



COVID-19 2024 NOTICE

If you have a fever, unexplained cough or respiratory symptoms or have been exposed to someone with symptoms or confirmed COVID-19 infection in the last 4 weeks, **CALL** and reschedule your colonoscopy procedure. **Don't do the prep** and risk being turned away.



SUFLAVE-ENSURE COLONOSCOPY Split “PREP”

Modern colonoscopy is a diagnostic procedure to examine the colon or large intestine. Over the past 40 years, it has become the gold standard in screening for colon polyps and prevention of colorectal cancer. Most exams are quick, painless, and very safe with modern sedation methods and newer, thin, flexible instruments. However, for an accurate and safe exam, your colon must be purged of all waste material using a restricted diet and laxative preparation, or "prep." A colonoscopy is an important exam. Read this carefully and take the time to prepare correctly. **REMEMBER:** *An accurate exam requires excellent prep.* You must follow all instructions carefully so that the test does not need to be rescheduled. If you have any questions, please call our office – at (412) 262-1000 option #2.

WARNING: *SUFLAVE and other low-volume concentrated prep solutions are NOT to be used by individuals with severe Chronic Kidney Disease or Kidney Failure. A higher volume, lower concentration prep must be used. If you have kidney failure, please call.*

Most patients report that the worst part of the procedure is not the colonoscopy but the necessary preparation the day before. Preparing for a colonoscopy is never pleasant. Two of the major problems have been the prep solution's volume and taste. Fortunately, new lower volume “preps” have been developed to make this process as simple as possible. *Approved June 2023, SUFLAVE is a new, lower volume, more palatable prep that tastes like a lemon-lime sports drink.*

WARNING: Individuals taking the semaglutide class of medications known as (GLP-1) receptor agonists may delay how their stomach empties. This may interfere with colonoscopy preparation AND increase the risk of aspiration under anesthesia for BOTH colonoscopy and upper endoscopy (EGD) exams.

ALL patients taking these medications once weekly MUST stop them temporarily for 1 week before their procedure appointment.

ALL patients taking these medications daily MUST stop them temporarily for 24 hours before their procedure appointment.

Failure to do so will result in the cancellation of the procedure, which will have to be rescheduled.

ONCE-WEEKLY
wegovy
semaglutide injection 2.4 mg

ONCE-WEEKLY
OZEMPIC
semaglutide injection 0.5mg, 1mg, 2mg

ONCE-DAILY
RYBELSUS
semaglutide tablets 2mg, 3mg

once weekly
mounjaro

To prepare for your exam, you will need a prescription to purchase:

- One SUFLAVE Bowel Prep Kit
- Zofran (ondansetron) 4 mg anti-nausea pills. (optional)

All bowel preps may cause some anal irritation. We also recommend that you purchase:

- A soft brand of toilet tissue.
- A box of baby wipes such as Huggies or Pampers Aloe wipes
- One small tube of diaper rash ointment or Zinc Oxide cream
- A small bottle of Milk of Magnesia (if you suffer from constipation)
- [OPTIONAL] Three (3) bottles of ENSURE PLUS or BOOST PLUS nutritional supplement. Any flavor. This is NOT required but seems to make the prep more tolerable. (If DIABETIC, you may prefer ENSURE MAX PROTEIN or BOOST MAX, which have less sugar.)

This new SUFLAVE prep is safe and effective. **It is split into TWO portions:**

1. The first half is taken the night before your exam.
2. The second half must be taken on the morning of your exam **STARTING 5 HOURS BEFORE YOUR APPOINTMENT** and completed within 1 hour, **AND YOU MUST HAVE NOTHING BY MOUTH THOSE LAST FOUR HOURS BEFORE YOUR EXAM – NO FOOD, LIQUIDS INCLUDING WATER, TOBACCO, CANDY, OR EVEN CHEWING GUM.**

THREE (3) DAYS BEFORE YOUR COLONOSCOPY

Make arrangements for a companion to accompany you to your appointment and drive you home. It is best that this person is someone we can share the examination results with. *We require that your driver remain here the entire time, which averages around two hours – otherwise, your appointment may have to be rescheduled.*

It is best to eat lightly for a few days before your exam. It makes the cleanout easier and more effective. *What goes in – has to come out.* Try to avoid overeating to compensate for the upcoming fast. Please avoid Metamucil, vitamins containing iron, raw vegetables, corn, sesame seeds, and foods with skin or small seeds such as tomatoes, kiwi, and cucumbers for a few days before your exam. Discontinue any fiber supplements. (Metamucil, Benefiber, Citrucel, etc.)

TWO (2) DAYS BEFORE YOUR COLONOSCOPY

Normal activity and diet, but don't overeat. Also, don't go into the prep constipated. If you feel that is the case, we suggest you take an over-the-counter laxative (such as 4 TBSP of Milk of Magnesia) and 4 glasses of water after dinner TWO nights before your exam to "prime the pump."



Special Instruction for Diabetics (READ LAST PAGE)

We realize our patients with diabetes may be wondering about the safety of a colonoscopy prep. The bottom line is it can be done safely if you follow instructions. If you are taking medication for Diabetes, please read the last page for special instructions.

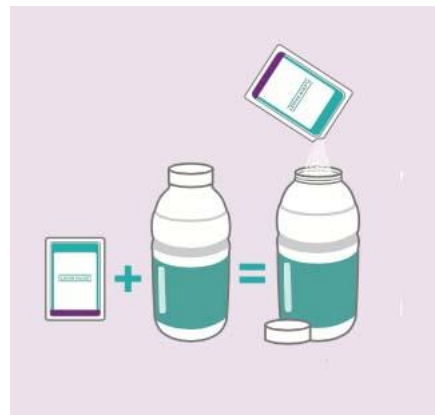
ONE (1) DAY BEFORE YOUR COLONOSCOPY (“Prep Day”)

Follow these instructions the day before your procedure:

7 AM. NO SOLID FOOD. You may have one 8 oz bottle of Ensure/Boost if you wish for some nutrition. Otherwise, a CLEAR LIQUID DIET should be followed until your exam is completed. (See below) Drink at least 8 oz of clear fluids every two hours while awake.

NOON NO SOLID FOOD. You may drink the second 8 oz bottle of ENSURE/BOOST if you wish. Drink at least 8 oz of clear fluids every two hours while awake.

4 PM. NO SOLID FOOD. No Ensure/Boost. ONLY clear liquids. Drink at least 8 oz of clear fluids every two hours while awake.



5 PM. MIX and REFRIGERATE 1st BOTTLE of PREP SOLUTION.

- Open 1 flavor-enhancing packet and pour the contents into 1 bottle.
- Fill the provided bottle with lukewarm water up to the fill line. After capping the bottle, gently shake the bottle until all the powder has mixed well (dissolved). For the best taste, refrigerate the solution for an hour before drinking. Do not freeze.

5:45 PM. If SUPPLIED. Take one Zofran (ondansetron) 4 mg anti-nausea pills. (optional)

6 PM. BEGIN 1st Half of the PREP

- Drink 8 ounces of solution every 15 minutes until the bottle is empty.
- **Drink an additional 16 ounces of water during the evening.** You may drink more fluid if you wish. This may include water, iced tea, lemonade, white grape juice, Crystal Light, and Gatorade. Do NOT drink any milk products. Avoid red, blue, or purple liquids or popsicles, as they may interfere with the exam.

7 PM. MIX and REFRIGERATE 2nd BOTTLE of PREP SOLUTION.

- Open 1 flavor-enhancing packet and pour the contents into 1 bottle.
- Fill the provided bottle with lukewarm water up to the fill line. After capping the bottle, gently shake the bottle until all powder has mixed well (dissolved). For the best taste, refrigerate the solution. Do not freeze.

DAY OF COLONOSCOPY (“Test Day”)

Do NOT eat breakfast.

6 HOURS before your appointment.

If SUPPLIED. Take one Zofran (odansetron) 4 mg anti-nausea pills. (optional).

Wait 15 minutes, and then

BEGIN THE 2nd HALF of the PREP

- Drink 8 ounces of solution every 15 minutes until the bottle is empty.
- **Drink an additional 16 ounces of water over the next hour.** You may drink more fluid if you wish. This may include water, iced tea, lemonade, white grape juice, Crystal Light, and Gatorade. Do NOT drink any milk products. Avoid red, blue, or purple liquids or popsicles, as they may interfere with the exam.

To prevent aspiration of stomach contents into your lungs while under the anesthetic, **YOU MUST HAVE NOTHING BY MOUTH THOSE LAST FOUR HOURS BEFORE YOUR EXAM – NO FOOD, LIQUIDS INCLUDING WATER, TOBACCO, CANDY, OR EVEN CHEWING GUM – OTHERWISE YOUR EXAM MAY BE CANCELLED.**

However, you may take any important prescription medications with a **small** sip of water, especially any medications for HIGH BLOOD PRESSURE. (Diabetic medications and blood thinners such as Coumadin, warfarin, Pradaxa, Xarelto, Eliquis, etc., require special instructions. Ask your doctor.) If you use any INHALERS FOR ASTHMA, even infrequently, please bring them with you.

Plan to arrive ON TIME for your appointment. Wear comfortable clothing and shoes that are easily removed. Leave jewelry and other valuables at home. No firearms are permitted. Bring your insurance card and driver’s license. If there is a copay or deductible, be prepared to pay it **PRIOR** to your procedure.

YOUR DRIVER

Bring a driver who can remain here the entire time you are here. The average visit is about two hours. Arriving late or without a driver may require canceling and rescheduling your procedure. *Patients that would like to have their driver come to recovery after their procedure must have their driver remain in the waiting room the entire time.* If the nurse comes to the waiting room to call your driver back and they have left the waiting room, they may miss the opportunity to come to recovery when the doctor goes over the results.

Note: “CLEAR” LIQUIDS ALLOWED: This includes clear fat-free broths, bouillon, coffee, and tea (without cream or non-dairy creamer), Kool-Aid, Crystal Light, carbonated beverages, clear sodas like ginger ale, orange juice, and other fruit juices without pulp, popsicles without pulp, Jell-O, hard candies, and Italian ices. **You are not allowed:** orange juice with pulp, fruit nectars, liquids you cannot see through, milk, cream, and non-dairy creamer. Avoid anything red, blue, or purple in color. No alcoholic drinks.

YOU SHOULD CALL THE OFFICE AT 412-262-1000 AFTER 8:30 AM ON THE MORNING OF YOUR TEST IF YOU ARE STILL HAVING SOLID OR BROWN STOOLS.

Special Instruction for Diabetics

We realize our patients with diabetes may be wondering about the safety of a colonoscopy prep. The bottom line is it can be done safely if you follow instructions. Your colonoscopy prep will mean significant changes to what and how much you eat, which can easily cause unpredictability of blood sugar. This will require a temporary adjustment in your diabetic medications. The biggest fear is low blood sugar (hypoglycemia). You should monitor your blood sugar. We don't want you going low. We advise patients with diabetes to tolerate a slightly higher blood sugar for a day or two, which will not cause long-term harm. One day of glucose readings that are slightly higher or "permissive hyperglycemia" is way better than having a hypoglycemic event." Follow the guidelines below. If you have brittle diabetes or your diabetes is difficult to control, discuss the prep adjustments with your endocrinologist or PCP. A Feb [2023 review](#) offers some standard recommendations:

- **Metformin/Glucofage:** Stop taking it when the liquid diet begins and resume once you're back to eating regular meals after the procedure.
- **Semiglutide:** (Ozempic/semiglutide, Rybelsus/semuglutide, Wegovy/semiglutide, Mourjero/trizepatide). IF daily capsule, stop 24 hours before the exam; IF weekly injection, stop 1 week before the exam. Resume afterward at normal dose.
- **Other GLP-1 receptor agonists:** (Trulicity/dulaglutide, Byetta/exenatide Victoza/liraglutide): Stop taking when the liquid diet begins and resume once you're back to eating normal meals after the procedure. If your regular weekly injection is scheduled during your colonoscopy prep period, hold off until you're back to eating normally.
- **DPP-4 inhibitors:** (such as Januvia/sitagliptin, Tradjenta/linagliptin, and Onglyza/saxagliptin): Stop the morning of the procedure and resume that evening.
- **SGLT-2 inhibitors:** (such as Jardiance/empagliflozin, Farxiga/dapagliflozin, Brenzavvy/bexagliflozin, and Invokana/canagliflozin): Stop taking three days before the procedure and resume once you're back to eating normal meals *and* are adequately hydrated.
- **Sulfonylureas:** (Such as Glucotrol/Glipizide) Stop taking the day before the procedure and resume once you're back to eating normal meals.

Insulin, the diabetes drug with the highest risk of hypoglycemia and an absolute necessity for people with type 1, requires special attention. Please speak to your endocrinologist or PCP because the following are only starting points:

- **Rapid insulin:** People who use an insulin-to-carb ratio to determine how much rapid insulin to use for meals can continue to follow their normal dosing strategy. Those who use fixed doses for each meal must substantially cut their usual dose during the clear liquid prep phase.
- **Basal insulin:** Beginning the day before the procedure, patients will be asked to cut their basal insulin dose by 20 to 50 percent, depending on the insulin they use and the type of diabetes they experience.

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