

ALBANY GASTROENTEROLOGY CONSULTANTS, PLLC
1375 Washington Avenue
Albany, New York 1220
518-533-5000

COLONOSCOPY NuLYTELY - GoLYTELY - TriLYTE - GaviLYTE MAC PREPARATION INSTRUCTIONS

Patient: <<Patient_Full_Name>> DOB: <<DOB>> Provider:

Procedure Date: Arrival Time: Procedure Time: **PROCEDURE TIME IS SUBJECT TO CHANGE.

Procedure Location: Ambulatory Surgery Center (ASC) 1375 Washington Ave., Suite 201 St. Peter's Hospital 315 South Manning Blvd Albany Medical Center 47 New Scotland Ave. A Building-4th Floor-A 405 Ellis Hospital – Bruggeman (Park in Nott Street Garage)

*****IF YOU TEST POSITIVE FOR COVID WITHIN 30 DAYS OF PROCEDURE, PLEASE CALL THE OFFICE.*****

One Week Prior to the Procedure: _____

1. Stop herbals, vitamins, and oral iron supplements. Begin low fiber diet.
 2. Arrange for a responsible adult to accompany you home after your procedure.
- You will be given sedation for your procedure and will not be allowed to drive yourself home.

Two Days Prior to the Procedure: _____

Obtain bowel prep products from your pharmacy: (**Prescription is required)

- One NuLYTELY kit or
- One GoLYTELY kit or
- One TriLYTE kit or
- One GaviLYTE kit

Two 125mg tablets of Simethicone (**NOT a prescription)

Stop any anti-inflammatory medications (Motrin, Advil, Ibuprofen). Celebrex and Tylenol are OK to use.

One Day Before the Procedure: _____

NO SOLID FOOD - NO ALCOHOL - CLEAR LIQUIDS ALL DAY -NO MARIJUANA USE 24 HRS PRIOR (Procedure will be cancelled)

1. Drink an extra 8 ounces of clear liquid every hour while awake. Gatorade is preferred. If needed, you may substitute Crystal Light Lemonade or any other clear liquid (no red or purple).
2. **At 5PM** mix NuLYTELY or GoLYTELY or TriLYTE or GaviLYTE powder thoroughly with 4 liters of water (to the fill line). Take two 125mg tablets of Simethicone. Drink 8 ounces of the mixture every 10 to 15 minutes until one-half of the solution is consumed. Place the remainder of the solution in the refrigerator.
3. You are encouraged to drink clear liquids until you go to bed.
4. You may apply a petroleum-based or diaper rash product to the rectal area if you experience discomfort from frequent stools.
5. Confirm that you have a responsible adult to accompany you home after your procedure.

The Day of the Procedure: _____

NO SOLID FOOD - NO ALCOHOL

5-6 hours before the Procedure: _____

Drink the remaining half of the NuLYTELY or GoLYTELY or TriLYTE or GaviLYTE solution. Drink 8 ounces every 10 minutes until the solution is gone

4 hours before the Procedure: _____

Stop drinking and do not have anything else by mouth until after your procedure. You may take essential morning medications with a sip of water.

After the procedure:

You may eat your usual diet unless otherwise instructed. Drink 8 ounces of liquid at least 6 times before retiring for the night.

ATTENTION:

If you are scheduled for a procedure at one of the local Hospitals or upstairs at the Ambulatory Surgery Center,

PLEASE NOTE: You **MUST** bring your insurance card(s) and photo identification.

Also, your insurance company will most likely apply a copayment, deductible and/or coinsurance.

If you have questions as to the specific dollar amount for which you will be responsible, please contact your insurance company.

**** If you have a change of insurance, between the time your appointment was made and the procedure, please contact Albany Gastroenterology Consultants, PLLC's billing office at 518-533-5000.

CANCELLATION / NO SHOW POLICY

Thank you for choosing Albany Gastroenterology Consultants for your gastroenterology healthcare. We look forward to partnering with you in meeting your healthcare needs.

Your appointment with us is very important. If you are unable to keep your appointment, please contact our office at 518-533-5000 at least 24 hours prior to your scheduled appointment time. We reserve the right to charge a fee for same day cancellations or no show appointments.

The **FIRST** no show or same day cancellation – **NO CHARGE**. We will call you to reschedule the appointment you didn't show for or cancelled the same day.

The **SECOND** no show or same day cancellation you will be charged a \$50.00 fee which must be paid prior to making any additional appointments.

The **THIRD** no show or same day cancellation you will be discharged from the practice.

If you have any questions regarding your appointments, please do not hesitate to contact our office.

We appreciate you choosing Albany Gastroenterology Consultants for your healthcare needs.

CLEAR LIQUIDS

BEVERAGES:

- **CLEAR JUICES: APPLE JUICE, WHITE CRANBERRY, WHITE GRAPE, LEMONADE, LIMEADE, CITRUS JUICES (STRAINED)**
- **HERBAL TEA, TEA, COFFEE (WITHOUT CREAM/MILK), ICED TEA, ICED COFFEE**
- **NO DAIRY PRODUCTS**
- **GATORADE, SPORTS DRINKS, CRYSTAL LIGHT, SNAPPLE – NO RED OR PURPLE**
- **CLEAR CARBONATED BEVERAGES: GINGERALE, SEVENUP, SPRITE, MINERAL/PLAIN WATER, FLAVORED WATERS – NO RED OR PURPLE**

SOUPS: CLEAR BROTH, BOULLION, CONSOMME (ALSO FAT FREE), STRAINED VEGETABLE BROTH

DESSERTS: POPSICLES, HARD CANDIES, FLAVORED GELATIN, FRUIT ICE, AND ITALIAN ICE (WITHOUT FRUIT), NOTHING RED OR PURPLE

NO ALCOHOL OF ANY KIND DURING THE PREPARATION

LOW FIBER DIET

A low fiber diet is for people who need to rest their intestinal tract. A low fiber diet limits the amount of food waste that has to move through the large intestine.

Foods Recommended	Foods to Avoid
<p>Breads, Cereal, Rice and Pasta:</p> <ul style="list-style-type: none"> ● white bread, rolls, biscuits, croissant, melba toast ● waffles, French toast, and pancakes ● White rice, noodles, pasta, macaroni and peeled cooked potatoes ● plain crackers, Saltines ● cooked cereals: farina, Cream of Rice ● cold cereals: Puffed Rice, Rice Krispies, Corn Flakes and Special K 	<p>Breads, Cereal, Rice and Pasta:</p> <ul style="list-style-type: none"> ● breads or rolls with nuts, seeds or fruit ● whole wheat, pumpernickel, rye breads and cornbread ● potatoes with skin, brown or wild rice, and kasha (buckwheat)
<p>Vegetables:</p> <ul style="list-style-type: none"> ● tender cooked and canned vegetables without seeds: carrots asparagus tips, green or wax beans, pumpkin, spinach and lima beans 	<p>Vegetables:</p> <ul style="list-style-type: none"> ● raw or steamed vegetables, lettuce, salad fixings ● vegetables with seeds ● sauerkraut ● winter squash, peas, broccoli, Brussels sprouts, cabbage, onions, cauliflower, baked beans, peas and corn
<p>Fruits:</p> <ul style="list-style-type: none"> ● strained fruit juice ● canned fruit, except pineapple ● ripe bananas ● melons 	<p>Fruits:</p> <ul style="list-style-type: none"> ● prunes and prune juice ● raw or dried fruit ● all berries, figs, dates and raisins
<p>Milk/Dairy:</p> <ul style="list-style-type: none"> ● milk, plain or flavored ● yogurt, custard and ice cream ● cheese and cottage cheese 	<p>Milk/Dairy:</p> <ul style="list-style-type: none"> ● yogurt with nuts or seeds
<p>Meat, Poultry, Fish, Dry Beans, and Eggs:</p> <ul style="list-style-type: none"> ● ground, well cooked tender beef, lamb, ham, veal, pork, fish, Poultry, and organ meats ● eggs ● peanut butter without nuts 	<p>Meat, Poultry, Fish, Dry Beans:</p> <ul style="list-style-type: none"> ● tough, fibrous meats with gristle ● dry beans, peas, and lentils ● peanut butter with nuts
<p>Fats, Snack, Sweets, Condiments, and Beverages:</p> <ul style="list-style-type: none"> ● margarine, butter, oils, mayonnaise, sour cream, and salad dressing ● plain gravies ● sugar, clear jelly, honey, and syrup ● spices, cooked herbs, bouillon, broth, and soups made with allowed vegetables ● coffee, tea, and carbonated drinks ● plain cakes and cookies ● gelatin, plain puddings, custard, ice cream, sherbet, Popsicles ● hard candy or pretzels 	<p>Fats, Snack, Sweets, Condiments, and Beverages:</p> <ul style="list-style-type: none"> ● nuts, seeds, and coconut ● jam, marmalade, and preserves ● pickles, olives, relish, and horseradish ● all desserts containing nuts, seeds, dried fruit, coconut, or made from whole grains or bran ● candy made with nuts or seeds ● popcorn

Guidance for Pre-Procedure Medication List

Diabetic Medication By <u>CLASS</u>	<u>Name of Drug</u> (<i>Bold/Italicized Medications on the same line are the same medication</i>)	<u>Days to Stop Before Surgery</u> (Does NOT include DOS*)
SGLT2 Inhibitor	Brenzavvy (<i>Bexagliflozin</i>) Farxiga (<i>Dapagliflozin</i>) Invokana (<i>Canagliflozin</i>) Jardiance (<i>Empagliflozin</i>)	Hold for 3 days (4 days if including DOS)
SGLT2 Inhibitor	Steglatro (<i>Ertugliflozin</i>)	Hold for 4 days (or more) (5+ days if including DOS)
GLP-1 Agonists <i>Once Weekly</i>	Bydureon ER (<i>Exenatide ER</i>) Ozempic, Wegovy (<i>Semaglutide</i>) Trulicity (<i>Dulaglutide</i>)	Hold for 7 days (8 days if including DOS)
GLP-1/ GIP Agonist <i>Once Weekly</i>	Mounjaro (<i>Tirzepatide</i>)	Hold for 7 days (8 days if including DOS)
GLP-1 Receptor Agonist <i>Taken Daily</i>	Adlyxin (<i>Lixisenatide</i>) Byetta (<i>Exenatide IR</i>) Rybelsus (<i>Oral Semaglutide</i>) Saxenda (<i>Liraglutide</i>) Victoza (<i>Liraglutide</i>)	Hold DOS only
Biguanides	Metformin	Hold for ONE day (2 days if including DOS)
DPP-4 Inhibitors	Januvia (<i>Sitagliptin</i>) Nesina (<i>Alogliptin</i>) Onglyza (<i>Saxagliptin</i>) Tradjenta (<i>Linagliptin</i>)	Hold DOS only
Sulfonylureas & Meglitinides	Amaryl (<i>Glimepiride</i>) DiaBeta, Glynase PresTab (<i>Glyburide</i>) Glucotrol (<i>Glipizide</i>) Prandin (<i>Repaglinide</i>) Starlix (<i>Nateglinide</i>)	Hold DOS only
Thiazolidinediones	Actos (<i>Pioglitazone</i>) Avandia (<i>Rosiglitazone</i>)	Hold DOS only

Please have patient contact PCP/Endocrine provider for instructions on Insulin adjustments pre-surgery

Patients with Type 1 Diabetes should never hold basal insulin

*** DOS = Day of Surgery**

FAQ prep questions:

1. Do I really have to get up in the middle of the night for the second half of the prep?

Yes you do. If you finish the prep too far in advance of the procedure, stool will start to reform in the colon and you will not be as clean for the colonoscopy.

2. Do I need to stop my daily Aspirin?

If you have any questions about this please call the office and speak with a nurse.

3. Can I have the colonoscopy if I have my menstrual cycle?

Yes you can. If you use a tampon, you will need to remove the tampon during the procedure.

4. Is applesauce a clear liquid? Is ice cream a clear liquid?

No, applesauce and ice cream are not clear liquids. You cannot have any dairy products on the day of clear liquids.

5. Can I take my vitamins the week before the colonoscopy?

You must stop Multivitamins, Iron supplements and any vitamin containing Iron. You must also stop Fish oil products.

6. Do I need to use Gatorade?

No, you can use any clear liquid that is not red or purple.

7. Can I have orange flavor?

Yes, you cannot have anything that is red or purple.

8. Can I eat breakfast on the day of the prep?

No, you will be on clear liquids for the whole day even if your colonoscopy is in the afternoon.

9. How long will I be at the procedure?

You will be there for 2 to 3 hours from your arrival time.

10. Do I have to follow a low fiber diet seven days before?

Yes, decreasing the fiber will rest your colon and allow for a complete cleaning of the colon.

11. Can I have hard candy?

Yes, as long as it is not red or purple and there is no filling in the candy.

12. Can I use glucose tablets if I have a low blood sugar?

Yes you can. You should also be monitoring your glucose levels with your meter.

13. Can I have alcohol or white wine on the clear liquid diet?

No, alcohol is dehydrating and should not be consumed.

14. Are there any diet or activity restrictions after the procedure?

At the time of the procedure the doctor will give you directions. You cannot drive the day of the procedure. You cannot go back to work after the test; you will still be under the influence of the sedation medications. You can usually resume your regular diet afterwards. Again, the doctor will give specific directions at the end of the procedure.

15. Can I take my medications the morning of the procedure?

If you have any questions about this please call the office and speak with a nurse.

16. Do I have to split the prep or can I take it all at once?

Yes, you do need to split the prep. The prep is tolerated better when it is split and if you finish the prep too far in advance of the colonoscopy, stool will start to reform in the colon.

Consent for colonoscopy

Your doctor has recommended that a colonoscopy be performed.

What is colonoscopy?

A colonoscopy is an internal examination of the colon (large intestine) using an instrument called a colonoscope. The colonoscope is a small camera attached to a flexible tube which is used to examine the entire length of the colon.

How is the test performed?

You will lie on your side or back as the doctor slowly passes the colonoscope along your large intestine to look at the lining. Your doctor will, again, examine the lining as the colonoscope is taken out. Air will be inserted through the scope to provide a better view. Suction may be used to remove secretions. Tissue samples may be taken with tiny biopsy forceps inserted through the scope. Polyps may be removed with electrocautery snares. Photographs may be taken.

Specialized procedures, such as injection therapy, clipping, and tattooing to better localize lesions may be performed.

How to prepare for the test

Thorough cleansing of the bowel prior to colonoscopy is very important so that the procedure can be accurate and complete. You will be given detailed instructions for doing this. A bowel preparation is made up of either drinking a large quantity of a special cleansing drink, or may involve a combination of laxative pills and a clear liquid drink. To avoid dehydration during this preparation phase, you will be asked to drink plenty of clear liquids such as juices and broths. Preparation for colonoscopy can very rarely cause kidney problems.

What about the medications I am taking?

You should be able to continue taking your usual medications with some exceptions. Please tell your health care provider what you are taking and particularly if you are taking:

Aspirin products

Arthritis drugs

Blood thinners such as **Plavix, clopidogrel(generic Plavix), Coumadin, Warfarin(generic Coumadin) Lovenox, Pradaxa or Xarelto.**

Insulin

Diabetes pills

Iron supplements

Since your health care provider may ask you to stop or change the doses of these medicines before the procedure.

Please also tell your health care provider if you have:

- a joint replacement
- a heart valve replacement

Since antibiotics may be needed before the procedure.

How will the test feel?

Just before the procedure, you will be given a sedation medication and a pain killer by vein. This will produce relaxation and a drowsy feeling. You may feel pressure as the scope moves inside. Brief cramping and gas pains may be felt as air is inserted or as the scope is advanced. The passing of gas is expected and necessary. After the exam there may be abdominal cramping and considerable passing of gas may occur. Because of the sedation, you may have no memory of the test. Sedation should typically wear off in a few hours.

What if the doctor finds something wrong?

Your doctor may pass an instrument called a biopsy forceps through the colonoscope and take a small piece of bowel lining to look at under the microscope. If colonoscopy is being done to find bleeding sites, your doctor may stop the bleeding through the colonoscopy by:

- injecting drugs
- sealing off bleeding vessels with heat treatment or other methods such as small clips or liquid injection.

Your doctor may also find polyps which will most likely be removed or biopsied during the procedure.

What are polyps and why are they removed?

Polyps are growths in the bowel lining and they can be as small as a tiny dot or up to several centimeters big. They are not usually cancer but can grow into cancer over time. The doctor usually removes a polyp through the colonoscope using a wire loop or snare to separate the polyp from the bowel wall. An electric current is sometimes used.

What are the risks of colonoscopy?

There are some risks and complications which can happen. These include:

- (a) Bowel perforation – the bowel wall may be punctured. This can cause leakage of bowel contents into the abdominal cavity. The risk is approximately 1 to 2 per 1000 tests but may be higher when polyps are removed, particularly with large polyps. This is treated by keeping the bowel empty using suction and a tube passed into the stomach or bowel via the nose. Fluids and antibiotics are given via an intravenous drip. This will require a hospital stay. A surgical repair operation requiring a longer hospital stay may be needed.
- (b) Heavy or persistent bleeding from biopsy or polyp – removal sites. This may be immediate or may be delayed by as much as two weeks. The bleeding may stop on its own or may require additional therapies through the colonoscope. Very rarely, surgery may be needed to stop bleeding which cannot be stopped via these means. Very rarely, a blood transfusion may be needed if there is a lot of bleeding.
- (c) Having a normal colonoscopy does not guarantee that you do not have or will not get colon cancer. Polyps or cancer can be missed. This risk is higher if your bowel is not cleaned properly. It is very important that you follow the instructions to clear your bowel before the procedure.
- (d) Adverse reaction to sedative medication causing breathing problems or low blood pressure is very rare. Also very rarely, heart and lung problems can occur such as low oxygen levels and lowered blood pressure. People with underlying ill health are more at risk.
- (e) Nausea, vomiting, bloating or rectal irritation can occur during the preparation phase from medications that cleanse the bowel. If nausea, vomiting or bloating occurs, stop the preparation for 1 to 2 hours and then begin again very slowly, if possible, until the bowel is cleansed thoroughly.
- (f) Splenic injury is an exceedingly rare complication of colonoscopy but if severe, may require surgical removal of the spleen.
- (g) Death due to complications of colonoscopy is extremely rare.

What if I do not have the procedure?

A serious colon problem can be missed such as a polyp, tumor, or inflammation of the bowel.

Are there other tests I could have instead?

There are a number of other tests that could be done such as flexible sigmoidoscopy, double contrast barium enema, virtual colonoscopy utilizing a CT Scan, and stool tests to detect hidden blood and to look for abnormal DNA.

Colonoscopy Insurance Benefit Information

Use the information below to determine your preoperative procedure code and diagnosis code. We strongly encourage you to use these codes to reach out to your insurance company verify your benefits and determine your out-of-pocket expenses.

Please select the most accurate reason for your procedure.

Family history of polyps (Mother, Father, Brother, Sister, Child)

Surveillance/High Risk Colonoscopy: Procedure code G0105, Diagnosis code Z83.81

***Of note:** You need to be informed that, if a polyp or an abnormality is found, your surveillance/high risk insurance benefit may change and your insurance carrier may process this colonoscopy under your medical (not preventable) benefit. This may mean that deductibles, coinsurances and co-pays may apply. Please contact your insurance company with questions.*

Personal history of polyps

Surveillance/High Risk Colonoscopy: Procedure code G0105, Diagnosis code Z86.010

***Of note:** You need to be informed that, if a polyp or an abnormality is found, your surveillance/high risk insurance benefit may change and your insurance carrier may process this colonoscopy under your medical (not preventable) benefit. This may mean that deductibles, coinsurances and co-pays may apply. Please contact your insurance company with questions.*

Personal history of colon cancer

Surveillance/High Risk Colonoscopy: Procedure code G0105, Diagnosis code Z85.038

***Of note:** You need to be informed that, if a polyp or an abnormality is found, your surveillance/high risk insurance benefit may change and your insurance carrier may process this colonoscopy under your medical (not preventable) benefit. This may mean that deductibles, coinsurances and co-pays may apply. Please contact your insurance company with questions.*

Family history of colon cancer (Mother, Father, Brother, Sister, Child)

Surveillance/High Risk Colonoscopy: Procedure code G0105, Diagnosis code Z80.0

***Of note:** You need to be informed that, if a polyp or an abnormality is found, your surveillance/high risk insurance benefit may change and your insurance carrier may process this colonoscopy under your medical (not preventable) benefit. This may mean that deductibles, coinsurances and co-pays may apply. Please contact your insurance company with questions.*

Colonoscopy screening (and there are no other reasons for procedure)

Screening/Preventative Colonoscopy: Procedure code G0121, Diagnosis code Z12.11

Positive Cologuard/FIT test

Diagnostic/Therapeutic Colonoscopy: Procedure code 45378, Diagnosis code: R19.5

Ulcerative Colitis

Diagnostic/Therapeutic Colonoscopy: Procedure code 45378, Diagnosis code K51.90

Crohn's Disease

Diagnostic/Therapeutic Colonoscopy: Procedure code 45378, Diagnosis code K50.90

Lynch syndrome

Diagnostic/Therapeutic Colonoscopy: Procedure code G0105, Diagnosis code Z83.81, Z15.09

Diverticulitis

Diagnostic/Therapeutic Colonoscopy: Procedure code 45378, Diagnosis code K57.32

I am not sure or have additional questions

Please call our billing department at 518-533-5000 for further assistance.

Understanding Your Bills

Trying to sort through the various bills you receive from your doctors, hospitals, laboratories and radiology facilities in order to coordinate your insurance benefits can sometimes be difficult. The following information is provided in an effort to help you with this process.

Physician Bill is Separate from Bills for Special Services

During your care, you may receive bills for the following types of services:

1. Physician Services
2. Facility Services
3. Special Services: Services of this type are provided by groups that analyze laboratory tests, read x-rays or other images, provide anesthesia, and so on. These groups involve physicians whose help was requested by your physician.

Affiliated Facilities

St. Peter's Hospital	518-471-3000	www.sphcs.org/billing-information
St. Peter's Surgery and Endoscopy Center	518-533-3420	http://stpeters-surgery-endoscopy-center.com
Albany Medical Center	518-262-3125	https://www.amc.edu/spbs/accepted_insurance.cfm

Major Special Service Providers

Anesthesia Group of Albany, PC	MEM/SPH Anesthesia	518-463-0050
Maplewood Pathology, PC	MEM/SPH Pathology	518-525-1466
St. Peters Health Partners Med Assoc	MEM/SPH Radiology	518-525-1585 www.sphcs.org/billing-information
LabCorp	Laboratory	800-845-6167 www.labcorp.com
Quest Diagnostics	Laboratory	866-697-8378 www.questdiagnostics.com/home/patients
Prometheus Laboratory	Laboratory	888-423-5227 www.prometheuslabs.com
St. Peter's/Bender Laboratory	Laboratory	518-525-1550 www.sphcs.org/billing-information

AMC requests you contact your insurance directly to confirm participation status for labs, pathology radiology

Finding Out What Insurance Will Cover

The physicians of Albany Gastroenterology Consultants participate with most insurance plans. You must pay the co-pays, deductibles, or non-covered services as set by your insurance plan. Before visiting the office, you may wish to check with your plan to determine the extent of your coverage for various services such as office visits, lab services, x-rays, outpatient procedures, and so on. You may want to contact the offices of the special services providers and/or facility service providers to confirm what they charge and what your plan will pay. If your insurance provider will not cover the entire cost of a service, you will have to pay for some or all of that bill.

Albany Gastroenterology Consultants participates with the following insurance plans:

Aetna	Medicaid-NYS only
Blue Shield of Northeastern NY	Medicare
Cancer Services Program	Multiplan
Capital District Physician Health Plan	MVP Health Plan
Cigna (MVP, PHCS networks only)	National Health Administrators, Inc.
Emblem Health (GHI/HIP)	PHCS
Empire Blue Cross Blue Shield	POMCO
...All Out of Area Blue Cross Plans	Railroad Medicare
Empire Plan/NYS	Today's Option
Excellus	Tricare
Fidelis	United Healthcare
Great West	Univera
HTH Worldwide	Wellcare
Humana-All Medicare Advantage Plans	WTC Program
Martin's Point	