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Flexible Sigmoidoscopy Prep Instructions

Please review these instructions at least one week prior to your procedure. If you have any questions, please contact your doctor's office.

You ar	e sche	eduled to have a Flexible	e sigmoidoscopy o	n:
Your p	roced	ure will be at:		
time. If please	you h	ave not heard from the	facility by 3:00 pm listed in your pat	your procedure with your arrivanthe day prior to your procedure ient portal are not accurate – th
work or bus or	r drive Uber)	the entire day. You are no	ot allowed to drive, enter alone. If you	day of your procedure. You cannot take public transportation (i.e., tax do not have a responsible driver to a and will be cancelled.
Medica •		: n (7) days prior : stop her	bal medicines, fish	oil and vitamin E.
	0	taking your injection physician. Follow your dose following your prod	medication after prescribing doctor cedure. These med atide), Wegovy/Oz	need for 1 week (7 days) prior. Sto consulting with your prescribin r's instructions for when and what lications include all GLP-1RA clas tempic (Semaglutide), Mounjard
•	Five (5) days prior: stop iron to	ablets and vitamins	containing iron.
	Blood thinning medications such as Plavix (Clopidogrel), Brilinta (Ticagrelor), Effient, Ticlid, Agrylin, Coumadin (Warfarin), Eliquis, Pradaxa and Xarelto will need to be stopped prior to your procedure. Check with your prescribing physician prior to stopping these medications. Over-the-counter pain relievers such as Advil/Motrin (ibuprofen) or Aleve (naproxen) should be held for seven (7) days prior to your procedure. Tylenol (acetaminophen) may be taken as needed. You do not need to stop 81mg aspirin.			
	Stop _	(Name of Medication)	On	(Date to Stop)
		(Name of Medication)		(Date to Stop)

- <u>Diabetic medicines:</u> If you take a GLP-1RA class drug (injectable): **Saxenda (liraglutide), Wegovy/Ozempic (Semaglutide), Mounjaro/ Zepbound (tirzepatide)** you must stop 1 week (7 days) before the procedure. If your injection for <u>diabetes</u> is taken **daily**, STOP MEDICATION THE DAY BEFORE. If you take your injection weekly, STOP 1 WEEK (7 days) before your procedure. Please consult with your Endocrinologist/Prescribing doctor with questions and concerns regarding your medication. Follow your prescribing doctor's instructions for when and what dose following your procedure.
- Do not take any diabetic pills the day prior to or the morning of the procedure. Insulin users: The day prior to your procedure, take half of your morning dose and none of the evening dose. The day of your procedure, bring your insulin with you. You should contact your endocrinologist/prescribing doctor regarding these changes.
- Do NOT stop taking any heart, blood pressure, anti-seizure, anti-anxiety or thyroid medications. These medications, if normally taken in the morning, should be taken at least two (2) hours prior to your arrival time with no more than four (4) ounces of water.
- If you take PPIs (Proton-Pump Inhibitors) for reflux such as Aciphex (Rabeprazole), Protonix (Pantoprazole), Nexium (Esomeprazole), Prilosec (Omeprazole) or Dexilant (Dexlansoprazole), please take at least two (2) hours prior to your arrival time with no more than four (4) ounces of water.

Three (3) days prior to procedure:

Do not eat popcorn, corn, beans, pickles, seeds (flax, sunflower, quinoa), multigrain bread, nuts, leafy vegetables or fruits with small seeds (i.e., strawberries, kiwi).

The day prior to procedure:

You may have a light breakfast and lunch. Then follow a CLEAR LIQUID DIET.

Allowed: Water, hot/iced tea, apple juice, black coffee, white cranberry juice, white grape juice, clear broth or bouillon of any kind (beef, chicken, vegetable), gelatin, water ice, soft drinks (Sprite, Ginger-ale), and sports drinks (Gatorade, Powerade, Propel), and hard candy. Honey, sugar, and sugar substitutes are ok.

Not allowed: Absolutely no solid foods, milk, creamer or any items with red or purple dye.

- 1. **Four (4) hours prior to your arrival time**: Stop drinking all clear liquids. You will need to be fasting. This means NO liquids, including water. Your stomach must be empty for your procedure. No gum, mints, or smoking during this time.
- 2. **Two (2) hours prior to leaving for procedure**: You must administer one (1) Fleet enema (saline) rectally followed by a second Fleet enema 30 minutes later.

Reminders:

- If prescribed, please have your bloodwork done as soon as possible.
- If required by your insurance, you must obtain necessary referrals for your procedure and follow up visits from your primary care physician.

Purchases:

You will need to purchase the following items in order to complete your preparation. These laxatives are available over-the-counter. No prescriptions are necessary.

1. Two (2) Fleet enemas (saline)