

Preparation for Capsule Endoscopy

What is the purpose of a capsule endoscopy?

With the pill-sized camera in the capsule, we can take images that we usually can't get from other endoscopy procedures or radiology tests. After the images are collected, we will send them to a doctor to review them. Once they have results, someone from your doctor's office will contact you.

What supplies do I need to prepare before my procedure?

- Fill your prescription for PEG/Electrolyte-Generic, NuLYTELY®, GoLYTELY®, or CoLyte® at your local pharmacy.
- You may want to buy some clear liquids that you'll be drinking as part of your procedure prep. This may include water, apple or white grape juice, black coffee, tea, lemon-lime-flavored Kool-Aid or Jell-O, soda pop (cola or lemon-lime), etc.
 - Do not buy any drinks or Jell-O that are red, orange, blue, or purple.

What are my instructions for taking medication and preparing my colon for the procedure?

The timeline table below will help you figure out the days of the week for your prep. First, figure out what day of the week your appointment is. Then highlight or circle the correct row to see your other prep days.

- If you reschedule your appointment, you must redo the timeline table to match your new date.

My appointment is: _____
(Date, day, and time)

Timeline table:

My appointment is on:	7 days before is:	1 day before is:
Monday	Monday	Sunday
Tuesday	Tuesday	Monday
Wednesday	Wednesday	Tuesday
Thursday	Thursday	Wednesday
Friday	Friday	Thursday
Saturday	Saturday	Friday

Follow the instructions below carefully to ensure a successful procedure.

7 days before your endoscopy	Day: _____ (Fill in the day according to the timeline table)
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- Stop taking iron supplements (ferrous sulfate or polysaccharide iron complex).

1 day before your endoscopy	Day: _____ (Fill in the day according to the timeline table)
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Stop eating solid food. Begin a clear liquid diet. Drink at least 8 glasses of water during the day to avoid dehydration. Look at the table to check which liquids and drinks are allowed on a clear liquid diet.

You may drink these liquids:	Do not drink these liquids:
<ul style="list-style-type: none"> • Water • Gatorade®, Pedialyte®, or Powerade® • Coffee or tea (without milk, cream, 	<ul style="list-style-type: none"> • Any red or purple liquids • Alcohol • Milk, cream, or non-dairy

You may drink these liquids:	Do not drink these liquids:
<p>or non-dairy creamer)</p> <ul style="list-style-type: none"> • Carbonated or non-carbonated soda • Fruit-flavored drinks • Apple juice, white cranberry juice or white grape juice • Jell-O (gelatin) or popsicles • Broth 	<p>creamers</p> <ul style="list-style-type: none"> • Juice with pulp • Any liquid you cannot see through



At 7:00 PM: Drink one 8 ounce (oz) glass of PEG/Electrolyte- Generic, NuLYTELY®, GoLYTELY®, or CoLyte® solution and continue drinking one 8 oz glass every 15 minutes over the next 2 hours until 2 liters (64 oz) of the prep solution is gone.

- You may drink as many glasses of clear liquids as you like during the afternoon and evening on the day before the procedure (see examples above).
- Stay near a toilet. Drinking this prep will give you diarrhea, usually within 1 hour of starting. The goal is for your stool (poop) to be a clear or yellow liquid.



The day of your endoscopy	Day: _____ (Fill in the day according to the timeline table)
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You may continue your clear liquid diet until 2 hours before your procedure. 2 hours before your procedure, stop chewing gum and stop drinking all liquids.

- You may take all your morning medicines (except for oral diabetes medicine) as usual with 4 oz of water **up to 2 hours before your procedure.**

- On the morning of the procedure, take half of your usual dose of long-acting insulin before the procedure. Long-acting insulins include NPH, Humulin® N, Humulin® 70/30, Humalog® Mix 75/25, Lantus®, and Levemir®.
 - Do not take short-acting insulin on the morning of the procedure. Short-acting insulins include regular insulin, Humulin® R, and Novolin® R.
 - If you take Humulin® R 500 insulin, take only half of your usual dose.
 - Take the other half of your long-acting insulin, and any regularly scheduled dose of short-acting insulin, right after the procedure. Be sure to eat your usual meal at that time.
 - Please see the following for instructions on taking your diabetes medication before the procedure:

Preparing for a Medical Procedure: Guidelines for Adults Not on Insulin Pumps: med.umich.edu/1libr/MEND/Diabetes-PreOpAdultsNoPump.pdf	
Preparing for a Medical Procedure: Guidelines for Adults on Insulin Pumps: med.umich.edu/1libr/MEND/Diabetes-PreOpInsulinPumpAdults.pdf	

- Bring your diabetes medication with you to the procedure. Also bring a list of all your current medicines with you, including over-the-counter medicines.
- After you arrive at the procedure location you will receive information about eating during the procedure.

Colon cleansing tips:

- Stay near a toilet! You will have diarrhea, which can be quite sudden. This is normal.
- Continue to drink the prep solution, as directed.
- Rarely, people may have nausea or vomiting with the prep. If this happens, give yourself a 30-to-90-minute break, rinse your mouth or brush your teeth, then continue drinking the prep solution.
- It is common to experience abdominal (stomach) discomfort until the stool has been flushed from your colon (this may take 2-4 hours and sometimes much longer).
- You may have anal skin irritation or a flare of hemorrhoid inflammation. If this happens, treat it with over-the-counter treatments, such as hydrocortisone cream, baby wipes, Vaseline®, or TUCKS® pads. Don't use products containing alcohol. If you have a prescription for hemorrhoid cream, you may use it. Do not use suppositories.

When should I call the call center?

If you have been sick and have had any of the following symptoms within 48 hours of your appointment, please call the Endoscopy Call Center at (734) 936-9250:

- Fever greater than 100.6 ° Fahrenheit
- Productive cough (your cough brings up a thick fluid)
- Diarrhea or vomiting (that is not related to taking the bowel prep)

What can I expect during the procedure?

- A tech staff member will ask you to swallow the capsule with water.
- You will wear a recording device that will download the data from the capsule.

- 2 hours after you swallow the capsule, you can have clear liquids and medication (in pill or liquid form). You can have food 5 hours after you swallow the capsule.
- The test will take about 8 hours. You will need to return the recording device to the Medical Procedures Unit at the end of the day (or early morning the next day, if you have a later appointment time).
- You will pass the capsule naturally, and you do not need to get it out of the toilet or give it back. Since the capsule is small, you may not see it in your stool. If you have any concerns, please call the Medical Procedures Unit at (734) 936-9250 and ask to speak with the Physiology Lab.

➔ Turn the page to learn about the benefits, risks, and alternatives for a capsule endoscopy.



What are the Benefits, Risks and Alternatives for Capsule Endoscopy?

Before starting the procedure, a member of our team will ask you to sign a consent form. By signing this form, you are agreeing that we have given you information and you understand the procedure, its benefits and risks, and the alternatives (other options) for a capsule endoscopy. Read this handout or view the video at: bit.ly/MM-CapsuleEndoscopy to understand your informed consent.

What are the benefits of a capsule endoscopy?

The capsule lets the doctor take a deep look inside your gastrointestinal (GI) tract to check for conditions including:

- Anemia (a red blood cell count that is below normal)
- Intestinal bleeding
- Diarrhea
- Malabsorption (a condition where the body has difficulty absorbing nutrients from food)
- Crohn's disease
- Celiac disease
- Small bowel polyps (bits of extra tissue), tumors, and some intestinal cancers

What are the risks of a capsule endoscopy?

Capsule endoscopy is a safe and painless way to look at your intestines. Please let your doctor know if you have any conditions that affect your ability to swallow. Some risks of capsule endoscopy include:

- Aspiration, where the contents of the stomach (including the capsule) get into the lungs. This is rare.

- The capsule may get stuck in your small bowel. This is also rare. Having had abdominal (stomach) surgery, bowel blockages, and radiation therapy before are some risk factors that may cause narrowing in your intestine and prevent the capsule from passing.
 - Even if the capsule gets stuck in the small bowel, a bowel blockage from the capsule is very rare.
- It's possible that we might not be able to get images of your entire small bowel during the battery life of the capsule.
- Possible reasons for an incomplete study include slow stomach emptying, the use of narcotic pain medication, having had stomach surgery before, and being admitted to the hospital at the time of the test. It's important that your doctor knows if you have any of these conditions before the capsule endoscopy.

What are the alternatives to a capsule endoscopy?

Alternatives to a capsule endoscopy include other imaging tests, such as x-rays or CT scans, that are taken from outside of the body. While these imaging tests can be helpful in finding problems in the GI tract, they can't give doctors the same level of detail as images with the capsule.

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Authors: Allison Schulman, MD

Reviewers: Samantha Foster, Kathy Lewan, RN, Leslie Aldrich, MD

Edited by: Brittany Batell, MPH MSW CHES®

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