

Nulytely/Colyte 2 Day Preparation

Procedure is scheduled with: _____

Date: _____

Arrival time: _____

Procedure time: _____

Procedure Location

Out Patient Endoscopy Locations			
Clayton 900 S Lombard Street. Suite# 104 Phone: 919-341-3547	Raleigh 2601 Lake Drive Suite#210 Phone: 919-783-4888	Wake Forest 10540 Ligon Mill Road Suite# 109 Phone: 919-439-3393	Wilson 2402 Camden St SW Suite #300 Phone: 252-237-4100
Out Patient at Wake Med Hospital Cary North New Bern		Out Patient at Rex Hospital	

You will be sedated for this procedure and you must have:

- Adult driver, 18 years or older to bring you to your procedure
- Adult driver must stay at the facility for the duration of the procedure
- Adult driver must drive you home

If you take Phentermine it **MUST** be stopped 14 days prior to procedure

If you take coumadin, warfarin, pradaxa, or any other blood thinner please call our office for specific instructions

The facility has the right to delay or cancel your procedure in the event you do not have an adult with you to drive you home.

If you are unable to keep your appointment, please call our office as soon as possible to reschedule. We do reserve the right to charge for missed appointments or appointments cancelled less than 72 hours in advance.

Diabetic Patients

If taking diabetic medication:

- Day before procedure:
AM --Take your normal insulin and/or oral medications.
PM --Take ½ of PM insulin dose, NO oral diabetic medication.
- Day of procedure:
Do not take any diabetic medications until after the procedure.

Asthma Patients

If using an inhaler

- Bring inhaler with you on day of procedure

CPAP or VPAP

- If you use either of these machine, you are required to bring it with you

**WAKE ENDOSCOPY CENTER/ CLAYTON ENDOSCOPY CENTER
NULYTELY/COLYTE ONE DAY PREP EVENING BEFORE (CONSTIPATION ONLY)
PREPARATION FOR COLONOSCOPY**

You will need to drink a laxative solution called NULYTELY to clean your colon. You must complete the entire prep to ensure the most effective cleansing.

PRIOR TO YOUR PROCEDURE YOU WILL NEED TO PURCHASE:

- 1 Gallon of Nulytely. (prescription enclosed)
- 1 Reglan tablet (Metoclopramide) optional (prescription enclosed)
- 8 Dulcolax (Bisacodyl) tablets (over the counter, no prescription required)

***BE SURE TO LET THE NURSE KNOW IF YOU ARE ON COUMADIN, WARFARIN, PRADAXA, or any other blood thinners. AS SOON AS POSSIBLE**

**5 days prior to your procedure, stop oral iron supplements. Please avoid sesame seeds and nuts

***Diabetic medication adjustments: Day before procedure, take your normal AM insulin and/or oral medications. Take ½ of pm insulin dose, NO oral diabetic medication. Day of procedure: do not take any diabetic medications until after the procedure.

2 DAYS BEFORE EXAM: _____

1. Full Liquid diet for all meals and snacks (ice Cream, creamed soups, milk, and thinned grits.
2. **AT 6 PM: take 4 Dulcolax tablets.**

DAY BEFORE PROCEDURE: _____

Drink clear liquids only for all snacks and meals. **NO SOLID FOODS** or milk products. **Clear liquid diet:** coffee, tea, soft drinks, Jell-O, clear broth, popsicles, clear fruit juices, Gatorade, water, Snapple, powdered juices. Avoid red or purple liquids
***Important note: staying well hydrated during this prep is extremely important. Force fluids all day prior to and after beginning the bowel prep. **You may have clear liquids until midnight.**

1. Add water to "fill line" of Nulytely/Colyte container. Mix until powder is dissolved and refrigerate.
2. **At 2 PM:** take 4 Dulcolax tablets.
3. **At 4:30 pm:** have an early supper of clear liquids and you may have clear liquids until midnight.
4. **At 5:00 pm:** take Reglan (optional) the prep may cause nausea and sometimes vomiting. Reglan taken in advance of the prep should reduce nausea and vomiting.
5. **At 5:30 pm:** drink 8 ounces of Nulytely/Colyte. Drink 8 ounces every 15 minutes until the prep is finished.

*If you experience nausea and or bloating, slow down drinking the prep, space interval to 20-25 minutes.

***Do not plan to go out anywhere after you have started drinking the prep. The prep will cause diarrhea to cleanse your bowel for the procedure.**

*You may wish to use diaper rash cream or Vaseline to protect your rectum as the prep makes you have many bowel movements.

NOTHING TO DRINK AFTER MIDNIGHT AND NOTHING TO EAT UNTIL AFTER YOUR PROCEDURE. YOU MAY TAKE YOUR AM MEDICATIONS WITH A SMALL AMOUNT OF WATER (SIP) ANYTHING MORE CAN RESULT IN A DELAY OR CANCELLATION OF YOUR PROCEDURE.

DAY OF EXAMINATION _____

Please take all regularly scheduled medications with a small amount (sip) of water.

If you use inhalers, please bring them with you

If you use a CPAP or VPAP machine, you are required to bring it with you

COLONOSCOPY

Colonoscopy is the visual examination of the lining of the colon. The colon is about 5-6 feet long. The purpose of the exam is to identify any abnormalities by inserting a flexible fiberoptic tube into the anus. The tube, which is about the thickness of your finger, is slowly passed through the length of the colon to the cecum.

The results obtained from the colonoscopy may help explain the cause of symptoms such as rectal bleeding, pain, or diarrhea. A screening colonoscopy is recommended for anyone age 50 or older.

How do I prepare for the examination?

The colon must be thoroughly clean in order for the exam to be accurate and complete. Please follow the enclosed preparation instructions.

What should I expect during the examination?

While lying on your left side with your knees bent, the physician will perform a finger exam of the anus and rectum. The colonoscopy is done by inserting a long flexible lighted tube into the rectum and beyond. In many cases, the instrument can be inserted throughout the entire extent of the large intestine, permitting a complete examination. The patient during the course of the examination usually experiences abdominal cramps. However, you will be sedated with medications, which will help the cramps. Be sure and tell us if you are allergic to any medications.

What is a polyp?

A polyp is a growth that is attached to the inside of the colon. Most of these growths are benign but their removal is strongly recommended so that the polyp may be examined under the microscope, permitting an exact diagnosis to be made. In addition, benign polyps at times may become malignant with the passage of time. Therefore, we believe they should be removed. At times, a polyp is discovered unexpectedly during the course of a colonoscopy examination, which is being done for other reasons. We recommend that all patients give us permission ahead of time to remove polyps if they are discovered.

What happens if a polyp is discovered?

If a polyp is discovered, a thin snare wire is passed through the colonoscope and the polyp is encircled. The snare is tightened and an electric current is passed through the wire, which cuts off the polyp. The polyp is then brought out of the colon and sent to the pathologist for further examination.

Are there any possible complications?

The possible complications of colonoscopy and polypectomy (polyp removal) include perforation (rupture) of the colon, hemorrhage from the colon and side effects due to the medications (sedatives) which are given. In very rare circumstances, death could result from a complication.

Please notify the physician if you are taking any blood thinners (coumadin, aggrenox, plavix). Please review all of your medications with the office as well as any medication allergies.

What can I expect after the exam?

You can expect to feel bloating for about 30-60 minutes after the exam. This sensation will be relieved as gas is passed. You may feel sleepy for several hours after the exam from the medications given prior to the exam. Do not plan to return to work, drive or sign any legal documents for the remainder of the day.

If your physician removes polyps or takes a tissue biopsy during your examination, his/her nurse will contact you in 7-10 business days with the pathology results.