



INSTRUCTIONS FOR YOUR AFTERNOON PROCEDURE

WHAT: Colonoscopy with GoLytely

WHERE:

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

IMPORTANT INSTRUCTIONS	Initials
1. Please wear loose, comfortable clothing. Bring your insurance cards, a photo ID, and a co-pay if needed.	
2. STOP all blood thinners 5 days prior to your procedure. Please check with your prescribing physician.	
3. Diabetics: 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 NOT WITHIN 4 HOURS OF THE PROCEDURE.	
5. You MUST 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. Absolutely nothing to drink 4 hours prior to procedure.	
8. If your procedure is scheduled after 12:00 noon, you may have CLEAR LIQUIDS until 4 hours prior to your CHECK IN time. You may have the following liquids if they are not red or purple: 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[®], Sprite[®], 7 UP[®], Ginger Ale, coffee and tea (without creamer, sugar and sweetener are ok), clear broth, bouillon, popsicles and Jell-o[®] 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.

Afternoon Procedure

4. When to take GoLyteLy:

- I. **First dose:** At 6:00 PM the evening before your scheduled procedure, drink 8oz or one cup of the prep solution every 15 minutes until ½ 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!

- II. **Second dose:** At 6:00 AM the morning of your procedure, 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! 😊