



## INSTRUCTIONS FOR YOUR PROCEDURE

**WHAT:** Colonoscopy with GoLyteLy – Two Day

**WHERE:**

<b>FRONT RANGE ENDOSCOPY CENTER</b> 719 N CASCADE AVE 719 – 433 – 7224	<b>MEMORIAL HOSPITAL CENTRAL</b> 1400 E BOULDER ST 719 – 365 – 5543 CHECK IN AT THE NORTH ENTRANCE	<b>MEMORIAL HOSPITAL NORTH</b> 4050 N BRIARGATE PKWY 719 – 364 – 1773	<b>PENROSE HOSPITAL</b> 2222 N NEVADA 719 – 776 – 8010 PRE-REGISTRATION AND SCHEDULE A PRE-OP
<b>ST. FRANCIS HOSPITAL</b> 6001 E WOODMAN RN 719 – 776 – 8010 PRE-REGISTRATION	<b>CASTLE ROCK ADVENTIST HEALTH CAMPUS</b> 2350 MEADOWS BLVD CASTLE ROCK, CO 720 – 455 – 0150	<b>GRANDVIEW HOSPITAL</b> 5623 PULPIT PEAK VIEW 719 – 272 - 3600	<b>SCOPE</b> 2920 N CASCADE AVE 719 – 362 - 2300 1 <sup>ST</sup> FLOOR

**WHEN: DATE:** \_\_\_\_\_ **CHECK IN TIME:** \_\_\_\_\_ **PROCEDURE TIME:** \_\_\_\_\_

**WITH:**

DR. PATEL	DR. KRISHNAN	DR. LEE	DR. ROSE
DR. KOWALCZYK	DR. SIDHU	DR. MOORE	DR. HARMON



**Failure to adhere to the following instructions may result in cancellation of your procedure.**

<b>**IMPORTANT INSTRUCTIONS**</b>	Initials
1. Please wear loose, comfortable clothing. Bring your insurance cards, a photo ID, and a co-pay if needed.	
2. <b>STOP</b> all blood thinners 5 days prior to your procedure. Please check with your prescribing physician.	
3. <b>Diabetics:</b> The day of your procedure, please hold oral diabetic medications and short acting insulin until after the procedure. Please check with your prescribing physician.	
4. Continue to take your, cardiac, blood pressure and seizure medications as normal, but <b>NOT WITHIN 4 HOURS OF THE PROCEDURE.</b>	
5. You <b>MUST</b> be accompanied by a responsible adult to drive you home. Buses and taxi services are not permitted unless you are accompanied by an adult.	
6. If you cannot keep this appointment for any reason you must call the office at 719 – 636 – 1201. 48 hours' notice is required, or you will be subject to a \$250 fee.	
7. <b>Absolutely nothing to drink 4 hours prior to procedure.</b>	
8. If your procedure is scheduled after 12:00 noon, you may have <b>CLEAR LIQUIDS</b> until 4 hours prior to your <b>CHECK IN</b> time. You may have the following liquids if they are <b>not red or purple:</b> coffee/tea (no creamers or milk), Gatorade, clear sodas, and kool-aid. No Coke, Pepsi, or colored sodas.	

\*Please be advised\*

Every procedure will incur three of four separate fees that you will receive a bill for:

1. Facility fee – Facility where the procedure is performed.
2. Physician's fee – Peak Gastroenterology Associates, P.C.
3. Anesthetist's Fee
4. Pathology Fee – From the outside laboratory that performs tests on any biopsies taken during your procedure.

Unless you are self-pay, insurance should cover most of these expenses.



# How to Prepare for your Colonoscopy

## 1. Two to three days before you start your prep:

- Follow the low-residue/low-fiber diet. See the attached guide.
- A low-residue/low-fiber diet is for people who need to rest their intestinal tract.
- A low-residue-low-fiber diet limits the amount of food waste that has to move through the large intestine.

### Points to Keep in Mind

- Avoid any food made with seeds, nuts, or raw or dried fruit.
- Avoid whole-grain breads and cereals. Consume products made from refined flour.
- Do not eat raw fruits or vegetables. Remove skins before cooking.
- Limit milk and milk products to two cups a day. Use lactose-reduced milk or lactase enzymes if you are lactose intolerant.
- Limit fats since these can increase stool bulk.
- Avoid tough, fibrous meats with gristle.

## 2. The day before your procedure:

- You may not EAT anything!
- You may not drink anything red or purple!
- You may not consume milk/dairy!
- You may not consume alcoholic beverages!
- You may not consume dark sodas!
- You may not consume any fluids 4 hours prior to your procedure. You MAY drink: water, lemon/limeade, Gatorade<sup>®</sup>, Sprite<sup>®</sup>, 7 UP<sup>®</sup>, Ginger Ale, coffee and tea (without creamer, sugar and sweetener are ok), clear broth, bouillon, popsicles and Jell-o<sup>®</sup> that are not red or purple.



DO **NOT** FOLLOW THE INSTRUCTIONS THAT COME WITH THE PREP!

## 3. Mixing Golytely

- If using a flavor pack that comes with the bottle, add this to the bottle before adding water.
- Add lukewarm water to the top line on the bottle. You may add Crystal Light Natural Lemonade flavor to taste.
- Cap the bottle and shake to dissolve the powder. The mixed solution will be clear and colorless.



**When reconstituted, keep solution refrigerated and use within 48 hours.**

## Morning Procedure

### 4. When to take GoLyteLy:

- **DAY ONE DATE:** \_\_\_\_\_
  - i. At 6 PM the day before your procedure, drink 8oz or one cup of the prep solution every 15 minutes until half of the container is gone. The first bowel movement usually occurs within one hour of starting to drink GolyteLy. You will have loose/watery stools over the next one to three hours. Be sure to drink plenty of clear liquids throughout the evening to STAY HYDRATED! Please put the rest of the mixed prep solution in to your refrigerator. You will take the remaining prep tomorrow evening.
  
- **DAY TWO DATE:** \_\_\_\_\_
  - i. At 6 PM, drink the second half of the prep solution. Drink 8oz or one cup of the solution every 15 minutes. Again, be sure to drink plenty of fluids to STAY HYDRATED.

**DO NOT DRINK ANYTHING (NOT EVEN WATER) 4 HOURS PRIOR TO YOUR CHECK IN TIME**

### Helpful Hints

- BABY WIPES ARE KINDER THAN TOILET PAPER
- PETROLEUM JELLY SOOTHES SORE AREAS
- KEEP SMILING! 😊