

Colonoscopy Preparation with SUTAB

Important: Please read all instructions at least 2 weeks before your procedure. Failure to follow these instructions may result in cancellation of your procedure. Ensure that you have received or picked up your bowel preparation solution and have it on-hand to prevent last-minute cancellations!

7 DAYS PRIOR TO THE PROCEDURE

- **Arrange for a responsible adult (18 years or older)** 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**, you will be informed how to safely stop them pre-procedure. If you have not heard from our office 1 week prior to your procedure, please call and ask to speak to a GI nurse 206-215-4250.
- **If you are diabetic, taking diabetes medications, taking blood pressure or weight loss medications, or on naltrexone**, please refer to the instructions for adjustments to your medication listed below. **Please contact our office if you have started taking blood thinning medications after your procedure was scheduled.**
- **Inform your doctor** if you have a pacemaker, defibrillator, or other implanted electronic device.
- **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 may receive a call from the endoscopy center or Pre-Anesthesia Clinic. Please prioritize answering these calls.

3 DAYS PRIOR TO THE PROCEDURE

- **AVOID** nuts, seeds, popcorn, and fiber supplements (Metamucil, Citrucel, etc.).
- **Begin low fiber diet** – Please see below 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

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: | | |
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| ✓ 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 | |

Prepare tablets of SUTAB – Open first bottle of 12 tablets and fill the provided container with water to the 16-ounce fill line.

Between 4 - 6 PM: Swallow 1 tablet of SUTAB every 1-2 minutes. You should finish the 12 tablets and 16 ounces of water within 20 minutes. **1 hour after** the last tablet is ingested, fill the provided container with water to the 16-ounce fill line and drink the entire amount over 30 minutes. **30 minutes later**, fill the provided container with water to the 16-ounce fill line and drink the entire amount over 30 minutes. Drink at least an additional 16-ounces of water to follow 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.

If you develop nausea or vomiting, stop and take a 30-minute break from taking the bowel prep, then resume at a slower rate. Try drinking through a straw. Please take all the pills, even if it takes you longer. If you are unable to finish the prep, stop and call our office for further instructions.

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.

DAY OF THE PROCEDURE

Six (6) hours prior to check-in time, open second bottle of 12 tablets of SUTAB and fill the provided container with water to the 16-ounce fill line. **Swallow 1 tablet of SUTAB every 1-2 minutes**. You should finish the 12 tablets and 16 ounces of water within 20 minutes. **1 hour after** the last tablet is ingested, fill the provided container with water to the 16-ounce fill line and drink the entire amount over 30 minutes. **30 minutes later**, fill the provided container with water to the 16-ounce fill line and drink the entire amount over 30 minutes.

Continue to drink additional clear fluids **UNTIL** 3 hours before check-in. Your stool should be **CLEAR YELLOW**, 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

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 safely resume blood thinners, if you take them.

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 3 business days' 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.

Medication Management Pre-Colonoscopy Procedure

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

Injectable Diabetes Medications:

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

Other diabetes medications:

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

Other diabetes, weight loss, blood pressure, or cardiovascular medications:

| GLP-1 Agonist | SGLT2* | *SGLT2 exception | Other weight loss prescription | SOME blood pressure prescriptions | SOME diuretics |
|---|--|-------------------------------------|----------------------------------|--|--|
| <ul style="list-style-type: none"> Dulaglutide (Trulicity) Exenatide extended release (Bydureon bcise) Exenatide (Byetta) Semaglutide (Ozempic, Wegovy, Rybelsus) Liraglutide (Victoza, Saxenda) Lixisenatide (Adlyxin) Tirzepatide (Mounjaro, Zepbound) | <ul style="list-style-type: none"> Canaglifozin (Invokana) Dapaglifozin (Farxiga) Empaglifozin (Jardiance) Ertuglifozin (Stelagro) Brenzavvy (bexaglifloxin) Synjardy XR | Ertuglifozin (Steglatro) | Phentermine, Qsymia | (Angiotensin II Receptor Blockers ARBs) losartan, valsartan, candesartan, irbesartan | Bumetanide, furosemide, amiloride, spironolactone, triamterene |
| <ul style="list-style-type: none"> ✓ If you take your GLP-1 weekly, hold for 7 days prior. ✓ If you take your GLP-1 daily, hold for 24 hours prior. | Hold for 3 days before procedure | Hold for 4 days before to procedure | Hold for 4 days before procedure | Hold for 1 day before procedure. | Hold the day of procedure. |

Other medication instructions:

| Herbal supplements, oily capsules, Pepto-Bismol, Iron supplements, Chinese remedies, excess vitamins and elements* | Naltrexone* | Non-Steroidal Anti-inflammatory Medicines (NSAIDS) |
|--|--|---|
| Hold for 7 days before procedure *(Multivitamins are OK) | Hold oral Naltrexone 7 days before Hold injectable Naltrexone 4 weeks before *If Naltrexone is being prescribed for treatment of opioid addiction, ok to continue. | Aspirin, ibuprofen, Celebrex (celecoxib), diclofenac, etodolac, indomethacin, ketorolac, nabumetone, meloxicam, naproxen, sulindac etc can safely be continued in the pre-procedural period. Caution is recommended in the early post-procedure period due to increased risk of bleeding complications. Your endoscopist will give you further instructions post-procedure. |

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

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 the listed medication guidelines in this document 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 more detailed diabetes questions, please contact your prescribing physician.

It is recommended that diabetic patients schedule appointments early in the day.

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. 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:

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