



# Colonoscopy Bowel Preparation Instructions for People with Cystic Fibrosis

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**Refer to this instruction sheet for the entire week before your colonoscopy.**

Colonoscopy prep instructions are extremely important for a successful colonoscopy. If you do not follow the instructions exactly, your bowels may not be ready for your colonoscopy and you will need to repeat the procedure.

## **Planning for your colonoscopy**

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.**

- If you have not received a bowel prep, call the Endoscopy Call Center at (734) 936-9250 or toll-free at (877) 758-2626.

☐ **Gather your prep supplies.**

- Fill your prescriptions and pick up the following supplies at your local pharmacy:
  - 2 Dulcolax® (bisacodyl) laxative tablets - each tablet contains 5 mg of bisacodyl. **Do not get Dulcolax® stool softener.**
  - 1 bottle of magnesium citrate (10 ounces, or oz)
  - 2 bottles (8 liters, or L) PEG/Electrolyte-Generic, NuLYTELY®, GoLYTELY®, CoLyte®, or TriLyte®
- We recommend that you fill your prescriptions 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 at the colonoscopy appointment 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, you must contact your doctor.**
- People with diabetes have special diet and medication instructions. Call the doctor who ordered your colonoscopy for your special diet and medication instructions.
- ☐ **Watch the video describing the risks and benefits of a colonoscopy.**
- You can watch the video online at: [bit.ly/MM-colonoscopy](http://bit.ly/MM-colonoscopy)
- ☐ If you must cancel or reschedule your appointment, please call us as soon as possible at (734) 936-9250 or toll-free at (877) 758-2626.

### **What are my instructions for preparing for my colonoscopy?**

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:**

<b>My appointment is on:</b>	<b>7 days before is:</b>	<b>4 days before is:</b>	<b>3 days before is:</b>	<b>2 days before is:</b>	<b>1 day before is:</b>
Monday	Monday	Thursday	Friday	Saturday	Sunday
Tuesday	Tuesday	Friday	Saturday	Sunday	Monday
Wednesday	Wednesday	Saturday	Sunday	Monday	Tuesday
Thursday	Thursday	Sunday	Monday	Tuesday	Wednesday
Friday	Friday	Monday	Tuesday	Wednesday	Thursday
Saturday	Saturday	Tuesday	Wednesday	Thursday	Friday

**Start your prep instructions as soon as you wake up on each day.** Follow the instructions below carefully to ensure a successful procedure.

<b>7 days before your colonoscopy</b>	<b>Day:</b> _____ (Fill in the day according to the timeline table)
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- If you take aspirin, do not stop taking your aspirin. If you take NSAIDs, such as Advil®, Motrin®, Celebrex®, or ibuprofen, you may continue to take them as usual.
- If you take a blood thinner, such as Plavix®, Pradaxa®, Clopidogrel®, Coumadin®, warfarin, Effient®, Prasugrel®, or Lovenox®, ask your health care provider for specific instructions. If you are unsure if you are taking blood thinners, contact your doctor.
- Stop taking iron supplements (ferrous sulfate or polysaccharide iron complex).
- Stop taking phentermine (Adipex-P®, Lomaira™, Fastin®, Phentercot®) and phentermine and topiramate (Qsymia®). These are weight loss medications.

- If you take semaglutide (Ozempic®, Wegovy®), dulaglutide (Trulicity®) or tirzepatide (Mounjaro®) once a week, stop taking it a week before your procedure.

<b>4 days (96 hours) before your colonoscopy</b>	<b>Day:</b> _____ (Fill in the day according to the timeline table)
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- **96 hours before your colonoscopy**, stop taking the following diabetic/weight loss medications: ertugliflozin (Steglatro®), ertugliflozin and metformin (Segluromet™), and ertugliflozin and sitagliptin (Steglujan®).
  - If you do not stop taking these medications exactly 96 hours before your colonoscopy, your procedure may need to be cancelled and rescheduled.

<b>3 days (72 hours) before your colonoscopy</b>	<b>Day:</b> _____ (Fill in the day according to the timeline table)
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- Stop eating popcorn, corn, beans, nuts, fruits with small seeds, tomatoes, and celery.
- **72 hours before your colonoscopy**, stop taking the following diabetic/weight loss medications: bexagliflozin (Brenzavvy®), empagliflozin (Jardiance®), dapagliflozin (Farxiga®), canagliflozin (Invokana®), dapagliflozin and saxagliptin (Qtern®), dapagliflozin and metformin (Xigduo® XR), canagliflozin and metformin (Invokamet®, Invokamet® XR), empagliflozin and metformin (Synjardy®, Synjardy® XR), and empagliflozin and linagliptin (Glyxambi®).
  - If you do not stop taking these medications exactly 72 hours before your colonoscopy, your procedure may need to be cancelled and rescheduled.

- Begin a **restricted low residue diet**. Look at the table below to check which foods are allowed on this diet.

You may eat these foods:	Do not eat these foods:
<ul style="list-style-type: none"> <li>• White bread, rolls, biscuits, plain crackers, and rice</li> <li>• Skinless potatoes</li> <li>• Low fiber cereals, such as Rice Krispies®</li> <li>• Chicken, turkey, eggs, fish, or seafood</li> <li>• Applesauce and pear sauce</li> <li>• Soft honeydew and cantaloupe</li> <li>• Ripe bananas</li> <li>• Canned fruit without seeds, peels, or skins</li> <li>• Cooked or canned vegetables without seeds</li> </ul>	<ul style="list-style-type: none"> <li>• Raw vegetables, such as brussel sprouts, cabbage, corn, broccoli, cauliflower, beans, peas, winter squash, or sauerkraut</li> <li>• Whole wheat breads or cereals</li> <li>• Brown or wild rice</li> <li>• Granola</li> <li>• Raisins, berries, or dried fruit</li> <li>• Raw fruit</li> </ul>

<b>2 days before your colonoscopy</b>	<b>Day:</b> _____ (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 below 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"> <li>• Water</li> <li>• Gatorade®, Pedialyte®, or Powerade®</li> <li>• Coffee or tea (without milk, cream, or non-dairy creamer)</li> <li>• Carbonated or non-carbonated soda</li> <li>• Fruit-flavored drinks</li> <li>• Apple juice, white cranberry juice, or white grape juice</li> <li>• Jell-O (gelatin) or popsicles</li> <li>• Broth</li> </ul>	<ul style="list-style-type: none"> <li>• Any red or purple liquids</li> <li>• Alcohol</li> <li>• Milk, cream, or non-dairy creamer</li> <li>• Juice with pulp</li> <li>• Any liquid you cannot see through</li> </ul>

- Stop taking any NSAIDs (such as Advil®, Motrin®, Celebrex®, or ibuprofen), as these may increase your risk of bleeding.
- For patients on CFTR modulators, take your medication with clear broth and 1 teaspoon of oil.



**At 4:00 PM,** drink one 10 oz bottle of magnesium citrate.

<b>1 day before your colonoscopy</b>	<b>Day:</b> _____ (Fill in the day according to the timeline table)
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- Continue your clear liquid diet.



Mix your PEG/Electrolyte-Generic, NuLYTELY®, GoLYTELY®, CoLyte®, or TriLyte® prep solution with lukewarm water. You may chill it for at least 5 hours to make it easier to drink, or you can drink it at room temperature.



**At 8:00 AM**, drink one 8 oz glass of prep solution. Then continue drinking one 8 oz glass of prep solution every 15 minutes until 2 liters (64 oz) of the prep solution is gone.



**At 10:00 AM**, take 2 Dulcolax® tablets.



**Between 5:00 and 6:00 PM**, drink another 2 liters (64 oz) of the prep solution over the next 2 hours (one 8 oz glass every 15 minutes).

<b>The day of your colonoscopy</b>	<b>Day:</b> _____ (Fill in the day according to the timeline table)
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- **Starting at 12:00 AM (midnight), don't eat any solid foods, broth, or Jell-O (gelatin).**
- If you take semaglutide (Rybelsus®) or liraglutide (Saxenda®) every day, do not take it on the day of your procedure.



**5 hours before you leave to go to your colonoscopy appointment:**

Start drinking another 2 liters (64 oz) of your prep solution. Drink one 8 ounce (oz) glass of prep solution every 15 minutes until 2 liters of the prep solution is gone.

After you are finished, you will have an extra 2 liters of prep solution left that you can get rid of.

- If you follow these instructions exactly, you should be done drinking all the prep solution 3 hours before you leave to go to your colonoscopy appointment.
- You may take all your morning medicines (except for oral diabetes medicine) as usual with a small amount of water **up to 4 hours before your appointment time** (unless you have been told otherwise). If you take diabetes medications, follow your doctor's instructions.
- For patients on CFTR modulators, take your medication with clear broth and 1 teaspoon of oil **4 hours before your appointment**.
- **2 hours before your procedure**, stop chewing gum and stop drinking all liquids.
- Bring a list of all your current medicines with you, including over-the-counter medicines.

If you followed all of the instructions, your stool (poop) will be a clear or yellow liquid and you are ready for your colonoscopy.

If your stool is formed or your prep is not going as expected, call (734) 936-9250 or toll-free (877) 758-2626. After business hours, on weekends, or holidays, call the paging operator at (734) 936-6267 and ask to speak with the GI doctor on call.

### **Colon cleansing tips:**

- Stay near a toilet! You will have diarrhea, which can be quite sudden. This is normal.
- If you have trouble drinking the prep solution, try drinking it through a straw.
- Rarely, people may have nausea or vomiting with the prep. If this happens, give yourself a 30-minute break, rinse your mouth or brush your teeth, then continue drinking the prep solution.



- You may have bowel cramps 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 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)

**→ Turn the page to learn about the benefits, risks, and alternatives for a colonoscopy.**

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

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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 colonoscopy. Read this handout or watch the video at: [bit.ly/MM-colonoscopy](http://bit.ly/MM-colonoscopy) to understand your informed consent.

## What is the purpose of a colonoscopy?

A **colonoscopy** is a procedure in which a doctor puts a thin tube with a very small camera into the anus. This allows the doctor to look inside your rectum and colon. Colonoscopies can show irritated and swollen tissue, ulcers, polyps, and cancer.

## What are the benefits of a colonoscopy?

Colonoscopy exams can find cancers at earlier stages, and **polyps** (bits of extra tissue) can be found and removed before they develop cancer. This 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 colonoscopy?

A study of colonoscopies found that between 4 and 8 people in 10,000 have a serious **complication** (medical problem) after a colonoscopy. Serious complications include:

- Bleeding
  - Most cases of bleeding occur in patients who have polyps removed. The risk is higher for polyps that are larger than 2 centimeters (cm).

- A tear or a hole, called a **perforation**, in the colon or rectum wall
- Infection
- **Aspiration** (accidentally breathing a substance into your lungs) that may lead to a lung infection (**pneumonia**)
- A reaction to the sedating medication, including breathing or heart problems

Risks are higher in people taking steroids or blood thinners, or in people that have significant underlying diseases. There is also a risk that cancer or polyps will not be found.

### **What are the alternatives to a colonoscopy?**

There are other tests that may find abnormalities in the colon and rectum. However, a colonoscopy is the only method that allows the doctor to take a tissue sample or remove polyps during the procedure. This reduces the need for additional tests and surgeries.

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