

Colonoscopy Bowel Prep Instructions

SUPREP® 1-Day Prep

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 any questions about your bowel prep instructions, call the Endoscopy Call Center at (734) 936-9250 or toll-free at (877) 758-2626.
- \square Gather your prep supplies.
 - We recommend picking up your SUPREP® prescription at least 1 week before your procedure.
- \square 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 |
| ☐ 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:

| My appointment is on: | 7 days before is: | 4 days before is: | 3 days before is: | 1 day before is: |
|-----------------------|----------------------|----------------------|----------------------|---------------------|
| Monday | Monday | Thursday | Friday | Sunday |
| Tuesday | Tuesday | Friday | Saturday | Monday |
| Wednesday | Wednesday | Saturday | Sunday | Tuesday |

| My appointment is on: | 7 days before is: | 4 days before is: | 3 days before is: | 1 day before is: |
|-----------------------|----------------------|----------------------|----------------------|---------------------|
| Thursday | Thursday | Sunday | Monday | Wednesday |
| Friday | Friday | Monday | Tuesday | Thursday |
| Saturday | Saturday | Tuesday | Wednesday | Friday |

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

| 7 days before your colonoscopy Day: (Fill in the day according to the timeline table) | |
|---|--|
|---|--|

- 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.

| 4 days (96 hours) before your colonoscopy | Day:(Fill in the day according to the timeline table) |
|---|---|
|---|---|

- 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.

| 3 days (72 hours) 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.
- 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.



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: |
|---|-----------------------------|
| • Water | Any red or purple liquids |
| Gatorade®, Pedialyte®, or Powerade® | • Alcohol |
| • Coffee or tea (without milk, cream, | Milk, cream, or non-dairy |
| or non-dairy creamer) | creamer |
| • Carbonated or non-carbonated soda | Juice with pulp |
| Fruit-flavored drinks | Any liquid you cannot see |
| • Apple juice, white cranberry juice, or | through |
| white grape juice | |
| • Jell-O (gelatin) or popsicles | |
| • Broth | |



Between 5:00 and 6:00 PM, pour one 6 ounce (oz) bottle of SUPREP® liquid into the mixing container. Add cool drinking water up to the 16 oz line on the container and mix. Then drink all the liquid in the container.



Within 1 hour of drinking the first SUPREP® mix, you must drink 2 more 16 oz containers of water (for 32 oz of water total).

• Stay near a toilet. Drinking this prep will give you diarrhea, usually within 1 hour of starting.

| The day of your colonoscopy | Day: (Fill in the day according to the timeline table) |
|-----------------------------|--|
| , | , |

- 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: pour one 6 ounce (oz) bottle of SUPREP® liquid into the mixing container. Add cool drinking water up to the 16 oz line on the



Within 1 hour of drinking the SUPREP® mix, you must drink 2 more 16 oz containers of water (for 32 oz of water total).

container and mix. Then drink all the liquid in the container.

- 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.
- **2 hours before your procedure,** stop chewing gum, stop smoking, and stop drinking all liquids.
- Bring a list of all your current medicines with you, including over-thecounter 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° F
- 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?

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 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.

Disclaimer: This document contains information and/or instructional materials developed by University of Michigan Health for the typical patient with your condition. It may include links to online content that was not created by U-M Health and for which U-M Health does not assume responsibility. It does not replace medical advice from your health care provider because your experience may differ from that of the typical patient. Talk to your health care provider if you have any questions about this document, your condition, or your treatment plan.

Author: Allison Schulman, MD MPH FASGE Reviewers: MPU Providers and Staff Edited by: Brittany Batell, MPH MSW CHES®

Icons attribution: "<u>drink water</u>" by <u>Angriawan Ditya Zulkarnain</u>, "<u>Juice Jar</u>" by <u>Yazmin Alanis</u>, and "<u>water glass</u>" by <u>inezza ardelia jassmine</u> from Noun Project are licensed under a <u>CC BY 3.0</u> license.

Patient Education by <u>University of Michigan Health</u> is licensed under a <u>Creative Commons</u> Attribution-NonCommercial-ShareAlike 4.0 International Public License. Last revised 10/2024