

PATIENT NAME: @NAME@ PROCEDURE: PHYSICIAN: LOCATION:

DATE: ARRIVAL TIME: Procedure time:

****PLEASE HAVE NOTHING BY MOUTH AFTER ON (including gum or mints)**

Additional Instructions:

SUTAB Bowel Preparation

Please read the entire prep instructions at least one week before your procedure. If you have questions, please call our office:

Office number: 859-341-3575

Scheduling: 859-655-4480 between 8 am and 4:30 pm

Center: 859-655-4475 between 6 am and 2:30 pm

**Procedure
Ambulatory Surgery**

Please note that not following these instructions may result in cancellation / rescheduling of the procedure. Please contact the office if there have been any changes in your medical condition from the time you had scheduled your procedure to the date of your procedure (including but not limited to: heart attack, stroke or beginning taking blood thinning medication) Not doing so may result in cancellation of your procedure.

If you are unable to keep your appointment, please provide at least a 72 hour notice. Not doing so will result in a \$100 cancellation / no show fee.

A thorough cleansing of the bowel is essential for a successful exam. Please read and follow all instructions carefully. Recent studies have shown that splitting the preparation into an evening dose and a morning dose is more effective than drinking it all at once. Be sure to follow our instructions exactly as they are written, even if the result of your prep is clear prior to finishing all of the prep. An inadequate prep could result in rescheduling your procedure or the interval of the next colonoscopy could be reduced due to inadequate prep.

Your safety is our primary concern. Please arrange a responsible adult (age 18 or older) to drive you to our facility, stay at our facility during your procedure and drive you home when you are discharged. It is necessary that your responsible party remains at the facility during your procedure or the procedure will not be able to be performed. Please anticipate remaining at our facility 2-4 hours. You are to have a responsible adult with you until the effects of the sedation have worn off which may take several hours.

If you have a Port-A-Cath that you would like for us to use for your procedure, it is our policy that the Port-A-Cath is required to be flushed within 30 days of your procedure or we will be unable to access the port.

7 or more days prior to the procedure

- Pick up SuTab from your pharmacy
- Purchase four chewable Simethicone tablets (example- Gas X, available over the counter)
- Arrange for a ride. If you do not have a ride, we will cancel the procedure. Please remember that by law, you cannot drive the rest of the day of the colonoscopy.
- Read and familiarize yourself with the preparation instructions below.
- Please note if you take the medication Phentermine (ie- Adipex, Oby-Cap, Suprenz, T-diet, Zantryl, Lomaira) you will need to stop this medication 7 days prior to procedure.
- If you are taking medications for weight loss/diabetes, oral or injectables, you will need to hold them for 8 days prior to your procedure date. These include GLP-1, semiglutides, and dulaglutides (examples: Trulicity, Ozempic, Wegovy, Rybelsus, etc),

Contrave and phentermine. If you have any questions about these medications, please reach out to the office.

- Review and plan dietary needs.
- Recommended to avoid nuts, seeds or berries with seeds the week prior to your procedure.

Examples of clear liquids: (start clear liquid diet 1-2 days prior to procedure as instructed below)

- Coffee or Tea (**No** milk or creamer)
- Dietary Supplements: boost or ensure any flavor except chocolate or strawberry. **No supplement after midnight.**
- Plain Jell-O / Popsicles (**No** red or purple color)
- Clear soups and/or broth (strain all vegetables and noodles)
- Clear fruit juice- **No** pulp
- Sorbet that does **not** contain milk or chunks of fruit.
- Soft drinks / Ginger Ale / Gatorade (**No** red or purple)
- **NO** milk, added sugar, grapefruit juice, Tomato juice
- DO **NOT** drink Alcohol

IF YOU TAKE BLOOD THINNING MEDICATION

We are verifying with your Cardiologist that you may hold your blood thinner. Please wait until you hear from us before stopping the medication. We have verified with your Cardiologist that you may hold your blood thinner

**_____.
STOP TAKING THE MEDICATION: _____ DAYS PRIOR TO
PROCEDURE.**

**YOU WILL BE INSTRUCTED ON WHEN TO RESUME TAKING YOUR BLOOD THINNER
FOLLOWING YOUR PROCEDURE**

- Begin clear liquid diet 1 days prior to procedure per physician recommendation if checked here.
- Begin clear liquid diet 2 days prior to procedure per physician recommendation if checked here.

1 day prior to the procedure

- Start on a clear liquid diet when you get up and continue all day. Do not eat any solid foods. Do not consume anything that is red. Throughout the day, make sure to drink at least 8 glasses (2 quarts) of fluids.
- If you have Diabetes: drink dietary supplements throughout first day of the colon prep up until midnight (no chocolate flavor)

At 4 pm complete steps 1 through 3:

Step 1 – Fill the provided cup with 16 oz. of water (to the fill line) and open one bottle of 12 tablets. Take all 12 tablets with the entire 16 oz. of water over the course of 20 minutes.

Step 2 – One hour after completing the tablets. Fill the provided cup with 16 oz. of water and drink slowly over the course of 30 minutes. Make sure to complete all of the water.

Step 3 – 30 minutes after completing step 2, Fill the provided cup with 16 oz. of water and drink slowly over the course of 30 minutes. Make sure to complete all of the water.

Bowel movements usually start within 1-2 hours after ingestion of the first tablet and can continue 1-2 hours after you finish. If at any

point during the process you feel nauseated, slow down the speed at which you drink the water.

- Take 2 Simethicone tablets with the last glass of water.
- Continue to drink clear liquids until bedtime. It is important that you drink large amounts of liquid in order to keep your body hydrated and for colon cleansing.

On the day of the procedure

- **Starting 6 hours before your scheduled arrival time, repeat steps 1 through 3 using the remaining bottle of 12 tablets of SUTAB. You must finish the final glass of clear liquid at least 2 hours before your procedure**
- Take 2 Simethicone tablets with the last glass.
- **STOP drinking any liquids 2 hours before your scheduled arrival time.**
- **Take your heart (do not take blood thinner), blood pressure and seizure medications the morning of the procedure.**
- **If you have diabetes, do not take your oral diabetic medication today.**
 - Take ½ of long acting insulin
 - Hold regular insulin
 - Bring a dose of regular insulin
- Refrain from all tobacco products the day of your procedure
- If you wear dentures avoid using adhesive the day of the procedure as the dentures may be removed.
- If you use an inhaler please bring it with you the day of the procedure.
- Be advised premenopausal women will be required to provide urine specimen for pregnancy test prior to procedure.

FREQUENTLY ASKED QUESTIONS:

- **Is there any way that I can make this taste better?** You can try sucking on hard candy or rinse your mouth with water or a mouthwash.
- **Why avoid red liquids?** The red color can persist in the colon and potentially look like blood.
- **One of the medications I was instructed to take the morning of my procedure is red. Can I take it?** Medications should be taken the morning of your exam regardless of the color.
- **I feel like vomiting and do not think I can drink any more. What should I do?** It is important that you continue to drink the solution if possible. Without a clean bowel, the doctor will not be able to thoroughly see inside of your colon to complete the examination. You can stop drinking for 30 minutes, then resume. If you do vomit, wait 30-60 minutes then begin drinking the solution again. If not improved, call us and have a phone number of an open pharmacy in case we need to call in a prescription.
- **I drank a lot of the solution and have not gone to the bathroom yet. What should I do?** Keep drinking and be patient. Most people have a bowel movement after an hour; however, some patients may take several hours.
- **I am taking the prep and now having loose, watery stool. Do I still need the rest of the prep?** Yes, you may have solid stool higher in the colon that needs to be eliminated.
- **I already have diarrhea before taking the prep, do I still need to take the laxative?** Yes, you must take the entire prep. Your colon is approximately six feet long. The entire colon must be emptied for your physician to see the colon clearly.
- **I see yellow color in the toilet bowl and a few flecks. What do I do?** If you drank the entire solution or if your last bowel movements were clear enough that you were able to see the bottom of the toilet, you should be fine. It is okay if you have some flecks of

material. The yellow color is a result of bile that normally colors the feces. This should not interfere with the examination.

- **My bottom is sore. What can I do?** To clean the area, avoid rubbing. Gently pat with a wet washcloth
- **Can I drink alcoholic beverages?** Alcoholic beverages can cause dehydration and some wines thin your blood. Therefore, we strongly suggest that you do not drink any alcoholic beverages prior to your procedure.
- **Can I chew gum or suck on candy?** Yes, up until 2 hours prior to arrival. Nothing with soft centers or red color
- **What if I am still passing stool the morning of the test?** Please call the office.
- **Can I brush my teeth?** Please do. You may brush your teeth and rinse your mouth without swallowing.
- **Can I have chicken soup?** You can have broth; no noodles, chicken or vegetables are allowed.
- **Can I have the procedure if I am on my period?** Yes, the procedure can still be performed. We ask that you use a tampon if possible but it's not absolutely necessary.

WELCOME TO ENDOSCOPY CENTER

Physician Ownership Disclosure: Tri-State Digestive Disorder Center, ASC is owned and operated by Tri-State Gastroenterology Associate, therefore, your physician may have a financial interest in this facility.

Insurance:

If you have insurance coverage your insurance company will receive two separate claims. One for the physicians which will also include a charge for any biopsies or specimens collected and one for the Facility fee. Your insurance company may also receive claims from independent laboratory anesthesia and pathology. As with your insurance and or outpatient deductibles and co-pays resulting from the Facility fee physicians fee and independent laboratory anesthesia and pathology.

Procedures available:

TSDDC performs procedures, such as:

- EGD
- Esophageal Dilation
- Colonoscopy
- Flexible Sigmoidoscopy
- Small Bowel Enteroscopy
- Liver Biopsy
- Gastronomy tube replacement
- Hemorrhoid banding
- EUS (Endoscopic Ultrasound)
- Endoscopic capsule placement

Licensure and accreditation:

TSDDC is licensed by the Commonwealth of Kentucky as an Ambulatory Surgery Center (ASC) and is accredited by the accreditation Association for Ambulatory Healthcare (AAAHC). We are also certified by the centers for Medicare and Medicaid Services (CMS) as a participant in a Medicare program. TSDDC was recognized by the American Society of Gastrointestinal Endoscopy (ASGE) for promoting quality in endoscopy.

Physician credentials:

- All physicians providing care at TSDDC are board eligible or board certified by the certifying board of gastroenterology and approved and credentialed by the governing board of TSDDC. Summary of your patient rights and responsibilities. Further information is available at the Facility.

Patient rights

- To considerate, respectful, and quality care
- To be informed of all available services and to receive the services regardless of age, race, religion, sex, sexual orientation, marital status, or national origin
- To obtain complete and current medical information, including explanation of treatment and prognosis in terms that can reasonably be understood
- To receive from his/her physician information necessary to give informed consent prior to any procedure
- To have the right to change providers if other qualified providers are available
- To expect that within its capacity of the Facility must make a reasonable response to the request for services
- To obtain information as to any relationship of this Facility to any other healthcare institution
- To refuse treatment and be informed of the consequences of this refusal
- To privacy concerning his or her medical treatment - To refuse to participate in experimental research
- To receive an itemized copy of his or her account statement upon request regardless of source of payment
- To approve or refuse the release or disclosure of the contents of his or her medical record
- To know which Facility rules and regulations apply to his or her conduct
- To express complaints about care and services provided, voice grievances and recommend changes in policies and services to the center's staff or nurse manager at 859-341-3575 without fear of reprisal. Patients will receive follow up via phone or written communication. Patients may also contact the Kentucky Board of Medical Licensure or visit: https://link.edgepilot.com/s/e962721d/G3lpilJq_kiLy_c1pi9UIA?u=http://www.medicare.gov/Omsbudsmen/activities.asp. Patients may also contact the Office of Inspector General at 859-246-2301 or submit in grievance in writing to:
 - Office of Inspector General - 3470 Blazer Parkway, Suite 300 - Lexington, KY40509

Patient responsibilities:

- Provide for information regarding health history including but not limited to: medications (including over-the-counter and diet supplements, allergies and sensitivities) and update changes as they occur if any changes in your medical status arise between the time of scheduling the procedure and the procedure date, we ask that you notify our office.
- Show consideration to others including being respectful about healthcare professionals, staff as well as other patients
- Cooperate with their physician in the facility staff, following policies and procedures
- Understand the course of treatment directed and to follow the course of treatment as directed and participate in care.
- Inform staff how they feel and their needs
- Discuss additional consultation
- Provide the facility with complete and updated insurance and financial Information

- To provide a responsible age adult (age 18 or older) to accompany them home after sedation
- To be responsible for keeping appointments and notifying if unable to do so

Advance directives

This serves as your notice that this facility does not honor "Do Not Resuscitate" (DNR) directive in an advanced directive. If you do not agree with this policy, let us know and you may be scheduled at another location.

Keep your appointment:

- If you cannot keep your appointment, please notify us within 72 hours of your appointment or you'll be charged a \$100 no-show/cancellation fee. To cancel you may call our CANCELLATION LINE at 859-655-4580 and leave a message. You may also call 859-655-4480 to speak with Procedure Scheduling.

About the facility and your procedure:

Patient entrance is under the lower-level canopy. There is not an entry from the upper-level to the lower level. The facility doors open at 6:15 AM M-F

Every patient undergoing a procedure with sedation will be required to have a responsible adult (age 18 or older) to stay with them during the entire visit and someone 18 or older with a valid driver's license to drive him home parentheses this may be the (responsible adult). We recommend that you have this responsible adult stay with you until you have recovered fully from your sedation.

- Patients will not be admitted unless a responsible adult is with them, and they have a ride home. Patients will not be allowed to go home by taxi unless a responsible adult (18 or older) is with them.

- Wi-Fi and a television or present in the waiting area. Please be advised no photography or video recording may take place in the patient care areas. **We are a NON-SMOKING campus (inside and outside the facility)**

Please wear loose fitting, comfortable clothing, and low-heeled shoes. We recommend a short sleeve shirt, to make starting your IV easier.

If you wear glasses, these will be removed before your procedure, bring a case if you would like.

If you are having an upper endoscopy, you will need to remove any dentures or partials. We provide cups for these.

Please leave your valuables at home; we are not responsible for broken or lost items.

Please note that every procedure experience is different and this one may not be the same as your experience with other procedures.

IMPORTANT

You will be asked to acknowledge receipt of this information on the day of your procedure.

Please bring the following on the day of your procedure:

- This pamphlet and your prep instructions
- ALL of your Medical Insurance Cards
- Your drivers license with picture ID
- A copy of your Power of Attorney (POA if necessary)
- If applicable: your inhaler; contact lens container and solution (if you need to remove them); glasses case; hearing aid(s) and container to put them in, if removed; any medication you have started or changed since your contact with the endoscopy center
- A Responsible Adult (age 18 or older) to stay here at the facility during your visit as well as someone to drive you home if not your Responsible Adult
- Bring or wear socks for your own comfort

At least one week prior to your Procedure:

- Review the date and arrival time for your procedure.
- Review the information in this pamphlet and your prep instructions and call 859-341-3575 with any questions.
- Inform your Responsible Adult and Ride if they are not the same, the date and time of your procedure and that they must remain at the facility. If the scheduled day or time is not good for them, please call to reschedule if necessary.
- ***Review your prep instructions (do not follow the directions on the container). Complete the entire prep even if you are clear from the first dose.***

On the Day of the Procedure:

- Arrive at the time that was given to you. It is important to know that this time is NOT the time your procedure will begin. You are asked to arrive early to allow for registration and preparation.
- You are responsible for informing your admitting nurse if you did not take your entire prep or if your results are not clear (liquid that you can see through).
- **Remember your Responsible Adult (18 years or older) must stay at the Facility the entire time you are here and at home with you until you are fully recovered from the sedation.**

After the Procedure:

- You should expect to be in the Recovery Area 30-45 minutes. You will be seen by your physician prior to discharge.
- Your Responsible Adult will be brought to the Recovery Area (unless you request not to have them with you) prior to discussing the results of your procedure and giving instructions.
- You may eat whatever you want after discharge unless your doctor has ordered otherwise. Due to the sedation we prefer that you do not go into a restaurant. Sedation may cause you to feel drowsy and unsteady.
- You should review your Post Procedure Instructions once you are fully awake. - You should be able to return to your normal activity the day after your procedure. You should receive a call from our staff the next business day.
- If you are NOT experiencing problems, you DO NOT have to return this call. If you are having problems or questions, please call **859-341-3575** or in the event of emergency call 911.