

# Colonoscopy Preparation with GOLYTELY

**Important:** Please read all instructions at least 2 weeks before your procedure. Failure to follow these instructions may result in cancellation of your procedure.

## 1 WEEK PRIOR TO THE PROCEDURE

- **Arrange for a responsible adult (18 years or old)** to drive you home and stay with you on the day of your procedure. Your procedure will be cancelled if you do not have someone to accompany you home.
- **If you are taking any blood thinning medications**, a nurse from our office will contact you to discuss a holding plan. Please call our office if you have not heard from us 1 week before your procedure. If you are taking **Aspirin 325 mg or less**, you may continue as normal.
- **If you are diabetic**, please refer to the instructions for adjustments to your medication listed on pages 3 through 5.
- **Inform your doctor** if you have a pacemaker or other implantable electronic device.
- **Please contact our office if you started any diabetic, weight loss, or blood thinning medications after your procedure was scheduled.**
- **Procedure check-in time is subject to change per the endoscopy center.** Please follow the endoscopy center check-in instructions if different than at time of scheduling.
- You will receive a call within 7 days of procedure from Swedish Pre-Admit Clinic. Please prioritize answering/returning their call.

## 3 DAYS PRIOR TO THE PROCEDURE

- **STOP** Pepto-Bismol, iron supplements, fish oil supplements, antidiarrheal medications and mineral oil enemas. Multivitamins are OK.
- **AVOID** nuts, seeds, popcorn, and fiber supplements (Metamucil, Citrucel, etc.).
- **Begin low fiber diet** – Please see page 6 for low fiber diet guide.
- **Avoid foods that contain red, blue or purple dyes.** These may interfere with your procedure.

## 1 DAY PRIOR TO THE PROCEDURE

Take all your normal medications (**this includes blood pressure and anxiety medications**) unless otherwise instructed as above. Do not take any NSAIDs (naproxen, ibuprofen, aspirin, celecoxib, Aleve, Advil, Motrin, Excedrin, Celebrex). **Tylenol is OK.**

**Do NOT consume alcohol, use marijuana, take mind-altering medications, or use illicit drugs within 24 hours of your procedure or your procedure will be canceled.**

**Stop eating solid foods and begin clear liquid diet 24 hours before your scheduled procedure:**

You may have ONLY CLEAR LIQUIDS, such as:		
✓ Black coffee or tea (sugar is OK)	✓ Popsicles or Jell-O (not red or blue)	✓ Bouillon/broth
✓ Soda (clear or cola is OK)	✓ Fruit juice: apple, white grape, or white cranberry	✓ Water (flavored water/coconut water)
✓ Clear sports drinks: Gatorade; Pedialyte		
DO NOT DRINK:		
× Milkshakes	× Juice that is not clear: orange, pineapple, grapefruit and tomato	× Alcohol
× Smoothies	× Cooked cereal	
× Milk, dairy or non-dairy	× Barium/Oral contrast	

**Early in the day, prepare solution (GOLYTELY)** by adding lukewarm water to top line on the bottle. *Optional:* Add pharmacy-provided flavor packet to laxative mixture or Crystal Light™ to enhance taste. After capping the bottle, gently shake the bottle until all powder has dissolved. For the best taste refrigerate solution for 1 hour before drinking. Use within 48 hours.

**Between 4 - 6PM begin drinking** 8-ounces of solution every 15 minutes, until you finish 2 liters (half of the container). Place the rest in the refrigerator until time for the second dose. Drink at least an additional 16-ounces of water to follow your first dose and then continue clear liquids all evening until bedtime.

**Additional Information:**

Bowel movements can take up to 2 hours to start after beginning the prep, but may take 5-6 hours, depending on the person.

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If you develop nausea or vomiting, stop and take a 30-minute break from drinking the bowel prep, then resume drinking at a slower rate. Chilling the prep ahead of time may also help reduce nausea. Try using a straw. Please attempt to drink all the prep, even if it takes you longer. If you are unable to finish the prep, stop and call our office for further instructions.

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A split prep is proven to be the most effective for a successful colonoscopy. While this can make for an early morning, it is essential that you follow the directions provided so you have a high-quality exam. If stool residue remains in your colon, your doctor may not be able to find and remove all polyps, cancer could be missed, or your procedure may need to be rescheduled or repeated.

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### DAY OF THE PROCEDURE

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Take all your normal medications (this **includes blood pressure & anxiety medications**) unless otherwise instructed as above. Do not take any NSAIDs (naproxen, ibuprofen, aspirin, celecoxib, Aleve, Advil, Motrin, Excedrin, Celebrex). **Tylenol is OK.**

**Six (6) hours prior to check-in time, begin drinking the remaining 2 liters of the prep solution.** Drink 8-ounces of solution every 15 minutes until the bottle is empty. Continue to drink additional clear fluids **UNTIL 3 hours** before your procedure. Your stool should be **CLEAR YELLOW** and look like urine. **Please do not stop drinking your prep just because you have had several clear bowel movements. It is very important to drink ALL of your prep.**

**Three (3) hours prior to check-in time, STOP** taking anything by mouth, including gum, water, mints, and lozenges. Not following this essential instruction may cause a cancellation of your procedure.

Please plan to spend 2 – 3 hours at the facility for your procedure from check-in to discharge.

### AFTER THE PROCEDURE

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**All patients must have a responsible adult (18 years or older) or approved Cabulance service available to take them home after procedure.** Please refer the attached escort policy. It is important to arrange transportation per the policy provided. Patients without valid escorts may be turned away at time of procedure. **You CANNOT drive, walk, take a taxi / Uber / Lyft, use Hopelink, or take public transportation home WITHOUT a responsible adult with you.** It is very important that you have someone you trust to receive your discharge instructions. You should not plan to drive for at least 12 hours after your procedure. **AVOID** — Alcohol and sedatives for 24 hours after the procedure. If you had biopsies or polyps removed, please consult with your doctor when to resume blood thinners.

Our gastroenterologists recommend that you not plan to travel in an airplane or to remote areas after having a large polyp removed due to a small bleeding risk. Please plan your trips or vacations accordingly.

You will receive discharge instructions from a nurse after the procedure, including an after-visit summary with the results. If tissue was biopsied, you will get a letter, MyChart message, or phone call within 10-14 days of your procedure with your results. If you have not heard within 21 days, please contact our office via phone or MyChart.

**Cancellations/Reschedules: If you need to cancel/reschedule your procedure, please give us 72 hours' notice and call our office at (206) 215-4250.**

*Please check with your insurance carrier to confirm benefits, as plan coverage may change from time to time. If your insurance coverage changed from the time of scheduling, please call the number above to update your care team ASAP as we may need to check if your new insurance plan is in-network and/or requires prior authorization.*

**For billing or coding questions** please contact our billing department at 206-320-4476 or 888-294-9333.

## Diabetes, Weight Loss, & Cardiovascular Medication Management During Colonoscopy Procedure

*If you are using any of the medications listed below, please follow the outlined guidelines.*

These are general guidelines that include specific instructions on how to take your diabetes medications, clear liquid nutrition information, and guidance on what to do if you become hypo- or hyperglycemic. This is only intended to be used by patients that have either Type 1 or Type 2 diabetes. Please call the health care provider who manages your diabetes if you have an insulin pump or if you have specific questions or concerns that are not answered in this document.

For people with diabetes, any procedure that causes you to miss a meal will require special planning to safely manage your blood sugar. It is important to reduce your diabetes medications and monitor your blood sugar while you are doing the bowel prep for colonoscopy. If you are taking insulin or have a history of low blood sugar, check your blood sugar every 4-6 hours on the day prior to the procedure and on the day of the procedure, as well as any time you feel signs of low blood sugar or high blood sugar. Let your primary care provider know as soon as possible if you do not have a blood sugar meter (glucometer) or if you need any testing supplies refilled. Refer to your medication(s) below for adjustments unless you have been given other instructions by your health care provider.

If you have any questions regarding these instructions, please call the clinic at 206-215-4250 and ask to speak to a nurse. If you have detailed questions, please contact your prescribing physician.

Diabetic patients should schedule appointments for early in the day so that you can eat afterwards and take their medications as close to the usual time as possible.

### Injectable Medications:

	<b>Long-acting Insulin Products:</b> BASAGLAR®, HUMULIN N®, LANTUS®, LEVEMIR®, NOVOLIN N®, NPH®, SOLIQUA®, TOUJEO®, TRESIBA®, XULTOPHY®	<b>Rapid or short-acting Insulin Products:</b> ADMELOG®, APIDRA®, FIASP®, HUMALOG®, HUMULIN R®, NOVOLIN R®, NOVOLOG®, REGULAR® INSULIN	<b>Mixed or intermediate Insulin Products:</b> HUMALOG MIX 75/25®, HUMULIN 70/30®, NOVOLIN 70/30®, NOVOLOG MIX 70/30®
<u>1 Day Prior to the Procedure:</u>	Take half of your usual dose.	Take your usual dose in the morning.  DO NOT take once you start your clear liquid diet.	Take half of your usual dose.
<u>Day of the Procedure:</u>	Take half of your usual dose.	DO NOT take prior to your procedure.  Resume your next dose once you start eating a normal diet again after the procedure.	DO NOT take prior to your procedure.  Resume your next dose once you start eating a normal diet again after the procedure.

**Other diabetes medications:**

	<b>GLIMEPIRIDE, GLIPIZIDE, GLYBURIDE, CHLORPROPAMIDE, NATEGLINIDE, REPAGLINIDE, TOLAZAMIDE, TOLBUTAMIDE, ROSIGLITAZONE, PIOGLITAZONE, NATEGINIDE, ACARBOSE, MIGLITOL, PRAMLINTIDE, and all DPP-4's: (Januvia, Onglyza, Tradjenta, Nesina)</b>	<b>METFORMIN</b>
<u>1 Day Prior to the Procedure:</u>	Take your usual dose in the morning.  DO NOT take once you start your clear liquid diet.	DO NOT take day before.
<u>Day of the Procedure:</u>	DO NOT take prior to your procedure.  Resume your next dose once you start eating a normal diet again after the procedure.	DO NOT take prior to your procedure.  Resume your next dose once you start eating a normal diet again after the procedure

**Other diabetes, weight loss, or cardiovascular medications:**

<b>GLP-1 Agonist</b>	<b>SGLT2*</b>	<b>*SGLT2 exception</b>	<b>Phentermine</b>
<ul style="list-style-type: none"> <li>Dulaglutide (Trulicity)</li> <li>Exenatide extended release (Bydureon bcise)</li> <li>Exenatide (Byetta)</li> <li>Semaglutide (Ozempic, Wegovy, Rybelsus)</li> <li>Liraglutide (Victoza, Saxenda)</li> <li>Lixisenatide (Adlyxin)</li> <li>Tirzepatide (<b>Mounjaro</b>, Zepbound)</li> </ul>	Canaglifozin (Invokana) Dapaglifozin (Farxiga) Empaglifozin (Jardiance) Ertuglifozin (Stelagro) Brenzavvy (bexaglifloxin)	<ul style="list-style-type: none"> <li>Ertuglifozin (Steglatro)</li> </ul>	<ul style="list-style-type: none"> <li>Pro-Fast SA</li> <li>Ionamin</li> <li>Fastin</li> <li>Adipex-P</li> <li>Pro-Fast HS</li> <li>Phentercot</li> <li>Oby-Cap</li> <li>Phentride</li> </ul>
<ul style="list-style-type: none"> <li>If you take your medicine weekly, hold for 7 days prior to procedure and <b>ENSURE YOU FOLLOW A 24 HOUR CLEAR LIQUID DIET. NO BREAKFAST DAY BEFORE PROCEDURE.</b></li> <li>If you take your medicine daily, hold for 24 hours prior and <b>ENSURE YOU FOLLOW A 24 HOUR CLEAR LIQUID DIET. NO BREAKFAST DAY BEFORE PROCEDURE.</b></li> </ul>	Hold for 3 days before procedure	Hold for 4 days prior to procedure	Hold for 7 days before procedure

\* If you are prescribed a 2-day bowel preparation, please follow the 1 day prior to procedure instructions on both days.

**Clear Liquid Nutrition**

During the portion of the prep where you are to consume only clear liquids and the bowel prep solution, you should aim for **45 grams of liquid carbohydrates for full meals and 15-30 grams of liquid carbohydrates for snacks**. You should aim to consume 30 to 45 grams of liquid carbohydrates every 4-5 hours, during waking hours. Please continue to consume clear liquids without carbohydrates in between clear liquid meals and snacks. Please see below for carbohydrate counts for various clear liquid choices:

- Apple juice and white grape juice (4 ounces) – 15 grams
- Sports drinks such as Gatorade (8 ounces) – 14 grams
- Jell-O (4 ounces - regular sweetened) – 15 grams
- Popsicles – 15 grams
- Sugar (1 teaspoon to sweeten coffee or tea) – 4 grams

## Hypoglycemia (Low Blood Sugar)

Hypoglycemia is the term used when you have too little sugar (glucose) in your blood. The threshold for hypoglycemia is lower than 70 mg/dL. When you are not eating your normal diet and are instead only consuming clear liquids, you are at an increased risk of becoming hypoglycemic, especially if you continue your diabetes medications as normal (see instructions above for how to modify your medications while undergoing bowel preparation). It is recommended that you always carry a source of fast-acting sugar (such as glucose gel, honey, or fruit juice) and a snack in case of hypoglycemia. Please see below for a list of symptoms and step-by-step instructions to follow should you become hypoglycemic.

### Symptoms:

- Shakiness or dizziness
- Cold, clammy skin or sweating
- Feelings of hunger
- Headache
- Nervousness
- A hard, fast heartbeat
- Weakness
- Confusion or irritability
- Blurred vision
- Having nightmares or waking up confused or sweating
- Numbness or tingling in the lips or tongue
- Loss of consciousness (fainting)
- Seizures

### What you should do:

1. First check your blood sugar. If it is too low (out of your target range), eat or drink 15 to 20 grams of fast-acting sugar. This may be 4 ounces (half a cup) of apple juice or regular (non-diet) soda, a snack cup of Jell-O (with sugar, NOT the sugar-free variety), or 4 to 5 Life Savers™ candies. Don't take more than this, or your blood sugar may go too high.
2. Wait 15 minutes. Then recheck your blood sugar if you can.
3. If your blood sugar is still too low, repeat the steps above and check your blood sugar again. If your blood sugar still has not returned to your target range, contact your healthcare provider or seek emergency care.
4. Once your blood sugar returns to target range, eat a snack that is allowed on your clear liquid diet (for example, Jell-O that is NOT red, purple, or blue in color.)

## Hyperglycemia (High Blood Sugar)

Hyperglycemia is the term used when you have too much sugar (glucose) in your blood. The threshold for hyperglycemia is greater than 126 mg/dL. Please see below for a list of symptoms and step-by-step instructions to follow should you become hyperglycemic.

### Symptoms:

- Thirst, dry mouth
- Frequent need to urinate
- Feeling tired
- Nausea and vomiting
- Itchy, dry skin
- Blurry vision
- Fast breathing and breath that smells fruity
- Weakness
- Dizziness
- Wounds or skin infections that don't heal
- Unexplained weight loss if hyperglycemia lasts for more than a few days
- Ketones in your urine
- Coma

### What you should do:

1. Check your blood sugar. Contact your healthcare provider if your blood sugar is above 400 mg/dL.
2. Drink plenty of sugar-free, caffeine-free liquids such as water. Don't drink fruit juice.
3. Follow your exercise plan.
4. Take your insulin or diabetes medicines as directed by your healthcare team. Also test your blood sugar as directed. If the plan is not working for you, discuss it with your healthcare provider

# Low Fiber Diet:

	Milk & Dairy	Breads & Grains	Meat & Seafood	Legumes	Fruits
Okay to Eat:	<ul style="list-style-type: none"> <li>✓ Milk</li> <li>✓ Cream</li> <li>✓ Hot Chocolate</li> <li>✓ Buttermilk</li> <li>✓ Cheese</li> <li>✓ Sour Cream</li> </ul>	<ul style="list-style-type: none"> <li>✓ Breads and grains made with refined white flour</li> <li>✓ White rice</li> <li>✓ Plain crackers</li> <li>✓ Low-fiber cereal (cream of wheat/corn flakes)</li> </ul>	<ul style="list-style-type: none"> <li>✓ Chicken</li> <li>✓ Turkey</li> <li>✓ Lamb</li> <li>✓ Lean Pork</li> <li>✓ Veal</li> <li>✓ Fish and seafood, except salmon</li> </ul>		<ul style="list-style-type: none"> <li>✓ Juice without pulp</li> <li>✓ Apple sauce</li> <li>✓ Canned or cooked fruit without seeds or skins</li> <li>✓ Cantaloupe and Honeydew</li> <li>✓ Peeled apricots and peaches</li> </ul>
Do Not Eat:	<ul style="list-style-type: none"> <li>* Yogurt mixed with seeds, nuts, granola or fruit with skins/seeds</li> </ul>	<ul style="list-style-type: none"> <li>* Brown or wild rice</li> <li>* Whole grain bread, rolls, pasta or crackers</li> <li>* Whole-grain or high-fiber cereal (granola, oatmeal)</li> <li>* Bread or cereal with nuts or seeds</li> </ul>	<ul style="list-style-type: none"> <li>* Salmon</li> <li>* Tough meat with gristle</li> </ul>	<ul style="list-style-type: none"> <li>* Dried peas</li> <li>* Dried beans</li> <li>* Lentils</li> <li>* Any other legumes</li> </ul>	<ul style="list-style-type: none"> <li>* Fruits with seeds, skins or membranes (berries, pineapple, apples, oranges and watermelon)</li> <li>* Dried fruit</li> <li>* Any cooked or canned fruit with seeds</li> </ul>
	Nuts & Seeds	Fats & Oils	Desserts	Soups	Vegetables
Okay to Eat:	<ul style="list-style-type: none"> <li>✓ Creamy (smooth) nut butters</li> </ul>	<ul style="list-style-type: none"> <li>✓ Butter</li> <li>✓ Margarine</li> <li>✓ Vegetable &amp; other oils</li> <li>✓ Mayonnaise</li> <li>✓ Salad dressing without seeds or nuts</li> </ul>	<ul style="list-style-type: none"> <li>✓ Custard</li> <li>✓ Plain pudding</li> <li>✓ Ice Cream (without nuts or fruit)</li> <li>✓ Sorbet or Sherbet</li> <li>✓ Jell-O (not blue or red)</li> <li>✓ Cookies or cake made with white flour without seeds, nuts or fruit.</li> </ul>	<ul style="list-style-type: none"> <li>✓ Broth, bouillon, consommé and strained soups</li> <li>✓ Milk or cream-based soup, strained</li> </ul>	<ul style="list-style-type: none"> <li>✓ Canned or cooked vegetables without seeds or skins</li> <li>✓ Potatoes without skins</li> </ul>
Do Not Eat:	<ul style="list-style-type: none"> <li>* Nuts</li> <li>* Chunky nut butter</li> <li>* Seeds (fennel, sesame, pumpkin, sunflower)</li> </ul>	<ul style="list-style-type: none"> <li>* Salad dressing with seeds or nuts</li> </ul>	<ul style="list-style-type: none"> <li>* Coconut</li> <li>* Anything with seeds or nuts</li> <li>* Anything with red or blue dye</li> <li>* Anything made with whole grain flour</li> </ul>	<ul style="list-style-type: none"> <li>* Unstrained soups or soups with herbs</li> <li>* Chili</li> <li>* Lentin soup</li> <li>* Pea soup</li> <li>* Dried bean soup</li> <li>* Corn soup</li> </ul>	<ul style="list-style-type: none"> <li>* Raw vegetables, contain skin, seeds or peel</li> <li>* Corn</li> <li>* Potatoes with skin</li> <li>* Cucumbers</li> <li>* Tomatoes</li> <li>* Cooked cabbage or brussels sprouts</li> <li>* Green peas</li> <li>* Squash</li> <li>* Lima beans</li> <li>* Onion</li> </ul>