

## GI Clinic: EGD & Colonoscopy Instructions

If you have questions about anything that needs to be accomplished on this form, please contact the **Gastroenterology Clinic Nurse** at 702-653-3691 or **Clinic Technician** at 702-653-3978.

Your Physician's name:             Dr. McCarron             Dr. Liane             Dr. Lewis

**DATE of PROCEDURE:** \_\_\_\_\_

Check in at GI Procedures/Same Day Surgery front desk on the 2<sup>nd</sup> floor.

**ACUTAL Check in time:** Your appointment will be somewhere in your MD's block time  
 **0700-1400 approximate**

\_\_\_\_\_ **PHARMACY:** Pick up the prescriptions and take the medicine as directed. Please **pick up the prescription**. **Activate your prescription prior to going to pharmacy. Text "GET IN LINE" to (833)653-4575.**

<input checked="" type="checkbox"/> Simethicone (4 or 6 gas pills)	<input type="checkbox"/> SuTab
<input checked="" type="checkbox"/> Plenvu	<input type="checkbox"/> Miralax
<input type="checkbox"/> Golytely/PEG	<input type="checkbox"/> Other: _____

\_\_\_\_\_ **CPAP:** If you use a home CPAP please write down your settings. We will need this information for your procedure. If your settings are 10cmH2O or greater, please inform the nurse prior to your scheduled procedure date.

\_\_\_\_\_ **LABORATORY:** Please have the following tests done TODAY unless otherwise directed.  
Labs: \_\_\_\_\_

\_\_\_\_\_ **HCG:** (pregnancy test) *2-3 days before procedure. If needed, it can be done 1 hour before your report time, but this is not ideal.* It should be <72 hours from procedure. Please keep in mind lab is closed weekends, family days, and Federal holidays. Hysterectomy or no menstrual bleeding for 1 year are exempt and do NOT need pregnancy tests. Tubal ligations do need pregnancy testing.

\_\_\_\_\_ **Blood Thinner:** Talk to your blood thinner prescribing provider and notify them you will stop your medication for the amount of days indicated by the GI staff. If they prescribe a bridge, please let the GI office know.

\_\_\_\_\_ **PPI:** Please stop taking your medication for the number of days indicated by the GI staff.

**For REPORT TIME: GI Personnel will call you the business day prior to your procedure on \_\_\_\_\_ before 1200 with your assigned report time. If you have not been called by 1200, please call 702-653-3978.** GI Special procedures front desk is not open Sat/Sun, Federal Holidays, & Family Days. You will need to be reachable by phone (the best number given during the pre-op appt) the day before your procedure and the day of your procedure in case the procedure schedule changes.

1. Staff may only speak to the patient, or a person deemed legal as a current power of attorney in the medical record.
2. If the patient does not speak English, they will need to have someone to translate instructions with. (Speakerphone with patient and translator is fine)
3. Drivers must be available for the full day in case the procedure time is changed to either earlier or later, or the cases run late. The driver will have to stay in the building. We recommend that the driver has a cell phone. If not, please plan to have the driver remain in the waiting area during the procedure. This allows the staff to easily contact your driver. If the driver must leave the waiting area, please limit it to less than 10 min.

Phone numbers if you need help on the DAY OF YOUR PROCEDURE: 702-653-3978 / 702-653-3495 (ex. running late, need to cancel, etc.). They open at 0700.

## Double (Colonoscopy and EGD) Procedure Instruction Sheet: Please read before your procedure.

- **Patients with diabetes:** Check your blood sugar more often. If you feel low, treat with a sugared beverage from the list below. Check your blood sugar the morning of the procedure and call 653-3495 (open at 0700) with questions if < 70 or > 250.

**Insulin:** Rapid-/intermediate-acting: No change or follow sliding scale.

Long-acting: Take ½ dose of evening insulin or hold.

Metformin/Janumet: Take as directed the day prior to procedure. Do not take on day of procedure.

### **Other diabetes/weight loss medications:**

If you are taking any of these medications below for diabetes, talk to your prescribing provider and notify them it is recommended you stop \_\_\_\_\_ for 1 day/week. Failure to follow these instructions can result in the anesthesia provider canceling your procedure. To prevent high blood sugar your provider may prescribe a bridge, if they do please let the GI office know.

- Dulaglutide (Trulicity)
- Semaglutide (Ozempic/Wegovy/ Rybelsus)
- Tirzepatide (Mounjaro)
- Exenatide (Byetta/Bydureon)
- Liraglutide(Saxenda/Victoza)
- Lixisenatide (Adlyxin)

- **Jardiance:** Should be held for 3 days prior to procedure.
- Do not consume alcohol or use tobacco or marijuana products for at least 24 hours prior to your procedure.
- **Medications:** **On the day of the procedure, please take ONLY your inhalers, blood pressure, heart medication, and/or thyroid medication in the morning, with a sip of water, only enough to swallow the pill. If you use inhalers, please bring them with you on the day of your procedure.**
  - **Blood thinners (other than aspirin):** Medication \_\_\_\_\_ stop \_\_\_ days prior to procedure.
  - **PPI:** Please stop taking \_\_\_\_\_ for \_\_\_\_\_ days prior to your procedure.
  - **Iron medication:** Do not take this medication the day before your procedure.
  - **Phentermine:** Stop Phentermine 7 days prior to the procedure.
  - Please hold all **NSAID** medication such as naproxen/Aleve, ibuprofen/Motrin/Advil, meloxicam/Mobic, etc. for **5 days prior to your procedure**, if possible. You can use Tylenol to treat pain.

## **CLEAR LIQUID DIET-All Day the Day before procedure**

**NOTHING that is **RED** or **PURPLE** in color.**

**Orange/Green/Blue/White/Yellow flavors are fine.**

- Soda (yellow, clear, or brown)
- Lemonade
- Water
- Kool Aid/Crystal Light
- Clear broth (NOT SOUP)
- Ice popsicles
- Gatorade
- Apple juice
- Coffee black or with sugar or artificial sugar (**NO creamer/dairy**)
- Tea with sugar or artificial sugar (**NO creamer/dairy**). Avoid raspberry tea if it is not brown in color.
- White grape or white cranberry juice
- Jell-O (no fruit chunks) **{this is ONLY allowed the day before the procedure}**

### **ESOPHAGOGASTRODUODENOSCOPY (EGD):**

- Follow the clear liquid diet the day prior to your procedure.
- Do not have any food or liquids after midnight aside from the prep. This includes water, chewing of gum, and sucking on hard candy.



## 5 Days Before

- STOP eating nuts and seeds (includes cucumber, pickle, tomato, zucchini, etc.)
- Avoid NSAIDs (such as: Motrin, Ibuprofen, Meloxicam, Naproxen)



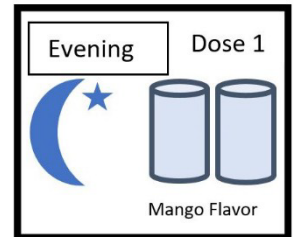
No Red or Purple Liquids

## Day Before Procedure

### **CLEAR LIQUID DIET ALL DAY LONG. No Solid Food.**

No Red or Purple Liquids



1. Drink lots of clear liquid throughout the whole day. \*see list on previous page\*
2. Take Medication like normal unless otherwise directed. \*See "Medication" on previous page\*
3. {Optional} Breakfast: Drink 2 liquid shakes (Ensure/Boost/Glucerna/Slim fast/Premier Protein) before 10:00 am. Only Chocolate or Vanilla Flavor.
4. **5 PM - 6PM:** Drink Dose 1 of your prep. Fill jar to fill line with cold water (no ice), pour in dose 1 packet, mix, and drink over 30 minutes. Fill empty jar to fill line with cold water again and drink over 30 minutes.
5. The prep will give you diarrhea. Continue hydrating by drinking clear liquids until bedtime or midnight.
6. **Midnight: Nothing by Mouth.** This includes chewing gum, tobacco, sucking on hard candy, and water until you start Dose 2 in the morning.



## Day of Procedure

1. **If your check in time is after 1200**, you may have a clear liquid breakfast of 8oz fluid (NO JELLO)
2. Start Dose 2 of prep **4 hours** before your check in time. Fill jar to fill line with cold water, pour in both dose 2 packets, mix, and drink over 30 minutes. Fill empty jar to fill line with cold water again and drink over 30 minutes **EXCEPT last 3-4 oz. of water.** Save to drink with Simethicone pills.
2. Chew and swallow all Simethicone tablets (4 or 6 tablets of Gas-X medication) with the last 3-4 oz. of your saved prep water.
3. 20 min after finishing the prep, please take **ONLY** medication for your lung, heart, and thyroid with a sip of water. Otherwise, HOLD rest of your medication. It can be taken after your procedure.
4. **NOTHING ELSE BY MOUTH** (includes gum, tobacco, clear fluids, and water).
5. Look at your final bowel movement. The nurse will want to know the color.

## **PLEASE READ AND FOLLOW THESE IMPORTANT INSTRUCTIONS PRIOR TO YOUR PROCEDURE**

1. You may take a bath/shower the evening before or the morning of your procedure. Do not apply lotions or skin care products to your skin after bathing (deodorant is okay). Brush your teeth, but do not swallow the water. Do not wear make-up and remove regular fingernail polish. Gel polish may stay on, but choose light colors if possible. If you are menstruating, inform the check in nurse on the day of your procedure. Please bring your preferred type of pad/tampon with you. **You must bring your military ID card with you.**
2. The staff will complete a safety check prior to beginning your procedure. This includes a patient identification process, verification of procedure site, and a time-out prior to procedure.
3. Please leave all valuables at home. All jewelry must be removed prior to your procedure, this includes body piercings. If you wear contact lenses, glasses, or dentures please bring a container for safe keeping.
4. A gown and slipper socks will be provided for you. You cannot wear personal clothing in the procedure room. Wear loose fitting pants with elastic or drawstring waist since you may feel bloated after the procedure.
5. This is an elective procedure. Your doctor wants you to be healthy to proceed with the procedure. If there is any change in your physical condition, such as a cold, cough, fever, rash, severe congestion/inability to breathe through your nose, new cardiac/heart symptoms, or you start new medications or antibiotics, please notify the nurse as soon as the change occurs. The nurse and/or MD will determine if it is safe for you to continue. If needed, the nurse can help you reschedule according to your symptoms at an appropriate time period from when you feel well again. Maximum reschedule attempts is 3.
-  6. Due to changes in the procedure schedule, you must be available by phone prior to your report time. Make sure we have your current phone number to reach you (home, cell, work). **YOUR REPORT TIME IS NOT THE TIME OF YOUR PROCEDURE!** Parking lot 5, Entrance 3 (near pharmacy), and Elevator A are closest to GI lab. If you park in ER, walk down the long hallway to Elevator B, 2<sup>nd</sup> floor, and then turn right to go to GI lab / Same Day Surgery desk.
7. **You may have to wait longer than expected.** Procedure times are based on the doctor's best estimate. There is a television and magazines to read while you are waiting in the GI waiting room. You may bring a book or magazine with you into the pre-procedure check in area. We suggest that your driver have a cell phone available to them the day of your procedure in case the staff needs to reach them if they choose to leave the waiting area to go to another part of the hospital. **In the event that your recovery is delayed, your doctor may admit you overnight.**
8. Please note small children are not to be left unattended in the waiting room area at any time. Please make arrangements for their care.
9. **You cannot drive yourself home after your procedure. You MUST arrange for a responsible adult (18 years or older) to drive you home.** If you do not have a driver, your procedure **WILL BE CANCELLED.** Someone must be available to you for 24 hours after your procedure because you may have impaired judgment after being sedated. Stay at home and rest for the remainder of the day. **You may not drive, drink alcohol, operate complex equipment, make any important/legal/financial decisions or sign legal documents for 24 hours after your procedure.** For your planning purposes, you will need the full day of procedure and ½ a day after procedure off of work / appointment free. Your driver will need to have between 0645-1500 free the day of your procedure.
-  10. After your procedure, while you are in recovery, the staff will give you and/or your caregiver your discharge information. Your driver will sign your discharge paperwork.
11. Management of any discomfort after the procedure is important. You will be asked your pain on a scale of 0-10. # 0 is no pain, #10 is the worst possible pain. Let the nurses know if you are having any pain, nausea or vomiting so the nurse can assist you in relieving any discomfort before you leave the procedure area.

**Questions/Cancellations:** **Nurse in the GI Clinic- (702) 653-3691.** Please provide as much advanced notice as possible should cancellation or reschedule become necessary. Reschedules will be completed at the next available appointment slot which could be approximately 2-6 weeks out.

**Medical Care.** Patients have the right to quality care and treatment that is consistent with available resources and generally accepted standards, including timely access to specialty care and to pain assessment and management.

**Respectful Treatment.** Patients have the right to considerate and respectful care, with recognition of personal dignity, psychosocial, spiritual, and cultural values, and belief systems.

**Privacy and Security.**

(a) Patients have rights, defined by Federal law, in accordance with References (m) through (n), to reasonable safeguards for the confidentiality, integrity, and availability of their protected health information, and similar rights for other personally identifiable information, in electronic, written, and spoken form. These rights include the right to be informed when breaches of privacy occur, to the extent required by Federal law.

(b) Limits of confidentiality. Patients have the right to be informed in advance of making a sensitive disclosure during a health care encounter that in certain circumstances the provider is mandated to make a notification to an individual, agency or service, without requiring the patient's permission or consent to make the provider notification. For example, types of sensitivity disclosures may include but are not limited to sexual assault or harassment, domestic violence substance misuse or abuse, or intent to harm self or others.

**Provide Information.** Patients have the right to receive information about the individual(s) responsible for, as well as those providing, his or her care, treatment, and services. The MTF will inform the patient of the names, and as requested, the professional credentials of the individual(s) with primary responsibility for, as well as those providing, his or her care, treatment, and services. Know what patient support services are available, i.e., pastoral care, an interpreter if you do not speak English, etc.

**Explanation of Care.** Patients have the right to an explanation concerning their diagnosis, treatment options, procedures, and prognosis in terms that are easily understood by the patient or responsible caregiver. The specific needs of vulnerable populations in the development of the patient's treatment plan shall be considered when applicable. Such vulnerable populations shall include anyone whose capacity for autonomous decision-making may be affected. When it is not medically advisable to give such information to the patient due to vulnerabilities or other circumstances, the information should be provided to a designated representative.

**Informed Consent.** Patients have the right to any and all necessary information in non-clinical terms to make knowledgeable decisions on consent or refusal for treatments, or participation in clinical trials or other research investigations as applicable. Such information is to include any and all complications, risks, benefits, ethical issues, and alternative treatments as may be available. Patients will be informed that information on TRICARE covered services, including clinical trials, is available on the TRICARE.mil website at: [www.tricare.mil](http://www.tricare.mil).

**Filing Grievances.** Patients have the right to make recommendations, ask questions, or file grievances to the MTF Patient Relations Representative or to the Patient Relations Office. If concerns are not adequately resolved, patients have the right to contact The Joint Commission (TJC) at 1-800-994-6610, or by submitting a concern or complaint online at [https://www.jointcommission.org/report\\_a\\_complaint.aspx](https://www.jointcommission.org/report_a_complaint.aspx).

**Research Projects.** Patients have the right to know if the MTF proposes to engage in or perform research associated with their care or treatment. The patient has the right to refuse to participate in any research projects and withdraw consent for participation at any time.

**Safe Environment.** Patients have the right to care and treatment in a safe environment.

**MTF Rules and Regulations.** Patients have the right to be informed of the MTF rules and regulations that relate to patient or visitor conduct.

**Transfer and Continuity of Care.** When medically permissible, a patient may be transferred to another MTF or private sector facility/provider only after he or she has received complete information and an explanation concerning the needs for and alternatives to such a transfer.

**Charges for Care.** Patients have the right to understand the charges for their care and their obligation for payment.

**Advance Directive.** Patients have the right to make sure their wishes regarding their healthcare are known even if they are no longer able to communicate or make decisions for themselves.

**Limits of Confidentiality.** Patients have the right to be informed in advance of making a sensitive disclosure during a health care encounter that in certain circumstances the provider is mandated to make a notification to an individual, agency, or service, without requiring the patient's permission or consent to make the provider notification. For example, types of sensitive disclosures may include but are not limited to sexual assault or harassment, domestic violence, substance misuse or abuse, or intent to harm self or others."

**Chaperones.** Patients have the right to a chaperone during both inpatient and outpatient clinical visits, specifically during sensitive physical exams and treatments. Patients have a right to request a different chaperone (for example, different gender); when feasible, staff will try to accommodate\_ request or assist with rescheduling visit. There may be emergency situations that require an exception to a chaperone where delays in care could jeopardize life.