

Flexible Sigmoidoscopy Preparation Instructions

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?

- 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.
- **You must have a driver** who is 18 years or older with you at check in and discharge. If you do not have a driver with you at check in, we will need to reschedule your appointment.
 - This person must stay in the unit during your entire visit so that they are available as soon as you are ready to be discharged (cleared to leave the clinic or hospital). You will not be discharged unless this person is in the unit. Because your judgment may be impaired after this procedure, you will not be released to take public transportation, a taxicab, or even to walk home without another responsible adult to go with you.
- The entire procedure appointment may take at least 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 remove it.
- **Please do not wear contact lenses.**

- If you have diabetes, ask your health care provider for diet and medicine instructions.
- **View this video describing the risks and benefits of sigmoidoscopy:**
bit.ly/MM-Sigmoidoscopy
- If you must cancel or reschedule your appointment, please call the Endoscopy Call Center as soon as possible at (734) 936-9250 or toll-free at (877) 758-2626.

What supplies do I need to prepare for my flexible sigmoidoscopy?

Buy 2 sodium phosphate enemas at your local pharmacy. You will not need a prescription. One common brand is Fleet®.

- Be sure to use an enema product, and not an oral or liquid laxative.

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.

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:
Monday	Monday	Thursday	Friday
Tuesday	Tuesday	Friday	Saturday
Wednesday	Wednesday	Saturday	Sunday
Thursday	Thursday	Sunday	Monday
Friday	Friday	Monday	Tuesday
Saturday	Saturday	Tuesday	Wednesday

Follow the instructions below carefully to ensure a successful procedure.

7 days before your sigmoidoscopy	Day: _____ (Fill in the day according to the timeline table)
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- If you take aspirin or 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.
- 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 sigmoidoscopy	Day: _____ (Fill in the day according to the timeline table)
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- **96 hours before your flexible sigmoidoscopy**, 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 sigmoidoscopy, your procedure may need to be cancelled and rescheduled.

3 days (72 hours) before your sigmoidoscopy	Day: _____ (Fill in the day according to the timeline table)
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- **72 hours before your flexible sigmoidoscopy**, 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 (Glyzambi®).
 - 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:
<ul style="list-style-type: none"> • Water • Gatorade®, Pedialyte®, or Powerade® • Coffee or tea (without milk, cream, or non-dairy creamer) • Carbonated or non-carbonated soda • Fruit-flavored drinks 	<ul style="list-style-type: none"> • Chicken, beef, or vegetable broth • Any red or purple liquids • Alcohol • Milk, cream, or non-dairy creamer

You may drink these liquids:	Do not drink these liquids:
<ul style="list-style-type: none"> • Apple juice, white cranberry juice, or white grape juice • Jell-O (gelatin) or popsicles 	<ul style="list-style-type: none"> • Juice with pulp • Any liquid you cannot see 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.



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-the-counter 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 Endoscopy 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 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: bit.ly/MM-Sigmoidoscopy 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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