



MICHIGAN MEDICINE
UNIVERSITY OF MICHIGAN

6-Liter Colonoscopy Bowel Prep Instructions

PEG/Electrolyte-Generic, NuLYTELY®, GoLYTELY®,
and CoLyte®

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 precisely, your bowels may not be ready for the procedure and you will need to repeat the procedure.

Planning for Your Colonoscopy

Please read as soon as you receive this information and check off each box to indicate 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.

- What is the name of your prep?** _____
 - We recommend that you fill your prescription at least a 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** present at check in and discharge. If you do not have a driver with you at check in, we will reschedule your appointment.
 - Your entire procedure may take 3 to 4 hours to complete. Please tell your driver that they must remain 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 remove it.
 - **Please do not wear contact lenses.**

- If you have diabetes you must call your doctor**
 - People with diabetes have special diet and medicine instructions. Call the doctor who ordered your colonoscopy for your special diet and medicine instructions.

View the video describing risks and benefits of colonoscopy

- Visit: <http://michmed.org/EXL6d>

If you need to reschedule

- Call (734) 936 - 9250 or toll-free (877) 758 - 2626.

Timeline of the Colonoscopy Preparation

How will I determine my colonoscopy prep schedule?

The timeline table below will help you determine which day of the week to start your preparation. Use a highlighter or circle the correct row to determine which day you will start the prep. **The prep process will begin at the start of the day.**

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

My Appointment Is: _____

(Date, Day, Time)

Timeline Table

My Appointment is on a:	7 days before is a:	3 days before is a:	2 days before is a:	1 day before is a:
Monday	Monday	Friday	Saturday	Sunday
Tuesday	Tuesday	Saturday	Sunday	Monday
Wednesday	Wednesday	Sunday	Monday	Tuesday
Thursday	Thursday	Monday	Tuesday	Wednesday
Friday	Friday	Tuesday	Wednesday	Thursday

7 days before your colonoscopy

Day: _____

Fill in the day according to the timeline table

- **Do not** stop your aspirin.
- If you take a blood thinner, tell the doctor who ordered your colonoscopy. If you are unsure that you are taking blood thinners, please contact your doctor.
- Stop taking any iron supplements, such as ferrous sulfate or polysaccharide iron complex.

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3 days before your colonoscopy Day: _____

Fill in the day according to the timeline table

- Stop eating popcorn, corn, beans, nuts, fruits with small seeds, tomatoes and celery.

2 days before your colonoscopy Day: _____

Fill in the day according to the timeline table

No solid food from now until your procedure is done. Begin a clear liquid diet (below). Drink at least 8 glasses of water during the day to avoid dehydration.

<p>You may drink these clear liquids:</p> <ul style="list-style-type: none">• Gatorade, Crystal Light Lemonade®, Pedialyte® or Powerade®• Coffee or tea (black only)• Carbonated or non-carbonated soda• Fruit-flavored drinks• Apple juice, white cranberry juice or white grape juice• Jell-O (gelatin) or popsicles	<p>Do not drink these liquids:</p> <ul style="list-style-type: none">• Chicken, beef or vegetable broth• Alcohol• Milk or non-dairy creamer• Juice with pulp• Any liquid you cannot see through• Hard candy <p>Note: Nothing Red or Purple</p>
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The day before your colonoscopy Day: _____

Fill in the day according to the timeline table

- Continue the clear liquid diet throughout the day. No solid foods.
- Mix your prep solution with lukewarm water. You may chill it at least 5 hours to make it easier to drink, or, you can drink it at room temperature.
- At 8 am drink one 8-ounce glass of PEG/Electrolyte-Generic, NuLYTELY, GoLYTELY, or CoLyte solution and continue drinking one 8-ounce glass every 15 minutes until 2 liters (64 ounces) of the prep solution is gone.
- Between 5 and 6 pm: drink another 2 liters (64 ounces) of the prep solution over the course of 2 hours.

**The day of your colonoscopy
5 hours before leaving home for
your colonoscopy**

Day/Time: _____

Fill in the day according to the timeline table

- You may have to wake up early.

- Begin drinking the final 2 liters (64 ounces), the same way you drank the previous 4 liters (128 ounces), i.e.: drink an 8-ounce glass **every 15 minutes** until the final 2 liters (64 ounces) are gone. After you are finished, you will have an extra 2 Liters left that you can discard. If you drink according to schedule, you will finish drinking 3 hours before leaving home.
- Take your morning medications with a small amount of water 4 hours before your appointment time (unless you have been told otherwise). If you take Diabetes medications follow your doctor's instructions.

2 hours before your colonoscopy Day/Time: _____

Fill in the day according to the timeline table

- Stop everything by mouth, including all liquids, smoking and chewing gum.

Important!

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

If your stool is formed or your preparation 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:

1. Stay near a toilet! You will have diarrhea, which can be quite sudden. This is normal.
2. Try drinking the solution with a straw. It may be easier to tolerate.
3. Rarely, people may have nausea or vomiting with the prep. If this occurs, give yourself a 30 -minute break, rinse your mouth or brush your teeth, then continue drinking the prep solution.
4. You may have bowel cramps until the stool has flushed from your colon (this may take 2 to 4 hours and sometimes much longer).
5. Anal skin irritation or a flare of hemorrhoid inflammation may occur. If this happens, treat it with over-the-counter-remedies, such as hydrocortisone cream, baby wipes, Vaseline®, or TUCKS® pads. Avoid products containing alcohol. If you have a prescription for hemorrhoid cream, you may use it. Do not use suppositories. **→Turn the page to learn about the benefits, risks and alternatives for a colonoscopy**

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

Before starting the procedure, a member of our team will ask you to sign an informed consent indicating that you understand the procedure, its benefits and risks, and the alternatives for a colonoscopy. Read this handout or view the video at: <http://michmed.org/EXL6d> to understand your informed consent.

What is the purpose of a colonoscopy?

Colonoscopy is a procedure in which a doctor inserts a thin tube into the anus to look inside your rectum and colon. Colonoscopy 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 can be found and removed before they become cancerous. 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 screening colonoscopies found that between 4 to 8 people in 10,000 have a serious complication 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 cm.
- A tear or a hole in the colon or rectum wall (perforation).
- Infection.
- Aspiration 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 anti-coagulation medicines, or in people that have significant underlying diseases. There is also a risk that cancer or polyps will not be detected.

What are the alternatives?

There are other screening tests that may detect abnormalities in the colon and rectum but colonoscopy is the only method that enables the doctor to take a sample tissue and/or remove polyps during the procedure. This reduces the need for additional tests and surgeries.

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