



Island Digestive Disease Consultants  
400 W. Main Street Suite 300 Babylon, NY 11702  
P: 631-321-6400 F: 631-321-2969

DATE: \_\_\_\_\_ Dr. \_\_\_\_\_

BOWEL PREP: \_\_\_\_\_

**If you need to **cancel** or **reschedule** your procedure, please call our office at **631-321-6400**.**

## **COLONOSCOPY INSTRUCTIONS**

### **□ Island Digestive Health Center:**

471 Montauk Highway West Islip, NY 11795 - 631-376-2260

**ARRIVAL TIME:** CONTACTS YOU 2 DAYS PRIOR TO PROCEDURE (ALSO SENDS TEXT MESSAGES)

### **□ Good Samaritan Hospital:**

1000 Montauk Highway West Islip, NY 11795 - 631-376-4808

**ARRIVAL TIME:** CONTACTS YOU THE EVENING PRIOR TO PROCEDURE **(AFTER 4PM)**

**\*You will be canceled/rescheduled if you do not stop your GLP1/ SGLT2 medications (see next page) or have your medical clearances in time\***

Please advise the office if you have any new health conditions and/or taking new medications between your last office visit and procedure. If you should have any cold or viral symptoms (congestion, stuffy nose, cough, etc.) within 48 hours of the procedure, please contact our office to reschedule.

**\*\*\* YOU CANNOT TAKE AN UBER OR ANY FORM OF PUBLIC TRANSPORTATION THE DAY OF YOUR PROCEDURE. SOMEONE KNOWN TO YOU MUST GIVE YOU A RIDE. \*\***

## **Before your colonoscopy:**

- Please secure your bowel preparation from the pharmacy. The pharmacy may give you an alternative prep depending on your insurance coverage. It does not need to be refrigerated.
- Purchase 4 Gas-X (Simethicone 125mg) tablets (over the counter)
- Secure your ride - **You will need someone known to you to transport you home.** You **CANNOT** drive for the rest of the day. Public Transportation to your home is not acceptable unless a relative or friend accompanies you. Medications are given during the procedure to sedate you. After the procedure, you may feel awake and alert. However, your judgment, your reaction time and your reflexes may be impaired for a longer period. You should not return to work after the procedure for the rest of the day.
- Review the medications list below to make yourself aware if you need to stop taking something
- Please **NO CORN 3 days prior.**
- **DO NOT FOLLOW INSTRUCTIONS ON PREP BOX, PLEASE FOLLOW OUR INSTRUCTIONS ON THE NEXT PAGE!!!!**

## **Medications:**

- No blood thinners 3-5 days prior: **XARELTO, COUMADIN, PLAVIX, ELIQUIS, WARFARIN, PRADAXA, EFFIENT, ETC.**  
**PLEASE** check with your cardiologist or ordering doctor before stopping these medications. You **do not** need to stop Aspirin for this procedure.
- **DO NOT STOP YOUR BLOOD PRESSURE MEDICATION!** Take as scheduled. If you take it in the morning, please do with a tiny sip of water.
- **DO NOT** take a Diuretic the morning of your procedure.
- No Iron or Arthritis medication **5 days prior** (including multivitamins)
- Stop Fiber supplements 3 days before your procedure (pills, powder, gummies)
- **Diabetic Medication:** Take half your normal dose the day before and none the day of. PLEASE consult with your PCP or Endocrinologist regarding specifics

### **\*IF YOU ARE TAKING ANY SGLT2 INHIBITORS\*:**

**You must HOLD the medication for 3 days before the procedure**

|                         |                           |                          |          |
|-------------------------|---------------------------|--------------------------|----------|
| Farxiga (Dapagliflozin) | Jardiance (Empagliflozin) | Invokana (Canagliflozin) | Synjardy |
|-------------------------|---------------------------|--------------------------|----------|

### **\*IF YOU ARE TAKING ANY GLP-1 MEDICATIONS\*:**

**You must HOLD the medication for 1 week before the procedure**

|                                  |                               |
|----------------------------------|-------------------------------|
| Mounjaro, Zepbound (Trizepatide) | Ozempic, Wegovy (Semaglutide) |
| Trulicity                        | Rybelsus                      |
| Victoza, Saxenda, Byetta         | Bydurean, Adlyxin             |

## **ONE DAY BEFORE your colonoscopy (PREP DAY)**

- **You MUST be on a CLEAR LIQUID DIET all day - NO SOLID FOODS UNTIL AFTER YOUR PROCEDURE (NO BREAKFAST, NO LUNCH, NO DINNER!)**
  - **CLEAR LIQUIDS INCLUDE:** water, chicken broth, beef broth, vegetable broth, ice tea, lemonade, Gatorade, **black** coffee, hot tea, apple juice, Crystal Light, soda, **orange**, **lemon**, or **lime** Jell-O, ice-pops and Italian ices.
- **PLEASE DO NOT** have **ANYTHING** **red**, **blue** or **purple**, dairy products, creamers, milks, protein shakes, smoothies, orange juice or juice with pulp. (If you **cannot** see through it, you **cannot** have it)
- **Take 4 pills of Gas-X (Simethicone 125mg) at 11pm the night before the procedure**
- Prepping for a colonoscopy can be very dehydrating, please make sure to drink plenty of liquids throughout the day to keep hydrated.
- Please follow the instructions below for your bowel preparation.
- **Please stop all your liquids 3 hours prior to your procedure.**

**PLEASE SEE FOLLOWING PAGES FOR BOWEL PREPARATION**  
**DO NOT FOLLOW INSTRUCTIONS ON PREP BOX, PLEASE FOLLOW OUR**  
**INSTRUCTIONS ON THE NEXT PAGE!!!!**

## **The DAY OF your colonoscopy**

- **NO SOLID FOODS!**
- **STOP** all liquids, **INCLUDING WATER!** If you don't, your procedure may be postponed or cancelled
- **NO CANDY, GUM, OR SMOKING (INCLUDES VAPING)**
- **DO NOT** apply any lotion to your skin
- **All female patients** are required to take a urine test at surgical facility to proceed with procedure
- Please bring your insurance card, photo ID & co-pay, if required, **and leave all valuables at home.**

**\*\*REMINDER: YOU WILL NEED A FAMILY MEMBER/FRIEND TO DRIVE YOU**  
**HOME\*\***

**PLEASE DO NOT FOLLOW INSTRUCTIONS ON THE BOWEL PREP BOX!**

*\*Please follow the instructions below\**

**THE FOLLOWING PREPS ARE TWO DOSES:**

Please follow the chart below to find out when you need to start prepping

| <b><u>PREP TIME CHART</u></b>                                                                          |
|--------------------------------------------------------------------------------------------------------|
| Arrival time between <b>6am-10am</b><br>1st dose: <b>2PM</b> 2nd dose: <b>12AM</b> (midnight)          |
| Arrival time between <b>10:15am or later</b><br>1st dose: <b>6PM</b> 2nd dose: <b>4AM</b> (morning of) |

**PLEASE NOTE: If your procedure is rescheduled, prep times may change. Please contact our office with any questions or concerns 631-321-6400.**

**SUPREP (TWO 6oz BOTTLES of LIQUID):**

\*Sodium sulfate, potassium sulfate, magnesium sulfate\*

- **Step 1:** Pour **ONE 6-ounce bottle** of SUPREP liquid into the mixing container.
- **Step 2:** Add cool drinking water to the 16-ounce line on the container.
- **Step 3:** Drink **ALL** the liquid in the container.
- **Step 4:** Drink **(2)** more 16-ounce containers of water over the next 1 hour

**For Second Dose – Repeat Steps 1-4**

**Take 4 pills of Gas-X (Simethicone 125mg) at 11pm the night before the procedure**

**SUTAB (TWO BOTTLES OF PILLS):**

- **Step 1:** Open 1 bottle of 12 tablets & fill the provided container with water to the 16oz line.
- **Step 2:** Take **ALL 12 TABLETS** with the water over 30 to 60 minutes. You may use more water to swallow the tablets if needed.
- **Step 3:** Drink **(2)** more 16-ounce containers of water over the next 1 hour

**For Second Dose – Repeat Steps 1-3.**

**Take 4 pills of Gas-X (Simethicone 125mg) at 11pm the night before the procedure**

**SUFLAVE (TWO 1 LITER BOTTLES of LIQUID):**

- **Step 1:** In the morning, mix 1 flavor packet into each bottle and fill with water, shake until all the powder is dissolved and refrigerate them until time to drink.
- **Step 2:** Start drinking one bottle at recommended time, drink 8oz every 15 minutes until finished.
- **Step 3:** Drink at least 16oz of water over the next 1 hour.

**For Second Dose – Repeat Steps 1-3.**

**Take 4 pills of Gas-X (Simethicone 125mg) at 11pm the night before the procedure**

## **BOWEL PREPS CONTINUED...**

### **TRILYTE/PEG-3350/GAVILYTE/GoLYTELY**

- In the morning, mix water into the 1 gallon. Keep in refrigerator until ready to use.
- At **2:00pm** you will start the **Trilyte prep**. Drink 1 glass (at least 8oz) every 15 minutes until it is finished.
- At **6:00pm**, you will take **4 Dulcolax** tablets.

**Take 4 pills of Gas-X (Simethicone 125mg) at 11pm the night before the procedure**

### **MIRALAX**

You will need: ONE **238 GRAM** bottle of **Miralax**, **TWO Dulcolax tablets** and a 64oz preferred drink (**NOT RED, BLUE OR PURPLE**)

- At **5:00PM**, mix the bottle of **MIRALAX (238g)** in the **64oz** of preferred drink. Make sure that the POWDER is well dissolved
- Drink one 8oz glass every 10-15 minutes until it is finished. Continue to drink as much clear liquid as possible until bedtime
- At **9:00PM** take the **2(TWO) DULCOLAX** tablets

**Take 4 pills of Gas-X (Simethicone 125mg) at 11pm the night before the procedure**

### **MOVIPREP – 2 doses**

1<sup>ST</sup> dose: 4PM

2<sup>ND</sup> dose: 9PM

- **Step 1:** Empty 1 Pouch A and 1 Pouch B into the disposable container and fill with you preferred clear liquid
- **Step 2:** The disposable container is divided by 4 marks, drink down to the next mark every 15 minutes (approx. 8oz) until you are finished
- **Step 3:** When you have finished drinking the prep, drink 16oz more of clear liquid to ensure adequate hydration and an effective prep

**For Second Dose – Repeat Steps 1-3.**

**Take 4 pills of Gas-X (Simethicone 125mg) at 11pm the night before the procedure**

If you have any questions about your preps, please do not hesitate to call our office 631-321-6400.

# **WHAT YOU NEED TO KNOW ABOUT INSURANCE COVERAGE WITH PROCEDURES**

## **Is this covered by my insurance?**

- ❖ Our Central Referral office will obtain prior authorization for the provider performing the procedure, but you should **ALWAYS** check with your insurance carrier **on what your patient responsibility is. This includes copayments, co-insurance, and deductibles.**
- ❖ **CPT CODES: COLONOSCOPY: 45380 ENDOSCOPY: 43239**
- ❖ If you have any questions about facility fees and benefits used, please call the location you are scheduled for.
  - **Island Digestive Health Center: 631-376-2260**
  - **Good Samaritan Hospital: 631-376-4808**
- ❖ **Is the anesthesiologist group covered by my insurance?**

(for procedures at **Island Digestive Health Center** only) please call Suffolk Anesthesia 631-849-1050 with any questions regarding anesthesia billing.

### **PLEASE BE AWARE A PROCEDURE CAN NOT BE CODED AS PREVENTATIVE/SCREENING IF YOU HAVE THE FOLLOWING:**

1. Any gastrointestinal symptoms as in diarrhea, rectal bleeding, abdominal pain, etc.
2. History of polyps
3. Positive testing, example: cologuard, abnormal CT scan
4. Biopsies performed

**\*\*UNDER NO CIRCUMSTANCES WILL A CHART OR BILL BE ALTERED FOR THE  
SOLE PURPOSE OF COVERAGE DETERMINATION (PREVENTATIVE VS.  
DIAGNOSTIC). THIS IS CONSIDERED INSURANCE FRAUD AND PUNISHABLE BY  
LAW.\*\***

All billing accounts from our office are handled by CHSLI. Contact 866-367-2901

Island Digestive Health Center is a separate entity and all billing is performed by SCA HEALTH. Contact 631-376-2260.