

Colonoscopy Instructions

Please follow the instructions below. Failure to read and comply with these instructions jeopardizes the safety of your procedure and may result in the late cancelation of your procedure and a \$150 CANCELLATION FEE

Your colon prep has been called into _____ pharmacy. This includes the following:

- **4 laxative tablets** (bisacodyl 5mg) (Dulcolax)
- **238 grams (8.3 ounces) of laxative powder** (MiraLAX)

Please obtain 64 ounces of your preferred liquid to mix with laxative powder (no red or purple colors). This can be tea, Coke, lemonade, water, Propel, Gatorade, or whatever you like to drink on a daily basis as long as it's not milk, OJ, red, or purple.

It's best to pour all 238 grams into a pitcher and mix with 64 ounces of liquid. Stir well. Refrigerate.

Day BEFORE the colonoscopy:

You can only have liquids ALL DAY. No solid foods.

TYPES OF LIQUIDS	OK TO HAVE	DO NOT EAT
Soups	Clear broth or bouillon.	Anything with food chunks
Sweets	Jello, Flavored Ice	Anything red or purple
Drinks	Clear fruit juices such as lemonade, apple juice, white grape juice. Soda such as ginger ale, sprite, and seltzer. Sports drinks such as powerade and Gatorade. Coffee or tea (without milk or creamer) Water including carbonated and flavored water.	Anything red or purple. Juices with pulp. Nectars. Orange juice Smoothies or shakes. Milk, cream and dairy products. Nut milk, plant milk, non-dairy creamers, and other dairy alternatives. Drinks with alcohol.

Step 1: At 1 pm on the day before your procedure, swallow 4 bisacodyl (5mg) tablets with a glass of water.

Step 2: At 4 pm start drinking the MiraLAX mixture.

- Bowel movements usually start within 1 hour, but it may take longer for some people. Keep drinking clear liquids to stay hydrated and flush out your colon.

Step 3: Be sure to finish ALL the MiraLAX mixture.

NOTHING BY MOUTH AFTER MIDNIGHT!!!

You are scheduled at the:

South Arkansas Surgery Center
2704 Vine St, El Dorado, AR 71730
870-862-1636
Check in at Main Entrance

South Arkansas Regional Hospital
700 W. Grove St, El Dorado, AR 71730
870-863-2000
Check in at Main Entrance of Hospital

You will arrive at the Facility on _____ @ _____ am/pm.

Plan to bring a licensed, adult, driver to take you home. You will NOT be allowed to drive.

If you have any NEW shortness of breath, chest pain or if you are currently scheduled for any future cardiac appointments, please notify us IMMEDIATELY.

FAILURE TO COMPLY WITH THESE INSTRUCTIONS MAY RESULT IN CANCELLATION OF YOUR PROCEDURE AND \$150 CANCELLATION FEE.

If you have any questions, please call or text our office at (870) 881-9311.

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Information about Medications

The following medications will need to be held prior to your procedure:

- Plavix (clopidogrel), Effient – stop _____ days prior to your procedure
 - Coumadin (warfarin), Pradaxa, Xarelto – stop ____ days prior to your procedure
 - Aggrenox – stop _____ days prior to your procedure
 - Brilinta – stop ___ days prior to your procedure
 - Eliquis – stop ___ days prior to your procedure
 - Adipex (phentermine) and all other diet pills – stop 14 days prior to your procedure
 - Ozempic, Mounjaro, Semaglutide or similar injections – stop 7 days prior to your procedure
 - Iron supplements – stop 7 days prior to your procedure
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If applicable, **take your blood pressure and heart medications with a small sip of water the morning of your procedure.**

If you take medicines for diabetes, call the doctor who manages your diabetes to discuss how to manage your medicines for this procedure. **You should not take your oral diabetes medication on the day of your procedure** unless otherwise instructed. **If you take injectable insulin, we recommend that you hold your morning dose.** Prevent low blood sugar on the day you will be on a clear liquid diet by consuming chicken, beef, or vegetable broth. Keep glucose tablets on hand for any sudden drops in blood sugar. They are available over-the-counter at any pharmacy.

Things to remember

- Take only the medicines you were instructed to take the morning of your procedure. Take them with a few sips of water.
- Do not wear any lotions, creams, or powder.
- Take off any jewelry, including body piercings.
- Leave all valuables, such as credit cards and jewelry, at home.
- If you wear contacts, wear your glasses instead.
- You cannot have gum, hard candy, dip/chewing tobacco, or anything by mouth the morning of surgery.

What to bring

- Your picture ID, insurance cards, list of all medications you currently take, and any payment that is due at the time of the procedure
- Your rescue inhaler (such as albuterol for asthma), if you have one
- A case for your glasses or dentures, if you wear them

CANCELLATION POLICY

- Our Policy allows for two re-schedules only.
- Cancellations/re-schedules must be made **THREE BUSINESS DAYS IN ADVANCE**
- Cancellations/re-schedules made less than **THREE BUSINESS DAYS IN ADVANCE** will be subject to the **\$150 Cancellation fee.**
- If you cancel your procedure with the facility, you must also immediately contact this office and cancel with the physician.

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Results and Follow-Up

Results will be given both verbally and in written form right after the procedure. They will be discussed with you and anyone waiting for you if you so direct. *Pathology results will be mailed to you within 2 weeks.* We will contact you by phone if anything needs immediate follow-up. If you have not heard anything after 2 weeks, then contact the office for your results.

Office follow-up is usually not necessary. If you would like a follow-up appointment or other issues are involved, please call our office. Your next recommended colonoscopy is usually based on family history, findings at the time of colonoscopy, pathology results or other risk factors.

Financial Statement and What to Expect

It is the *patient's responsibility* to make sure all offices have the correct insurance(s).

You will receive *AT LEAST* two separate statements for your procedure.

- One statement will be addressed from *Surgical Office of Morgan & Kennedy*. This bill is a result of the professional services provided to you. This is the fee we have charged you for doing the procedure.
- Another statement will be from the facility where your procedure took place. This bill is a result of the facility fee.
- Anesthesia services will also address a statement to you.
- If any biopsies were taken during your procedure, you will receive a separate bill from Lab/Pathology.

Your insurance company will be billed separately for each of these charges. Once your insurance company has paid, it will be reflected on your statement. Please make arrangements to pay the portion that is not covered by your insurance company as soon as you receive your first statement.

Please note that all insurances are different, and it is the *patient's responsibility* to call their insurance and find out what procedures are covered and what is not.

If you have any questions regarding your statements, please call that office directly.

South AR Surgery Center: 870-862-1636

South AR Regional Hospital: 870-863-2000

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