Southwest Gastroenterology Associates 525 S W 80th Suite 200 Oklahoma City, Ok 73139 Office 405-631-0481 Fax405-631-9025

Colonoscopy Appointment Information

Procedure Date :	
Check In Time :	_Procedure Time :
Facility:	
OCOM Hospital Address: 8100 S Wa	lker Ave Building C Oklahoma City, OK 73139
Southwest Medical Center Address:	4401 S Western Oklahoma City, OK 73109
Community Hospital Address: 3100 S	SW 89th Street Oklahoma City, Ok73159
WHAT TO BRING:	

- Someone to drive you home. You will be unable to drive home. Please have someone accompany you to the facility that can drive you home safely. Sedation is usually given during your procedure. If you have not arranged for someone to drive you home, your procedure may be cancelled.
- It is very important to have someone with you during the time you are in the hospital so the physician can speak with them after the procedure.
- Your insurance cards and driver's license.
- A list of your medications.

WHAT TO WEAR:

• Wear comfortable, loose fitting clothing. Please leave jewelry and valuables at home.

PREPARATION:

- Follow the bowel prep instruction sheet provided by the scheduling coordinator.
- 7 Days prior to the procedure <u>avoid high fiber foods</u> such as:
 *Nuts *Popcorn *Raw Fruit *Raw Vegetables *Salad *Potato Skins *Corn *Seeds *Rice
- DO NOT smoke, chew tobacco or have any oral tobacco products after midnight the night before you procedure.

MEDICATION INSTRUCTIONS:

- If you take medication for cholesterol, blood pressure, thyroid or any other medication other than ones listed **please take as prescribed by your physician**, if you normally take it in the am, on the day of your procedure you may take it with a very small sip of water.
- 7 days prior <u>STOP over the counter medications</u> such as:
 *Aspirin * Aspirin Products *Iron *Fish Oil *Omega 3 *Folic Acid *CO Q10 *Vitamin E
 *NSAIDs such as Motrin, Naproxen, Advil & Aleve *TYLENOL products <u>are OK</u>
- <u>The below</u> medications <u>may</u> need to be held 3-7 days prior to your procedure with prescribing Physicians approval. *<u>Once we have approval from your physician we will contact you with instructions. Continue</u> <u>medication until the office calls you with instructions.</u>

*Pletal (Cilostazol)	*Aggrenox	*Agrylin (Analgrelide HCI)	*Warfarin	* Elquis
*Plavix (Clopidogrel)	*Arixtra	*Trental	*Effient	* Ticlid
*Coumadin	*Pradaxa	*Brilinta	*Xarelto	

Weigh loss medication

Phentermine to be stopped 7 days prior to procedure

DIABETIC INSTRUCTIONS:

• Diabetic Pills

*On the day prior to your procedure take the morning dose only <u>and skip the evening dose</u> *On the day of your procedure <u>do not take your morning dose.</u>

• Diabetic Injections

*On the day prior to procedure <u>take ½ of the morning dose</u> only and <u>½ of the evening dose</u> *On the day of your procedure <u>do not take your morning dose</u>.

• Please bring your medication with you to the procedure.

Hospital Pre-testing/Preadmission:

Per Hospital guidelines you **may be required** to have additional testing done prior to your procedure; the hospital pretesting department will call and arrange this for you.

PRE-PROCEDURE INFORMATION:

Upon arrival at the hospital, you will be asked to complete any necessary admission paperwork. You will be assisted to the procedure room and the Anesthesiologist will administer general sedation through your IV to sedate you. The procedure approximately takes 15-30 minutes.

POST-PROCEDURE INFORMATION:

After the procedure you will remain in the recovery area for an additional 45 minutes to one hour. When you wake up you may feel like you have a lot of "gas", due to that during the procedure, air is inserted through the scope. Written post OP instructions will be provided. You will not be able to make any important decisions, stay home and have someone with you for the rest of the day.

UNUSAL SIDE EFFECTS:

*Fever over 100 degrees * Unusual chest pain * Dark bowl movements

Any of the symptoms above may indicate a complication of the procedure and should be brought to the attention of your physician immediately.

TEST RESULTS: Test result request line 405-634-7019

To obtain your test results please call our test result line 7 days after procedure.

Billing:

Just as a reminder we want you to be aware that you will be receiving statements from the following:

SW Gastroenterology Associates - This will be for Dr. Kurella's services

OCOM Hospital / Community Hospital / SWMC or Baptist Hospital - This is the facility where your procedure was done **Anesthesiologist** - This will depend on who performs your anesthesia during the procedure

Miraca Life Sciences or Heartland Pathology - You will only receive a statement from here if you have biopsies during your procedure.