

WILLIAM MARKEY, MD
773-248-4427

Patient Name: _____

Appointment Date: _____ **Procedure Time:** _____ **AM/PM**

PLEASE GIVE A **48-HOUR** NOTICE CANCELING OR RESCHEDULING APPOINTMENTS. FOR VERIFYING, RESCHEDULING OR CANCELING A PROCEDURE APPOINTMENT, CONTACT DR. MARKEY'S OFFICE AT (773) 248-4427.

Arrive **60 Minutes** prior to procedure time to:

- Advocate Illinois Masonic Medical Center, 836 W Wellington Ave, Chicago, IL 60657, GI Lab Room 1402
- Rush University Medical Center Professional Building, 1725 W Harrison St, Chicago, IL 60612, Endoscopy Room 337

**Colonoscopy Preparation for the Patient Taking
Colyte Bowel Preparation**

Please inform Dr. Markey if you have an Automatic Implanted Cardiac Defibrillator (AICD). Your defibrillator may need to be temporarily deactivated during the colonoscopy.

Medications

- Please consult Dr. Markey at least seven days prior to your colonoscopy if you are taking Coumadin, Plavix, or any type of prescribed blood thinner (anticoagulant) or if you have diabetes. Dr. Markey will give you instructions on how to stop your blood thinning medications and/or how to adjust your insulin or hypoglycemic oral medications.
- Do not take iron supplements. Iron leaves a residue in the bowel that may interfere with viewing the colon lining while aspirin affects your blood clotting ability. Consult Dr. Markey for medication instructions if you are taking daily regimen of aspirin, iron, or any of the medications listed below. Since acetaminophen (Tylenol) does not affect your blood clotting ability, it may be used for headaches and/or pain.

Common Over-the-counter and Prescription Medications to Avoid

- Aspirin (Bayer)
 - Ferrous Sulfate (Feosol)
 - Ferrous Gluconate (Fergon)
 - Iron Complex (Niferex)
- You should also consult your cardiologist or primary care physician if you have less than one year history of prosthetic valve replacement, endocarditis, systemic-pulmonary shunt, or synthetic vascular grafts. According to your physician's recommendations, you may require pre-medication antibiotics before the colonoscopy procedure. Pre-Medication of antibiotics is usually prescribed on a case-by-case basis.
 - Prior to your colonoscopy procedure, the GI Lab nurse will review your medical history, allergies, all current medications you are taking and their respective doses. Please inform the GI Lab nurse of any conditions, such as heart or lung diseases that may require special attention during the procedure.
 - Unless instructed differently by Dr. Markey, take all your regular medications (except for blood thinners, aspirin, and non-steroidal anti-inflammatory drugs) with sips of water the morning of the test.

Diet

It is very important to follow the preparation instructions carefully. The rectum and colon must be completely emptied of all stool for Dr. Markey to view the lining of the colon.

Beginning two days prior to the colonoscopy, avoid eating all fruits and vegetables.

After 2:00 PM on the day before the colonoscopy you will be on a clear liquid diet for the remainder of the day. This clear liquid diet includes the items below:

Beverages: Water, clear soda (Sprite, 7-UP, ginger ale), clear and pulp-free fruit juices (apple, white grape, lemonade, etc.), coffee or tea (without milk or cream products), Gatorade, or any type of non-alcoholic clear liquid.

Desserts: Plain gelatin, popsicles, Italian Ice, clear hard candy

Seasonings: Salt, Sugar

Soups: Clear chicken broth or bouillon

Do not drink or eat anything that is orange, red, or purple.

Taking the Colyte

- Any time after 4:00 PM on the day before the colonoscopy[†] begin drinking the NuLYTELY, Colyte, or generic equivalents. You must drink eight ounces every ten minutes until it is gone. It is important to drink the entire amount even if it takes a little longer.
- If your exam is the next morning, do not eat or drink anything after midnight including water.
- If your exam is the next afternoon, you may have a clear liquid breakfast.

[†] ALTERNATE PREPARATION: If your exam is scheduled for the afternoon, rather than starting the NuLYTELY, Colyte, or generic equivalents on the previous day at 4:00 PM, you may start them instead on the day of your exam at 7:00 AM.

During the Colonoscopy

Prior to the procedure, Dr. Markey will explain the details of what will be done during the colonoscopy and answer any questions you may have. For the colonoscopy, you will be asked to lie on your left side while covered with a blanket on an examining table. For better positioning during the procedure, the nurse or Dr. Markey may ask you to rotate on your back. You will be given a pain and sedative medication through and IV (in a vein) to keep you comfortable and to help you relax during the procedure. Throughout the course of the colonoscopy, your blood pressure, heart/respiratory rate, and oxygen level will be monitored.

Once you are properly sedated, Dr. Markey will insert the colonoscope in your rectum and slowly advance it through the large intestine. The colonoscope transmits an image of the internal colon on a TV monitor so Dr. Markey can carefully exam the colon lining. If Dr. Markey sees abnormal tissue such as polyps (growths from the lining of the colon which vary in size) a biopsy may be obtained. Biopsies are taken by inserting a thin wire or looped instrument into the colonoscope to remove a small sample of tissue or remove the entire polyp (this is not painful). If bleeding is found in the colon, Dr. Markey can pass a small laser, probe, or inject medication through the scope to stop the bleeding.

The colonoscopy procedure usually lasts 30 - 60 minutes and is usually well tolerated. The sedative and pain medication should keep you comfortable during the procedure. Any discomfort that takes place usually comes as a bloating feeling when Dr. Markey puts air

into the colon to expand the folds of the colonic tissue for easier viewing or a cramping feeling when the colonoscope is advanced around the curves of the large intestine.

After the Colonoscopy

Due to patient privacy and limited space, we ask all visitors to remain in the GI Lab waiting areas. You will be monitored after the procedure in the recovery area for a minimum of 30 minutes until the effects of the sedative medications have worn off. You may experience mild cramping or bloating immediately after the procedure which should quickly resolve itself by passing gas. Unless you are otherwise instructed, you will be able to resume your diet and take your routine medication after you leave the GI Lab.

Dr. Markey will usually inform you of your test results on the day of the procedure, unless biopsy samples were taken. The biopsy results take several days to return. Please, be aware you will receive discharge instructions before leaving the GI Lab in which you may refer to them or call Dr. Markey if you have any questions or concerns.

The sedatives given to you before the colonoscopy will affect your judgment and reflexes for the rest of the day. We advise you to not drive or operate machinery until the next day and have a responsible adult accompany you home. Once home, it is important for you to recognize signs and symptoms that should be reported to Dr. Markey which are: severe abdominal pain, fevers (above 100.5 degrees), chills, or rectal bleeding more than one-half cup. Some scant bleeding may occur when you are at home.