Date/Time:	Sigmoidoscopy Preparation
Physician:	

Guthrie Clinic, Guthrie Ithaca City Harbor, 720 Willow Ave, Ithaca, NY, 14850. (607)-219-4600 If you cannot make this appointment, please contact our office 72 hours prior to your appointment.

Please read these instructions carefully, at least ONE WEEK prior to your colonoscopy

# Supplies: Citrate of Magnesia 10 oz./ Fleets Enema

If you use C-Pap, oxygen, or weigh over 300 pounds, please contact the Ithaca Department of Gastroenterology at 607-219-4600.

For questions/concerns during non office hours please call 1-800-300-5858 and ask to speak with the Gastroenterologist on call.

### Medications:

Coumadin (Warfarin) – If you use a blood thinner named Coumadin, Warfarin, or Jantoven you will need special instructions about stopping this drug before the procedure. *Timing of this is very important*. Please contact the Ithaca Coumadin Clinic **ASAP** at 607-330-0426 for instructions before stopping, to see if they prefer that you use an alternative anticoagulant.

Plavix (Clopidogrel) – Most patients need to stop taking Plavix (Clopidogrel) 5 days prior to procedure. Please speak with your prescribing physician before stopping this medication.

Xareito or Eliquis, Most patients need to stop this medication 24 hours prior to the procedure. Please speak with your prescribing physician before stopping this medicine.

**Aspirin** - Does **NOT** need to be stopped prior to procedure.

Inhalers – If you have asthma and are on inhalers, take as prescribed and bring your inhaler with you.

**Blood Pressure**— should **not** be taken the morning of the procedure, however **please** bring them with you. (If you take a Betablocker continue taking as you usually do –see attached list)

Pain Medications- please contact this office if you take routine medications for pain.

#### Breast Feeding:

Contact your Pediatrician for recommendations d/t medications used during your procedure.

### If you have diabetes -

- •If you take a pill to lower your sugar, do not take it on the day of your procedure.
- •If you are taking regular Insulin® or (NPH), do not take it on the day of your procedure.
- •If you are taking any other insulin preparation such as Lantus, Humalog, or 70/30 insulin. It is recommended you take a  $\frac{1}{2}$  dose the evening prior to your procedure and no dose the day of your procedure.

You will need a blend of products with and without sugar on hand to keep your blood glucose in balance during the preparation period (see clear liquids list)



5 days before Sigmoidoscopy	1 day before Sigmoidoscoy	The day of your Sigmoidoscopy	After your Sigmoidoscopy
Increase your fluid intake with at least 1-2 quarts of clear liquids	You may have a light breakfast before 10:00 am, then clear liquids from that point on.	Use the Fleets Enema the morning of your exam as directed on the package	You will need to rest after the procedure until the sedation begins to clear your system. You cannot go back to work or drive the same day as your procedure
Stop taking iron and multivitamins containing iron	At 6:00 P.M. drink 10 oz. Of Citrate of Magnesia.	You may have clear liquids up to 3 hours prior to your appointment time. You may take your medications with a small amount of water.	Your examination results and instructions will be reviewed upon discharge.
Please stay on a low roughage diet, avoid fresh fruits, vegetables and stop eating nuts, small seeds, popcorn, and corn.	Continue with clear liquids the remainder of the day.	Your driver should anticipate remaining on the premises throughout the procedure and be present for discharge Instructions (1 -2 hrs)  You may not take a taxi or public transportation unless you have someone with you. This person must be 18 years or older.	You may resume a normal diet.
Stop fiber supplements such as Metamucil, Citrucel, etc		Please bring your insurance card and a list of your current medications.	The day following the procedure, you may resume normal activity

# Clear Liquid Diet

Water Clear Broth: Beef or Chicken
Gatorade, Crystal Light Clear soda: Ginger Ale, Sprite, 7up

Tea, Coffee (without cream)

Popsicles

Jell-O

Italian Ices

Juices: apple juice, white grape juice, Tang, Kool-Aid, strained lemonade (any

juice you can see through and has no pulp is acceptable)

There is NO limit to the quantity of clear liquid consumption



# **Beta-Blockers Include:**

- Acebutolol (Sectral)
- Atenolol (Tenormin)
- Betaxolol (Kerlone)
- Bisoprolol (Zebeta, Ziac)
- Carteolol (Cartrol)
- Carvedilol (Coreg)
- Labetolol (Normodyne, Trandate)
- Metoprolol (Lopressor, Toprol-XL)
- Nadolol (Corgard)
- Nebivolol (Bystolic)
- Penbutolol (Levatol)
- Propranolol (Inderal)
- Sotalol (Betapace)
- Timolol (Blocadren)

# Insurance Information for Colonoscopy Patients

Under the Affordable Care Act, several preventive services such as colonoscopies are covered at no cost to the patient. Guidelines are now available about which colonoscopies are defined as a preventive service (screening).

Guthrie has created this document to sort through some of the confusion. Here is what you need to know about colonoscopies that are considered preventative:

# **Colonoscopy Categories**

# Preventive Colonoscopy Screening (CPT® 45378, G0121)

Patient is asymptomatic (no gastrointestinal symptoms either past or present); is 50 years of age or over; has no personal or family history of gastrointestinal disease, colon polyps and/or cancer. The patient has not undergone a colonoscopy within the last 10 years.

# Diagnostic/therapeutic colonoscopy (CPT® 45378)

Patient has gastrointestinal symptoms such as change in bowel habits, diarrhea, constipation, rectal bleeding or gastrointestinal disease.

# Surveillance/ High Risk Screening Colonoscopy (CPT® 45378, G0105)

Patient is asymptomatic (no gastrointestinal symptoms either past or present); has a personal history of gastrointestinal disease, colon polyps and/or cancer. Patients in this category may undergo colonoscopy surveillance at shortened intervals (e.g. every 2-5 years).

If a screening colonoscopy results in the biopsy or removal of a lesion or growth during the procedure, the procedure is then considered diagnostic and you may have to pay a coinsurance or copayment.

We recommend that our patients contact their insurance carrier to verify colonoscopy coverage. Your insurance plan may not consider surveillance colonoscopies as a screening benefit. The correct coding of a procedure is driven by your medical history and the physician's documentation. It is not appropriate to change coding to enhance insurance benefit coverage.

Thank you for choosing Guthrie for your healthcare needs. While you are here, our team will do our best to make your visit a comfortable one. At Guthrie, we strive to make the patient and visitor experience as stress-free and comfortable as possible.

Learn more about preparing for a hospital stay, billing and financial services, and support programs by visiting Guthrie.org.









www.Guthrie.org