



WHITE-WILSON
 MEDICAL CENTER, P.A.
 GASTROENTEROLOGY

DR. CHRISTOPHER ABRASLEY, DR. C MARK RIGGENBACH

COLONOSCOPY PREP INSTRUCTIONS

APPOINTMENT DATE: -----	APPOINTMENT TIME: Emerald Coast Surgery Center will call 2 DAYS PRIOR with arrival time	Location: Emerald Coast Surgery Center , 995 Mar Walt Drive, Ft Walton Beach, Phone: (850) 863-7887
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Pre-Registration:

At least 7-10 days prior to your procedure, pre-register at www.emeraldcoastsurgerycenter.com . If you do not have computer access, you may register by phone when the surgery center calls with your procedure time.

Financial:

The Emerald Cost Surgery Center will bill your insurance for facility fees & anesthesiologist fees. You may contact the Emerald Coast Surgery Center, 7-10 days in advance to discuss your out-of-pocket expenses, if applicable (850)863-7887.

Cancellations/Rescheduling:

Our goal is to provide quality individualized medical care in a timely manner. Late cancellations and reschedules create inconvenience and prevent scheduling of other patients who need access to medical care in a timely manner. We understand situations that arise when you may need to cancel your appointment or reschedule and we appreciate at least **a 72 hour advance notice** when that happens. This helps us be respectful of other patients' needs and enables us to give the appointment time to another patient who needs to see us. Patients will be charged a \$250.00 administration fee (for any NO SHOW occurrence) for a visit that includes a scheduled medical procedure. This fee is non – refundable by your insurance company.

Bowel Prep:

- **It will be sent electronically by your provider to your local pharmacy to pick it up ASAP.**
- If you have insurance coverage issues contact the office and we will send in an alternative for you.
- **If an alternative has to be sent you can find the new instructions on our White Wilson website under patient resources, health forms, then, bowel prep instructions.**
- What is bowel prep? This is a laxative and should make you have frequent watery bowel movements. If your stomach begins feeling extremely full, or if you become nauseated, stop drinking the prep for a short time until you feel better, then resume drinking it at a slower pace.

If you have any problem completing the instructions, call the procedure scheduling line at: 850-863.8260 opt #3

Bowel PREP Instructions / Checklist

DO not follow instructions on your bowel prep box follow the ones below!

- *** 7 DAYS PRIOR TO YOUR PROCEDURE AVOID SEEDS, NUTS, POPCORN AND ANY FOOD THAT ARE NOT EASILY DIGESTIBLE***** (corn & broccoli)

THE DAY BEFORE YOUR COLONOSCOPY: NO SOLID FOOD

- Clear liquids ALL DAY for breakfast, lunch and dinner. Clear liquids include the following:
 1. Gatorade, Powerade, Pedialyte
 2. Clear broth or bouillon
 3. Coffee or tea (no milk or creamer)
 4. Soft drinks
 5. Strained fruit juices such as apple or white grape juice
 6. Jell-O ,popsicles, and hard candy
- DO NOT drink /eat any**
 1. cream, milk, milk substitute, or dairy product including non-dairy creamer
 2. pulp (fruits with membranes) products,
 3. alcohol
 4. anything containing **red** or **purple** dyes. (this looks like blood on the scope)
- No limits on the amount of fluid intake for the day**
- 4:00 PM: Drink first dose of MoviPrep Solution**
 1. Mix the MoviPrep solution (one pouch A and one pouch B) with water in the provided container.
 - The MoviPrep container is divided by 4 marks. Every 15 minutes, drink the solution down to the next mark (approximately 8 oz), until the full liter is consumed
 - Drink 16 oz of the clear liquid of your choice. This is a necessary step to ensure adequate hydration and an effective prep
 2. You may take PM medications after your bowels have stopped moving
 3. Continue drinking clear liquids until bedtime

The day OF your procedure: 5 hours before your scheduled procedure time

- Drink the second dose of MoviPrep solution
 1. Mix the second dose of MoviPrep solution (one pouch A and one pouch B) as you did previously.
 2. Drink an additional 16 to 32 ounces of clear liquids. Then you are to have nothing at all by mouth until after your procedure, not even water.

When you are finished with the prep you MAY NOT have anything by mouth until after your procedure

- Take **ONLY** essential AM medications with a tiny sip of water before leaving your house for the procedure.
- BRING SOMEONE WITH YOU TO DRIVE YOU HOME**, they must remain in the center, as you are sedated for this procedure and will not be able to drive yourself. Taxi and rideshares are not permitted.



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Understanding Colonoscopy

What is a colonoscopy?

Colonoscopy enables your doctor to examine the lining of your colon (large intestine) for abnormalities by inserting a flexible tube as thick as your finger into your anus and slowly advancing it into the rectum and colon. If your doctor has recommended a colonoscopy, this brochure will give you a basic understanding of the procedure - how it's performed, how it can help, and what side effects you might experience. It can't answer all of your questions since much depends on the individual patient and the doctor. Please ask your doctor about anything you don't understand.

What preparation is required?

Your doctor will tell you what dietary restrictions to follow and what cleansing routine to use. In general, the preparation consists of either consuming a large volume of a special cleansing solution or clear liquids and special oral laxatives. The colon must be completely clean for the procedure to be accurate and complete, so be sure to follow your doctor's instructions carefully.

Can I take my current medications?

Most medications can be continued as usual, but some medications can interfere with the preparation or the examination. Inform your doctor about medications you're taking, particularly aspirin products, arthritis medications, anticoagulants (blood thinners), insulin or iron products. Also, be sure to mention allergies you have to medications.

What happens during colonoscopy?

Colonoscopy is well-tolerated and rarely causes much pain. You might feel pressure, bloating or cramping during the procedure. Your doctor might give you a sedative to help you relax and better tolerate any discomfort.

You will lie on your side or back while your doctor slowly advances a colonoscope through your large intestine to examine the lining. Your doctor will examine the lining again as he or she slowly withdraws the colonoscope. The procedure itself usually takes 15 to 30 minutes, although you should plan on two to three hours for waiting, preparation and recovery.

In some cases, the doctor cannot pass the colonoscope through the entire colon to where it meets the small intestine. Although another examination might be needed, your doctor might decide that the limited examination is sufficient.

What if the colonoscopy shows something abnormal?

If your doctor thinks an area needs further evaluation, he or she might pass an instrument through the colonoscope to obtain a biopsy (a sample of the colon lining) to be analyzed. Biopsies are used to identify many conditions, and your doctor might order one even if he or she doesn't suspect cancer. If colonoscopy is being performed to identify sites of bleeding, your doctor might control the bleeding through the colonoscope by injecting medications or by coagulation (sealing off bleeding vessels with heat treatment). Your doctor might also find polyps during colonoscopy, and he or she will most likely remove them during the examination. These procedures don't usually cause any pain.

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What are polyps and why are they removed?

Polyps are abnormal growths in the colon lining that are usually benign (noncancerous). They vary in size from a tiny dot to several inches. Your doctor can't always tell a benign polyp from a malignant (cancerous) polyp by its outer appearance, so he or she might send removed polyps for analysis. Because cancer begins in polyps, removing them is an important means of preventing colorectal cancer.

How are polyps removed?

Your doctor might destroy tiny polyps by fulguration (burning) or by removing them with wire loops called snares or with biopsy instruments. Your doctor might use a technique called "snare polypectomy" to remove larger polyps. That technique involves passing a wire loop through the colonoscope and removing the polyp from the intestinal wall using an electrical current. You should feel no pain during the polypectomy.

What happens after a colonoscopy?

Your physician will explain the results of the examination to you, although you'll probably have to wait for the results of any biopsies performed.

If you have been given sedatives during the procedure, someone must drive you home and stay with you. Even if you feel alert after the procedure, your judgment and reflexes could be impaired for the rest of the day. You might have some cramping or bloating because of the air introduced into the colon during the examination. This should disappear quickly when you pass gas.

You should be able to eat after the examination, but your doctor might restrict your diet and activities, especially after polypectomy.

What are the possible complications of colonoscopy?

Colonoscopy and polypectomy are generally safe when performed by doctors who have been specially trained and are experienced in these procedures.

One possible complication is a perforation, or tear, through the bowel wall that could require surgery. Bleeding might occur at the site of biopsy or polypectomy, but it's usually minor. Bleeding can stop on its own or be controlled through the colonoscope; it rarely requires follow-up treatment. Some patients might have a reaction to the sedatives or complications from heart or lung disease.

Although complications after colonoscopy are uncommon, it's important to recognize early signs of possible complications. Contact your doctor if you notice severe abdominal pain, fever and chills, or rectal bleeding of more than one-half cup. Note that bleeding can occur several days after the procedure.

Please contact your doctor promptly if you have any follow-up questions or if you are experiencing any complications due to the procedure.