

# Flexible Sigmoidoscopy Preparation Instructions – Chelsea Hospital

### What is the purpose of a flexible sigmoidoscopy?

**Flexible sigmoidoscopy** is a procedure where a doctor uses a flexible, narrow tube with a light and tiny camera on one end (called a **sigmoidoscope**, or scope) to look inside your rectum and lower colon. The lower colon is also called the sigmoid colon or descending colon. Flexible sigmoidoscopy can show irritated or swollen tissue, ulcers, polyps, and cancer.

## How do I plan for the procedure?

Please read this as soon as you get this information, and check off each box to show that you understand each item.

### ☐ You must do a bowel prep.

- A flexible sigmoidoscopy requires 2 enemas before the procedure to clean out the lower part of the colon. If your travel time is more than 2 hours, ask at the time of scheduling if you can do the prep (enemas) in the endoscopy suite.
- It is important to read this entire handout, buy your prep supplies, and follow the exact time schedule for your prep to make sure you are ready for your flexible sigmoidoscopy. If you have any questions on the bowel prep in this document, call the General Surgery Call Center at (734) 936-5738.

### □ Gather your prep supplies.

• Buy 2 sodium phosphate enemas at your local pharmacy. You will not need a prescription. One common brand is Fleet<sup>®</sup>. Be sure to use an enema product, and not an oral or liquid laxative.

• We recommend picking up your supplies at least 1 week before your procedure.

#### □ You must have a driver with you at the procedure.

- You must have a driver who is **18 years or older** with you when you check in and when you leave your appointment. If you do not have a driver with you at check in, we will need to reschedule your appointment.
- Your entire procedure may take 3-4 hours to complete. Please tell your driver that they must stay in the unit during your entire visit.

□ Please leave all jewelry and personal items at home.

- If you bring jewelry to your appointment, we may have to ask you to take it off.
- Please do not wear contact lenses.

### □ If you have diabetes or take a blood thinner, you must contact your doctor.

- People with diabetes have special diet and medication instructions. Call the doctor who ordered your flexible sigmoidoscopy for your special diet and medication instructions.
- If you take a blood thinner, such as Plavix<sup>®</sup>, Pradaxa<sup>®</sup>, Clopidogrel<sup>®</sup>, Coumadin<sup>®</sup>, warfarin, Effient<sup>®</sup>, Prasugrel<sup>®</sup>, Eliquis<sup>®</sup>, Xarelto<sup>®</sup>, or Lovenox<sup>®</sup>, ask your prescribing healthcare provider for specific instructions. If you are unsure if you are taking blood thinners, contact your doctor.
- □ Watch the video describing the risks and benefits of a flexible sigmoidoscopy.
  - You can watch the video online at: <u>bit.ly/MM-Sigmoidoscopy</u>
- □ If you must cancel or reschedule your appointment, please call us as soon as possible at (734) 936-5738.

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# What are my instructions for taking medication and preparing for my 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.

	(Date, day, and time)				
Timeline table:					
My appointment is on:	7 days before is:	4 days before is:	3 days before is:		
Monday	Monday	Thursday	Friday		
Tuesday	Tuesday	Friday	Saturday		
Wednesday	Wednesday	Saturday	Sunday		
Thursday	Thursday	Sunday	Monday		
Friday	Friday	Monday	Tuesday		
Saturday	Saturday	Tuesday	Wednesday		

My appointment is:

Follow the instructions below carefully to ensure a successful procedure.

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- If you have not gotten a call from our staff to complete the screening process (checking that you received and understood these bowel prep instructions), please call (734) 936-5738. This must be completed at least 1 week before your flexible sigmoidoscopy.
- If you take aspirin or NSAIDs, such as Advil<sup>®</sup>, Motrin<sup>®</sup>, Celebrex<sup>®</sup>, or ibuprofen, you may continue to take them as usual.

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- Stop taking phentermine (Adipex-P<sup>®</sup>, Lomaira<sup>™</sup>, Fastin<sup>®</sup>, Phentercot<sup>®</sup>) and phentermine and topiramate (Qsymia<sup>®</sup>). These are weight loss medications.
- If you take semaglutide (Ozempic<sup>®</sup>, Wegovy<sup>®</sup>), dulaglutide (Trulicity<sup>®</sup>), tirzepatide (Mounjaro<sup>®</sup>, Zepbound<sup>™</sup>), exenatide (Byetta<sup>®</sup>, Bydureon<sup>®</sup>), liraglutide (Victoza<sup>®</sup>), or lixisenatide (Adlyxin<sup>™</sup>) once a week, stop taking it a week before your procedure.

4 days (96 hours) before					
your sigmoidoscopy					

Day: \_\_\_\_\_

(Fill in the day according to the timeline table)

- 96 hours before your flexible sigmoidoscopy, stop taking the following diabetic/weight loss medications: ertugliflozin (Steglatro<sup>®</sup>), ertugliflozin and metformin (Segluromet<sup>™</sup>), and ertugliflozin and sitagliptin (Steglujan<sup>®</sup>).
  - If you do not stop taking these medications exactly 96 hours before your sigmoidoscopy, your procedure may need to be cancelled and rescheduled.

<b>3 days</b> (72 hours) <b>before</b> your sigmoidoscopy
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72 hours before your flexible sigmoidoscopy, stop taking the following diabetic/weight loss medications: empagliflozin (Jardiance<sup>®</sup>), dapagliflozin (Farxiga<sup>®</sup>), canagliflozin (Invokana<sup>®</sup>), dapagliflozin and saxagliptin (Qtern<sup>®</sup>), dapagliflozin and metformin (Xigduo<sup>®</sup> XR), canagliflozin and metformin (Invokamet<sup>®</sup>, Invokamet<sup>®</sup> XR), empagliflozin and metformin (Synjardy<sup>®</sup>, Synjardy<sup>®</sup> XR), and empagliflozin and linagliptin (Glyzambi<sup>®</sup>).

 If you do not stop taking these medications exactly 72 hours before your sigmoidoscopy, your procedure may need to be cancelled and rescheduled.

The day of your sigmoidoscopy Day:   (Fill in the day according to the timeline table)
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**8 hours before your procedure, stop eating all solid foods. You may drink clear liquids.** Look at the table below to check which liquids and drinks are allowed on a clear liquid diet.

You may drink these liquids:	Do not drink these liquids:	
• Water	Chicken, beef, or	
• Gatorade <sup>®</sup> , Pedialyte <sup>®</sup> , or Powerade <sup>®</sup>	vegetable broth	
• Coffee or tea (without milk, cream,	• Any red or purple liquids	
or non-dairy creamer)	• Alcohol	
Carbonated or non-carbonated soda	• Milk, cream, or non-dairy	
Fruit-flavored drinks	creamer	
• Apple juice, white cranberry juice, or	• Juice with pulp	
white grape juice	• Any liquid you cannot see	
• Jell-O (gelatin) or popsicles	through	

- If you take semaglutide (Rybelsus®) or liraglutide (Saxenda®) every day, do not take it on the day of your procedure.
- You may take all your morning medications (except for oral diabetes medicine) as usual with 4 oz of water **up to 4 hours before your procedure**.
- **2 hours before your procedure,** stop chewing gum, stop smoking, and stop drinking all liquids.

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**90 minutes before you leave home for your procedure, give yourself the 2 enemas.** Follow these instructions:

- 1. Lie on your left side.
- 2. Remove the cap from the tip of the enema bottle.
- 3. Gently insert the tip of the enema bottom into your rectum (about 4 inches).
- 4. Slowly squeeze the entire contents of the bottle into your rectum.
- 5. Hold the fluid inside of you for about 15 minutes, if possible.
- 6. Sit on the toilet and let the fluid come out.
- 7. Immediately repeat steps 1-6 for the second enema.
- Bring a list of all your current medications with you, including over-thecounter medications.

### When should I call the call center?

If you have been ill and have had any of the following symptoms within 48 hours of your appointment, please call the call center at (734) 936-5738:

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

→ Turn the page to learn about the benefits, risks, and alternatives for a flexible sigmoidoscopy.



# What are the Benefits, Risks, and Alternatives for a Flexible Sigmoidoscopy?

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 flexible sigmoidoscopy. Read this handout or view the video at: <u>bit.ly/MM-Sigmoidoscopy</u> to understand your informed consent.

# What are the benefits of a flexible sigmoidoscopy?

A flexible sigmoidoscopy can help your doctor find the cause of your symptoms, such as:

- Bleeding from your anus
- Changes in your bowel activity, such as diarrhea
- Pain in your abdomen (stomach)
- Unexplained weight loss

Doctors also use flexible sigmoidoscopy as a screening tool for colon polyps and colorectal cancer. **Colon polyps** are abnormal tissue growths that may turn into cancer with time. If the doctor finds a polyp during the procedure, you may have to have a colonoscopy to have it removed.

Flexible sigmoidoscopy can also find cancers at earlier stages. Finding cancer early greatly improves the chances for treating colorectal cancer successfully and reduces the chance that a person will die from colorectal cancer.

## What are the risks of a flexible sigmoidoscopy?

The risks of **complications** (medical issues) from a flexible sigmoidoscopy are low, but may include:

- Reaction to the sedation medication (the medication used to relax you during the procedure), including breathing or heart problems
- Bleeding (which occurs in less than 1 in 100 people)
- Perforation, meaning a tear or hole in the bowel (which occurs in less than 1 in 100 people)
- Infection (which occurs in less than 1 in 100 people)
- Aspiration, where the contents of the stomach get into the lungs, which may lead to a lung infection called pneumonia (this occurs in less than 1 in 100 people)
- Blood transfusion or surgery may be needed to treat the conditions above (this is rare)

There is also a risk that the doctor will not find cancer or polyps.

## Is there anything that increases my risk?

• Risks are higher if you are taking steroids or blood thinners, or if you have certain serious diseases such as heart failure or severe lung disease.

# What are the alternatives?

- There are other screening tests (like a barium enema, CT scan, or MRI) used to find issues (polyps, cancer) in the colon and rectum, but these procedures do not have the option of taking a sample tissue during the procedure. Being able to do this during a flexible sigmoidoscopy reduces the need for extra tests and surgeries.
- **Colonoscopy** (a procedure which lets doctors look at the entire colon) is an alternative which also allows the doctor to take sample tissues and remove polyps during your procedure.

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