

# Sutab Bowel Preparation Instructions

These instructions are for patients **WITHOUT** severe kidney and heart disease. If you have severe kidney or heart disease, please call our office for alternative instructions: **303.604.5000**

This bowel preparation requires a little organization but is an extremely important part of your colonoscopy to ensure you have the highest quality exam. Bowel preparation starts days prior to your procedure, as you need to stop taking certain medications or supplements and change your diet. **If you do not follow these directions, your colonoscopy may be cancelled.** Please note, it is your responsibility to contact your insurance company about coverage and cost for your upcoming colonoscopy procedure. Sometimes, colonoscopies result in a cost to the patient. You will need to tell your insurance company when your last colonoscopy was and if you are performing the colonoscopy because you have symptoms, a personal history or family history of colon cancer or polyps.

## Key Information:

- **DO NOT EAT** any solid food the **ENTIRE DAY** before your colonoscopy. Drink only clear fluids.
- Bring a list of all your **MEDICATIONS** (including over-the-counter medications), photo ID, insurance card, co-pay/co-insurance/deductible with you to your procedure.
- **DO NOT** bring unnecessary belongings. We are not responsible for lost or misplaced items.
- Stop all clear liquids two hours before your procedure arrival time.
- Your colon must be **COMPLETELY EMPTY** so that your doctor can clearly view your colon. Follow all instructions in this handout **EXACTLY** as they are written. If you have completed your prep, and your stools are not clear or yellow, please contact our office at 303-604-5000, even if after hours.

## Transportation on the day of your procedure:

- A responsible adult **MUST BE PRESENT** (18 years or older) with you at check-in before your procedure and **MUST BE ABLE** to pick you up **IMMEDIATELY** when you are discharged. You are **NOT ALLOWED** to drive, take a taxi or bus, or leave the Endoscopy Center alone. If you do not have a responsible driver with you to take you home, your procedure **WILL BE CANCELLED**.
- Because of the sedation, you are **NOT ALLOWED** to use a bus, taxi, Uber/Lyft, Access-a-Ride, walk home, etc. alone.

## Medications:

- **Blood thinners:** including Coumadin (warfarin), Plavix (clopidogrel), Ticlid (ticlopidine hydrochloride), Brilinta (ticagrelor), Aggrastat (tirofiban), Agrylin (anagrelide), Xarelto (rivaroxaban), Pradaxa (dabigatran), Eliquis (apixaban), Lovenox (low molecular weight heparin), Innohep (heparin) or Effient (Prasugrel), You must follow the instructions provided by our nurses.
- **Diabetes/Weight Loss medication:** See instructions below.
- **ACE Inhibitor Blood Pressure medications:** Do NOT take medications ending 'pril' the day of your procedure. Examples: lisinopril, benazepril, ramipril, captopril, enalapril, quinapril
- **ARB Blood Pressure medications:** Do NOT take medications ending in 'sartan' the day of your procedure. Examples: losartan, irbesartan, candesartan, valsartan, telmisartan, olmesartan
- **Diuretics:** Do NOT take "water" pills the day of your procedure. Examples: furosemide (Lasix), bumetanide (Bumex), torsemide, hydrochlorothiazide (HCTZ), spironolactone (Aldactone), indapamide, chlorothiazide, chlorthalidone, metolazone
- **All other medications:** Including aspirin, should be taken the day of the exam with a sip of water.

## Weight Loss/Diabetes Medications:

- **GLP-1 Agonists:** including Mounjaro (tirzepatide), Zepbound (tirzepatide), Trulicity (dulaglutide), Victoza, Saxenda (liraglutide), Adlyxin (lixisenatide), Ozempic, Wegovy (semaglutide subcutaneous), Bydureon BCise (exenatide extended-release), Byetta (exenatide), Rybelsus (semaglutide tablet), Stop the oral or injectable medication one week prior to your procedure.

- **Anorectics:** including Adipex-P, Lomaira, Suprenza (phentermine hydrochloride), Qsymia (phentermine hydrochloride/topiramate), Stop 5 days prior to your procedure.

**If you have diabetes, follow these instructions:**

- **Long-Acting Insulins** (ex. Lantus, Basaglar, Semglee, Toujeo, Insulin Glargine): Decrease basal rate by ½ the day before and the day of your procedure.
- **Rapid-Acting and Regular Short-Acting Insulin** (ex. Lispro, Humalog, Admelog, Regular Insulin): If your blood sugar is high and you need to take a correction, take ½ or 50% of your usual correction. This applies to the day before and the day of your procedure.
- **Insulin Pump:** Decrease basal rate by ½ the day before and the day of your procedure. Do not administer bolus doses.
- **Other Diabetic Oral & Injectable Medications** (ex. Metformin, Glipizide, Sulfonylureas, Tradjenta, Dipeptidyl Peptidase IV (DPP IV) Inhibitors, Januvia, Janumet, Sodium-Glucose Cotransporter-2 (SGLT2) Inhibitors): Do not take the day before or the day of your procedure.
- **Check your blood sugar at same intervals as usual, and additionally, if needed:** If your blood sugar is less than 60, please take glucose tablets at any time before your procedure with a sip of water.

## Checklist to Ensure Proper Bowel Preparation

To ensure the proper completion of your colonoscopy preparation, we strongly suggest that you **PRINT OUT** this document and check off each of the instructions as you complete them. This will greatly help you in following the detailed instructions and help ensure you receive a proper colonoscopy.

**GROCERY STORE LIST:** Purchase the items below at least five days before your procedure:

- 1 - Sutab Bowel Kit
- 4 - Gas-X tablets (simethicone) containing 125 mg of simethicone each.

**5 days** before your colonoscopy:

- Make sure you have purchased your bowel preparation items!** (listed above!)
- DO NOT** take medications that stop diarrhea such as Imodium (loperamide), Pepto-Bismol (bismuth subsalicylate) or Lomotil (diphenoxylate/atropine).
- DO NOT** take fiber supplements such as Metamucil, Citrucel, Psyllium or Benefiber.
- DO NOT** take products that contain iron such as multi-vitamins or iron supplements.

**3 days** before your colonoscopy:

- Discontinue high-fiber foods** – Please see Low Fiber Diet tips attached.

**Procedure Cancellation Notice Requirements:**

- Procedure cancellations must be made **three (3) business days prior to your appointment.**
- Failure to provide the required advance notice will result in a **\$150 Total Cancellation Fee.** (\$50 Physician cancellation fee from Gastroenterology of the Rockies + \$100 Facility cancellation fee from the endoscopy center).

# Checklist: One Day Before Your Colonoscopy

- No marijuana on the day of your procedure.**
- If you have **diabetes**, please see Diabetes instructions on page 1.
- Only drink clear liquids the **ENTIRE DAY** before your procedure. **NO solid foods.**
- Drink at least 8-ounces of **clear liquids EVERY HOUR** after waking up.

The charts below will show you examples of what you can and cannot drink:

## CLEAR LIQUIDS - YOU CAN DRINK:

Gatorade, Pedialyte, Powerade, Kool-Aid
Gatorade G2, Propel, Crystal Light
Popsicles
Jell-o, Juice without Pulp (ex. Apple Juice)
Black Coffee
Tea, Water
Clear Sodas (ex. Sprite, Ginger Ale)
Sparkling water

## DO NOT DRINK:

<b>NO</b> Red or Purple Liquids
<b>NO</b> Milk or Non-dairy Creamers
<b>NO</b> Alcohol
<b>NO</b> Broth or soup
<b>NO</b> Juice with Pulp (ex. pineapple juice)
<b>NO</b> Liquid you cannot see through
<b>NO</b> Apple Sauce
<b>NO</b> Smoothies

### 5:00 pm - the evening before your procedure:

- 5:00 pm:** Take two tablets of simethicone/Gas X

### 6:00 pm - the evening before your procedure:

- Open one bottle of 12 tablets.
- Fill the provided container with 16 ounces of water (up to the fill line).
- Swallow each tablet with a sip of water and drink the entire amount of water over 20 minutes.
- Approximately one hour after the last pill is ingested, fill the provided container again with 16 ounces of water (up to the fill line), and drink the entire amount over 30 minutes.
- Approximately 30 minutes after finishing the second container of water, fill the provided container again with 16 ounces of water (up to the fill line), and drink the entire amount over 30 minutes.
- Before going to sleep:** Take two additional simethicone tablets.
- Set your alarm!** Make sure to wake up at least **4 hours** before your procedure check-in time.
- Discontinue** mints, gum, hard candy, and chewing tobacco.

### 4 hours - before your procedure check-in time - this may be in the middle of the night or early AM:

- Open the second bottle of 12 tablets.
- Fill the provided container with 16 ounces of water (up to the fill line).
- Swallow each tablet with a sip of water and drink the entire amount of water over 20 minutes.
- Approximately one hour after the last pill is ingested, fill the provided container again with 16 ounces of water (up to the fill line), and drink the entire amount over 30 minutes.
- Approximately 30 minutes after finishing the second container of water, fill the provided container again with 16 ounces of water (up to the fill line), and drink the entire amount over 30 minutes.

### 2 hours - before your procedure check-in time

- 2 hours before check-in: STOP DRINKING ALL LIQUIDS!**

Congratulations, you have completed your prep!

# Low Fiber Diet

A low fiber diet limits the amount of food waste that must move through the large intestine.

## Approved Foods

### Bread, cereal, rice, and pasta

- White bread, rolls, biscuits, croissants, melba toast
- Waffles, French toast, pancakes
- White rice, noodles, pasta, and macaroni
- Peeled cooked potatoes
- Plain crackers, saltines
- Farina, cream of rice
- Puffed rice, rice krispies, corn flakes, special K

### Meat

- Ground (beef, chicken, turkey)
- Lamb
- Pork
- Veal
- Fish
- Poultry

### Vegetables

- Cooked carrots
- Asparagus tips
- Green or wax beans
- Pumpkin
- Lima Beans

### Fruits

- Bananas, honeydew, cantaloupe

### Milk/Dairy

- Milk-plain or flavored
- Yogurt, custard, ice cream, cheese, cottage cheese

### Fats, snacks, sweets, condiments, and beverages

- Margarine, butter, oils
- Mayonnaise
- Sour cream
- Dressing
- Plain gravy
- Sugar
- Clear jelly
- Honey
- Syrup
- Spices/cooked herbs
- Bouillon, broth
- Coffee, tea, carbonated drinks
- Plain cake, cookies
- Gelatin, plain pudding, popsicles
- Hard candy or pretzels
- Mustard, ketchup

## Foods to Avoid

- Breads or rolls with nuts, seeds or fruit: whole wheat, pumpernickel, rye, corn bread, chia seeds
- Brown or wild rice, buckwheat, quinoa
- Vegetables (raw or steamed, with seeds) - winter squash, peas, broccoli, brussel sprouts
- Cabbage, onions, cauliflower, sprouts, baked beans, peas, corn, potatoes with skin
- Sauerkraut
- Fruits (raw or dried) - all berries, figs, dates/raisins, prunes, prune juice
- Yogurt with nuts or seeds
- Processed meat - hotdogs, sausage, cold cuts, tough meat with gristle

# Colonoscopy Costs

General guidelines for colonoscopy costs, contact your insurance for exact benefits & costs.

## Typically FREE

### Screening or "Preventative" Colonoscopy

Typically, insurance covers **100% of the costs**. Performed on asymptomatic patients to test for the presence of colorectal polyps or cancer.

Criteria for patients:

1. **45** years of age or older
2. **NO** gastrointestinal symptoms: e.g., abdominal pain, diarrhea, rectal bleeding
3. **NO** screening colonoscopy within the last 10 years
4. **NO** personal history of colon polyps, colon cancer or gastrointestinal disease

Q:

If you **had colon polyps** in the past

If you **have** gastrointestinal symptoms

If you **have** personal history of colon cancer or colon polyps

## Typically NOT Fully Paid

### Diagnostic Colonoscopy

Performed on patients to evaluate abnormal findings or symptoms.

**Patient is responsible for any copay, coinsurance, or deductible.**

**\* If you had colon polyps in the past, your colonoscopy is diagnostic.**

Criteria for patients:

1. **Had colon polyps** in the past
2. **Have a gastrointestinal disease**
3. **Have gastrointestinal symptoms:** e.g., abdominal pain, diarrhea, rectal bleeding, or abnormal imaging of the colon (CT scan or MRI)

A:

Then a **Diagnostic Colonoscopy**

Then a **Diagnostic Colonoscopy**

Then a **Diagnostic Colonoscopy**

**Contact your insurance** to determine your specific benefits and possible out of pocket costs (deductible, coinsurance, facility copay) for the procedure. It is important to inquire about both the physician and facility costs, discuss any symptoms and/or personal history (including prior colonoscopy dates and findings), and family history related to your procedure.

