly 8 oz throughout 10-15 minutes.
- Nothing to eat or drink after midnight.

➤ Colonoscopy Preparation Outline (if your procedure is in the PM):

- **NO SOLID FOOD**
- **STAY ON CLEAR LIQUID DIET**
- Avoid any red or purple products.
- At 6:00 pm, take 2 tablet of Dulcolax
- At 8:00 pm, take 2 more tablet of Dulcolax
- At 8:05 pm, take $\frac{1}{2}$ gallon of Golytely or similar preparation. Drink it slowly 8 oz throughout 10-15 minutes.
- At 6:00 am (morning of the procedure), take $\frac{1}{2}$ gallon of Golytely or similar preparation. Drink it slowly 8 oz throughout 10-15 minutes.
- Nothing to eat or drink after 8:00 am

Suprep Preparation Outline (most of insurance does not cover this medication)

- **NO SOLID FOOD**
- **STAY ON CLEAR LIQUID DIET**
- At 6 PM on the evening before your colonoscopy and at 2:00 am of your colonoscopy date
 - Pour ONE 6-ounce bottle of SUPREP® liquid into the mixing container.
 - Add cool water to the 16 oz. line on the container and mix.
 - Drink ALL the liquid in the container.
 - Drink two more 16-ounce glasses of water over the next hour (one hour).
 - You may continue to drink clear liquids until midnight.
 - Nothing to drink minimal 4 hours before the procedure

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COLONOSCOPY PREPARATION

Preparation: You will be undergoing a colonoscopy. A colonoscopy is a test to look at the lining of your large intestine/colon using a flexible tube to check for abnormal areas, including cancer. You will be given IV (intravenous) anesthesia for this procedure.

Five to Seven Days before your Colonoscopy

- **DO NOT** take any aspirin, products containing aspirin, non-steroidal anti-inflammatories/NSAIDS (e.g., Aleve, Motrin, ibuprofen, naproxen), COX-2 Inhibitors (e.g., Celebrex), Pentoxyfylline (Trental), Nabumetone (Relafen)
- **DO NOT** take iron supplements, vitamins or herbal supplements
- **DO NOT** take blood thinners, such as clopidogrel (Plavix), dipyridamole (Aggrenox, Persantine), or warfarin (Coumadin). If you cannot stop taking these medications, please discuss this with your provider.

Note: Acetaminophen products (e.g. Tylenol) are safe to use before your procedure.

Arrange for transportation as you will not be allowed to drive after the procedure.

Day before your Colonoscopy

- The entire day before your colonoscopy, no solid foods and stay close to a bathroom facility.
- You must follow a clear liquid diet (e.g. water, plain coffee, tea, gelatin, apple juice, white grape juice, chicken broth, beef broth, Gatorade.)
- You must **AVOID** any red or purple products
- Take 2 tablets of Dulcolax at 1:00 pm and another 2 tablets at 3:00pm then begin drinking the first half of solution starting at 3:00pm and the other half 9:00pm. Drink 8 ounces of solution throughout 10-15 minutes until you finish the entire bottle.
- You may use a small amount of lemon juice or small amount of Crystal Light to flavor the solution if needed. You may suck on lemon slices as well.
- Refrigerate or chill the solution to make it easier to swallow. Sometimes drinking the solution through a straw is helpful.
- Do **NOT** eat or drink after midnight (minimum of 8 hours before your procedure)
- You will know you have done a good job completing your prep solution once your stools are clear and watery. The stool should not be muddy or thick.



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- You may experience some bloating, cramping, nausea, diarrhea, and/or vomiting. This is usually temporary and the symptoms will gradually improve. You may feel weak, especially if you have not taken enough fluid with the prep solution and can be remedied by increasing your fluid intake.
- Wet aloe wipes and a zinc oxide-based ointment may relieve any soreness related to stool evacuation.
- No alcohol

Day of your Colonoscopy

- Do **NOT** eat or drink anything. If you must take your medication, you may take it with a few small sips of water.
- You may brush your teeth.
- No blood thinner (please speak to our procedure about this if you are currently on any)
- If you are **DIABETIC**, do not take your medication the morning of the procedure. If you must take your medication, take only half of your regular dose. Continue to check your blood sugars as you normally do.
- Please arrive at the facility on time.
- No alcohol
- No Marijuana
- You should not wear jewelry to the procedure.
- You will not be allowed to drive home. You may have a relative or friend drive you home. You may also go home in a taxi or by bus and must be accompanied at all times even upon arrival home.

Please ensure you have a follow-up appointment to discuss the test results with our provider. Feel free to call our office with any questions or concerns. Good Luck!

A minimum of 48 hours notice is required for cancellations for procedures and office appointments.

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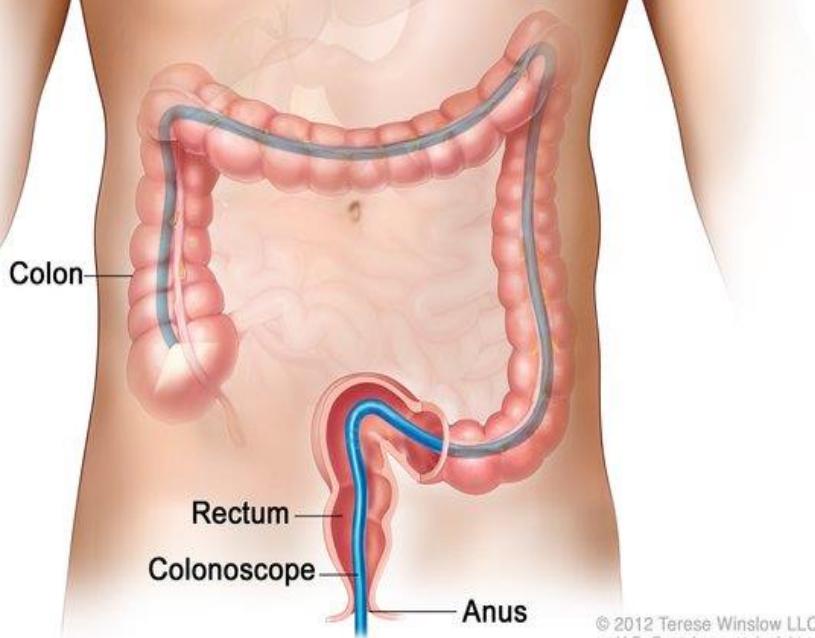
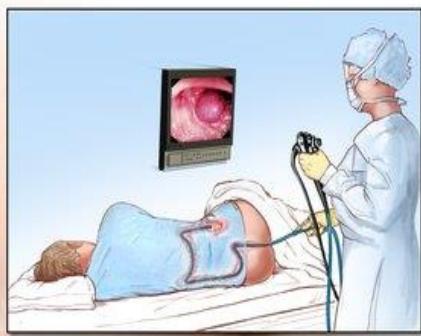
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What is colonoscopy?

Colonoscopy is a procedure a doctor uses to look at the inside of the colon and rectum with a **colonoscope**, which is a long, flexible tube about the width of a finger with a light and small video camera on the end. It's put in through the anus and into the rectum and colon. Special instruments can be passed through the colonoscope to biopsy (sample) or remove any suspicious-looking areas such as polyps, if needed.

(Note: This test is different from a virtual colonoscopy (also known as *CT colonography*), which is a type of [CT scan](#).)

Colonoscopy



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Why do you need a colonoscopy?

There are a few reasons you might need a colonoscopy:

To check for polyps or cancer in the colon and rectum

This test can be used to [screen for colorectal cancer](#). Screening is looking for cancer in people who don't have symptoms. If abnormal areas are seen during the colonoscopy, they can be removed (biopsied) and tested for cancer. This is done by passing long, thin instruments down the colonoscope, such as small forceps (tweezers) to collect the samples. A screening colonoscopy can also prevent some colorectal cancers, by finding and removing polyps (growths on the inner lining) before they turn into cancer.

If you have had colon or rectal cancer, colonoscopy can also be used to look for new tumors.

Because you are having problems in the colon or rectum

Colonoscopy can also be used to look for the causes of [signs or symptoms that might be from colon or rectal cancer](#) (such as changes in bowel movements, bleeding from the rectum, or unexplained weight loss).

You have a problem in the colon or rectum that needs treatment

Colonoscopy can be used to treat some problems in the colon or rectum. For example, instruments can be passed down a colonoscope to remove polyps or other small tumors (growths) in the colon or rectum.

For some advanced cancers that can't be removed (because they are too big or have spread), a colonoscope can be used to place a rigid tube called a **stent** into part of the colon or rectum to help keep it open.

What's it like to have a colonoscopy?

This is a general outline of what typically happens before, during, and after a colonoscopy. But your experience might be a little different, depending on why you're having it, where you're having it done, and your overall health. **Be sure to talk to your health care provider before having this test so you understand what to expect and ask questions if there's anything you're not sure about.**

Before the test

Be sure your health care provider knows about any medicines you are taking, including vitamins, herbs, and supplements, as well as if you have allergies to any medicines (including any type of anesthesia).

You may be asked to stop taking blood-thinning medicines (including aspirin) or some other medicines for several days before the test.

The colon and rectum must be empty and clean so your doctor can see the entire inner lining during the test. You might hear this referred to as a "bowel prep." There are different ways to do this, including pills, fluids, and enemas (or combinations of these). For example, you might need to drink large amounts of a liquid laxative solution the evening before the procedure. This can often result in spending a lot of time in the bathroom. Because the process of cleaning out the colon and rectum can be unpleasant, it might keep some people from

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getting this test done. However, newer kits are available to clean out the bowel that might make it easier. Talk to your health care provider about all of your options for the bowel prep.

Your health care provider will give you specific instructions. It's important to read them carefully a few days ahead of time, since you may need to shop for supplies and laxatives and follow a special liquid diet for at least a day before the test. If you're not sure about any of the instructions, call the health care provider's office and get your questions answered.

You will probably also be told not to eat or drink anything after a certain time the night before your test. If you normally take prescription medicines in the morning, talk with your doctor or nurse about how to manage them for that day.

Because a sedative is used to help keep you more comfortable during the test, you will most likely need to arrange for a ride home after the test. You might need someone to help you get home if you are sleepy or dizzy, so many centers that do colonoscopies will not discharge people to go home in a cab or a ridesharing service. If transportation might be a problem, talk with your health care provider about the policy at your hospital or surgery center for using one of these services. There may be other resources available for getting home, depending on the situation.

The day of the procedure

Colonoscopy can usually be done as an outpatient procedure (where you don't need to stay overnight in a hospital).

Before the test starts, you'll likely be given a sedative (into a vein, or IV) to make you feel relaxed and sleepy during the procedure. For most people, this medicine makes them unable to remember the procedure afterward.

During the test, you'll be asked to lie on your side with your knees pulled up. Your doctor might insert a gloved finger into the rectum to examine it before putting in the colonoscope. The colonoscope is lubricated with gel so it can be inserted easily into the rectum. It is then passed all the way up to the beginning of the colon, called the cecum. If you're awake, you might feel an urge to have a bowel movement when the colonoscope is inserted or pushed further up the colon. The doctor also puts air into the colon through the colonoscope to make it easier to see the lining and to perform the test. To ease any discomfort, it may help to breathe deeply and slowly through your mouth. The doctor will look carefully at the inner walls of the colon and rectum as the colonoscope is slowly removed.

If a small polyp is found, it may be removed and then sent to a lab to check if it has any areas that have cancer. This is because some small polyps may become cancer over time. If your doctor sees a larger polyp or tumor, or anything else abnormal, a small piece of it will be removed (biopsied) through the colonoscope. It will be checked in the lab to see if it's cancer, a benign (non-cancerous) growth, or something else.

The test itself usually takes about 30 minutes, but it may take longer if one or more polyps is found and removed.

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After the procedure

After the procedure, you will be watched closely for a while to make sure you don't have any complications. You might need to stay at the center for about an hour before you are able to go home and will need a ride home because of the medicines or anesthesia you received. Your doctor or nurse should give you specific instructions on what you can and can't do in the hours after the test.

Because air is pumped into the colon and rectum during the test, you might feel bloated, have gas pains, or cramp for a while after the test until the air passes out.

If biopsies were done as part of the procedure, the results will typically be available within a few days, although some tests on the biopsy samples might take longer. **You will need to follow up with your doctor after the procedure to get your results.**

Possible complications of colonoscopy

Colonoscopy is usually safe, but there is a risk of:

- **Bleeding.** If a polyp is removed or a biopsy is done during the colonoscopy, you might notice some blood in your stool for a day or two after the test. Serious bleeding is uncommon, but in rare cases, bleeding might need to be treated or can even be life-threatening.
- **Perforation (puncture the wall of the colon or rectum).** This is rare, but it can be a life-threatening complication, and the hole may need to be repaired with surgery.
- **Reactions to anesthesia**

*******After procedure, If you experiencing some bloating, abdominal pain, chill, fever, nausea, vomiting... please call our office or seek medical help right away. Be sure you understand these instructions.*******

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