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Colonoscopy Prep Packet

A Colonoscopy is an examination of the colon (large bowel) with a flexible lighted tube about the size of your ring finger which transmits a live color image onto a television screen. A good bowel prep is essential for an accurate and successful procedure. These instructions will help maximize the ease, safety, and success of your preparation.

Purchase at the Pharmacy (no prescription needed / over the counter):

- **Miralax® (no generics)** – three (3) 119g bottles
- **Bisacodyl (Dulcolax)** – four (4) 5mg tablets
- **Gatorade or G2 or PowerAde** (three (3) 32 oz. bottles – **nothing red/purple**) **OR Electro Mix** (three (3) packets - mixed with 96 oz. of water)
- **Clear liquids** of choice (See list of approved clear liquids in this packet- **nothing red/purple**).

****Alternative preps are available. Please call our office to discuss. (970)363-5376 ****

****Please see page 9 for important information regarding COVID-19 and Procedure Results****

Important Information for your upcoming procedure:

- You must be accompanied by a friend or relative to drive you home or your procedure will be cancelled. You may not go home alone, by taxi, or bus.
- For those with an artificial heart valve, pacemaker, internal defibrillator, or a diagnosis of A-FIB please consult your cardiologist and our clinical team @ (970)363-5376. A cardio clearance maybe required.
- if you have had a joint replacement within the past 6 months, please consult with your surgeon regarding specific instructions.
- If you are taking any Anticoagulants, please refer to the 4th page of this packet for greater detail.
- If you are diabetic or have a history of kidney disease please notify our office, a different prep maybe recommended. These alternative preps include Clenpiq, Suprep, or Nulytely. Please call 970-363-5376

TIPS:

- Some bloating and cramping is normal and will improve once diarrhea begins. If you develop nausea or vomiting, take about an hour break from drinking the solution before resuming.
- To help avoid dehydration, drink at least 64oz of clear liquids before starting bowel prep.
- To help decrease perianal irritation, consider using wet wipes and barrier cream (e.g. A&D, Desitin, or Vaseline) as needed.

For questions please call (970)363-5376 to speak with Dr. Laird's nurse.

Three (3) Days Before Colonoscopy: Follow low fiber diet. (Please refer to the 6th page of this packet for further information.)

One Day Before Colonoscopy:

- Light Breakfast day before procedure (before 10:00am) - see below for an example.
 - Breakfast Example:
 - Eggs
 - White toast, Butter
 - Apple Juice
 - Tea or Coffee; black or cream- Non-fat milk or Soy milk.
 - Yogurt, Plain or Vanilla
- **Clear Liquid Diet:**
Clear Liquids after **10:00am** on the day before the procedure. **No solid food or dairy products after 10:00am.** Clear liquids for lunch and dinner the remainder of the day before the procedure.

Clear Liquid Diet

****Start at 10:00 am the day before your procedure ****

You May Have the Following (orange colored is ok):

- Water
- Clear chicken or vegetable broth; or bouillon
- Tea or Coffee, **without** milk or creamer (sugar allowed)
- Gatorade (**no red/purple**)
- Soft Drinks
- Kool-Aid (**no red/purple**)
- Jell-O, **without** fruit (**no red/purple**)
- Popsicles (**no red/purple**)
- Apple Juice
- White Grape Juice
- White Cranberry Juice
- Lemonade, **without** pulp
- Other Clear Juices, **without** pulp

You May NOT Have the Following:

- Red/Purple Jell-O
- Red/Purple Popsicles
- Milk or Milkshakes
- Any Solid Foods

Colonoscopy Prep Instructions

- **Morning Before Colonoscopy:**

- Prepare mix, one bottle (119g /4.1 oz) of Miralax® powder ***per*** 32oz of Gatorade or Electro Mix. Prepare 2 (32 oz) bottles and refrigerate. (A third Miralax® mix may be needed.)

- **Day Before Colonoscopy:**

- **4:00pm (the evening before)**, take two Bisacodyl tablets with a glass of water.
- **6:00pm (the evening before)**, Drink one 8 oz glass of the 1 liter/32 oz Miralax® mix every 15 minutes until the entire 1 liter/ 32 oz mix is finished.
- **9:00 pm (Based on your response)**: If your stools are not loose or watery drink an additional 32 oz Miralax®/Gatorade mix. Drink one 8 oz glass of the mixture every 15 minutes until finished.

- **Morning of Colonoscopy:**

- **Four hours before your procedure start time**, take two (2) Bisacodyl tablets. Drink one 8oz glass of the 1 liter/32oz Miralax® mix every 15 minutes until the entire 1 liter/32oz mix is finished (about one hour).
- Heart, blood pressure or seizure medication may be taken as usual early the morning of your procedure with small sips of water. (Please refer to page 4 of this packet for greater detail.)
- **Please nothing by mouth within 3 hours of your procedure start time or it may be cancelled.**

****Please start the final dose of the MiraLAX® mix on time. A poor prep may result in a repeat colonoscopy****

Cancellation Policy

If for any reason you need to cancel or reschedule your appointment, please contact our scheduling team at (970) 363-5431 *at least* **5 days** prior to your scheduled procedure to avoid a **No-Show Cancellation Fee of \$100.**

Thank you for your understanding.

Medication Guidelines

APAs (antiplatelets agents)	
Medication	
Aspirin	Do not need to stop
Clopidogrel (Plavix)	Stop 3 days prior to procedure.

*****Discuss management of ALL APAs 2 weeks prior to procedure with prescribing physician.*****

ANTICOAGULANTS	
Medication	
Warfarin (Coumadin)	Stop 5 days prior to procedure.
Rivaroxaban (Xarelto)	Stop 3 days prior to procedure.
Apixaban (Eliquis)	Stop 3 days prior to procedure.
Dabigatran (Pradaxa)	Stop 3 days prior to procedure.
Enoxaparin (Lovenox) dalteparin	Stop 24 hours prior to procedure.
Prasugrel (Effient)	Stop 7 days prior to procedure.

*****Discuss management of ALL anticoagulants 2 weeks prior to procedure, and if an anticoagulant bridge with Lovenox is needed with prescribing physician.*****

Medications Not Allowed/Hold	
ACE INHIBITORS (if taking twice daily, may take AM dose day before)	DIURETICS
Altace (ramipril)	Avalide (irbesartan/hctz)
Avapro (irbesartan)	Bumex (bumetanide)
Benazepril (Lotensin)	Chlorthalidone (Thalitone)
Enalapril (Vasotec)	Dyazide (Triamterene/hctz)
Hyzaar (Hctz/losartan)	HCTZ (hydrochlorothiazide)
Lisinopril (Prinivil, Zestril)	Hyzaar (Hctz/Losartan)
Micardis (telmisartan)	Lasix (furosemide)

For questions regarding medications you are taking, please call 970-363-5376 to speak with a clinical assistant.

Medication Allowed	
BETA BLOCKERS	CALCIUM CHANNEL BLOCKERS
Atenolol (Tenormin)	Amlodipine (Norvasc)
Bystolic (nebivolol)	Bystolic (nebivolol)
Coreg (carvedilol)	Felodipine
Labetalol	Lotrel (amlodipine, Benazeprilat)
Metoprolol (Lopressor, Toprol-XL)	Nifedipine (Adalat, Procardia)
Propranolol (Inderal, Inderal LA)	Verapamil (Calan, Isoptin, Verelan, Covera)
Ziac (Bisoprolol/HCTZ)	
ANTIARRHYTHMICS	Angiotensin II Receptor Antagonist
Amiodarone (Cordarone)	Atacand (candesartan)
Flecainide (Tambocor)	Cozaar (losartan)
Multaq (dronedarone)	Diovan (Valsartan)
Sotalol	Micardis HCT (Telmisartan-hctz)

Medication Allowed- if scheduled for EGD
Meds for GERD
Prilosec
Nexium
Zantac
Ascor
Aciphex

MISC
Medication
Metformin (Hold the morning of the procedure.)
Supplements (Hold until after procedure.)

*** If taking medication day of procedure, can be taken two hours prior to procedure with sips of water. ***

Low Fiber Diet for Colonoscopy Preparation

Start a Low Fiber Diet 3 days prior to your colonoscopy.

If you do not have a daily bowel movement, it is recommended that you start 5 days prior to your colonoscopy to ensure a successful bowel preparation.

If you have any questions, please call 970-363-5376.

Guidelines:

- Buy breads and cereals made from refined wheat and rice. Avoid whole-grain products with added bran.
- Remove skin and seeds from vegetables and fruits before cooking.
- Avoid any foods made with seeds, nuts, and raw or fried fruits.
- Limit milk and milk products to 2 cups daily. Avoid cheese products.

Foods Recommended:

- Breads/Grains:
 - Refined breads, toast, rolls, biscuits, muffins, crackers, pancakes, and waffles.
 - Enriched white or light rye bread or rolls.
 - Saltines, Melba toast.
 - Refined ready-to-eat cereals such as puffed rice and puffed wheat.
 - Cooked refined wheat, corn, or rice cereal.
 - Refined cold cereals made from rice, corn, or oats. (Rice Krispies, Cornflakes, Cheerios, etc.)
 - White rice, refined pasta, macaroni, noodles.
- Vegetables/Fruits:
 - Most tender cooked and canned vegetables without seeds such as carrots, asparagus tips, green or waxed beans, pumpkin (no seeds), spinach, squash (acorn) without seeds, potato (no skin), pureed lima beans.
 - Most canned or cooked fruits, fruit cocktail, avocado, canned applesauce, apricots, peaches, pears (all without skin and seeds), pureed plums, and ripe bananas. Strained fruit juice.
- Milk/Diary:
 - Low-fat -milk, cream, hot chocolate.
 - Low fat- sour cream, cream cheese.
 - Yogurt (no berries).
 - Limit milk/milk products to 2 cups per day.

- Meat (Protein):
 - Chicken, turkey, lamb, lean pork, veal, and tofu.
 - Fish and seafood. (Except raw clams, oysters.)
 - Eggs.
 - Smooth peanut butter or nut butters.
- MISC:
 - Margarine, butter, vegetable oils, mayo, cream substitutes, crisp bacon, plain gravies, and salad dressings. Broth, strained cream soups (no corn) made with allowed ingredients.
 - Salt, soy sauce, ketchup, mild spices in moderation, white sauce, sugar, honey, jelly, syrup, lemon juice, vinegar, vanilla and other flavoring extracts. Decaffeinated coffee, herbal tea, caffeine-free carbonated beverages, and fruit drinks.

Food to Avoid:

- Breads/Grains:
 - Any bread products made with whole-grain flour or graham flour, cornbread, and graham crackers.
 - Bran seeds, nuts, coconut, or raw or dried fruit.
 - Any cereal with whole-grain, bran, and granola. Oatmeal or cereal with seeds, nuts, coconuts, or dried fruit.
 - Bran, brown and wild rice.
- Vegetables:
 - Raw vegetables and vegetables with seeds, such as sauerkraut, cabbage, brussels sprouts, onions, winter squash, and peas.
 - Ensure all vegetables are cooked, peeled and with no seeds.
- Fruits:
 - Raw or dried fruit, all berries, raisins, Prune juice.
 - Berries, pineapples, apples, oranges, or watermelon.
- Milk/Dairy:
 - Yogurt containing fruit skins or seeds.
 - Cheese
- Meat (protein):
 - Tough fibrous meats with gristle.
 - Raw clams, oysters. Shellfish with tough connective tissue, ex. shrimp.
 - Meats prepared with whole-grain ingredients, seeds, or nuts.
 - Dry Beans, legumes, peas, and lentils.
 - Chunky peanut butter or nut butters.
- Misc.:
 - Anything made with whole-grain flour, bran, seeds, whole nuts, coconut, or dried fruits. Popcorn, pepper, chili pepper, and other hot sauces. Raisins, seed spices, pickles, olives, mustards, spicy mustards, relish, horseradish, highly spiced salad dressings, jam or marmalade with nuts and seeds.
 - Beverages containing caffeine which is a stomach irritant.



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Sample Menu: (3 Days Prior)

- Breakfast:

- ½ cup of cranberry juice
- ¾ cup canned peaches
- 2 slices of white toast with 2 tsp of margarine
- 1 tsp jelly
- ½ cup 2% milk

- Dinner:

- ½ cup strained tomato juice
- 3 oz breaded baked chicken
- ½ cup white rice
- ½ cup cooked carrots
- White dinner roll
- ½ cup sherbert

- Lunch:

- 3 oz lean beef patty
- Hamburger bun with no seeds
- 1 Tbsp of ketchup
- ½ cup canned fruit cocktail
- ½ cup vanilla wafer cookies
- 1 cup of 2% milk

- Afternoon Snack:

- ½ cup applesauce
- 2 saltine crackers

- Evening Snack:

- 1 popsicle
- Ice pops



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Procedure Results

Results from your procedure(s) will be communicated via Colorado Mountain Medical's Patient Portal (*Please note: This is **NOT** the same application as the One Medical Passport through the Vail Valley Surgery Center*). If you do not have an account, please set this up by visiting the following link:

<https://www.cmmhealth.org/patient-resources/patient-portal>

1. First, you will need to click the button that says, "GO TO PORTAL" and you will be redirected to the portal website.
2. Next you will need to click "I need to sign up" this will take you through the account set up. **An access code will be required, this will be the year of your birth. Ex: 1970**

If you have questions or need additional support with CMMs Patient Portal, please contact:

TECHNICAL SUPPORT

Support Hotline: (888) 670-9775

Email: support@followmyhealth.com

Knowledge Base: <http://support.followmyhealth.com>

Hours of Service: Monday – Friday, 8 AM – 8 PM EST.

Important Information Regarding COVID-19

Vail Valley Surgery Center requires patients to be symptom free for 10 days prior to your scheduled procedure date. If you are experiencing any cold or flu like symptoms within 10 days of your procedure you will need to reschedule.



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Important Information Regarding Insurance Benefits

As a courtesy we will call your insurance to verify your potential benefits and to obtain authorization for your upcoming procedure if needed. Please keep in mind that benefits are not a guarantee of coverage and colonoscopy type can change during the procedure. We cannot change or remove diagnosis codes to get procedures covered under your preventive benefits. We code and bill services based on documentation from your medical record.

There are three types of colonoscopies (Insurance companies may differ in how each procedure is paid):

Preventative/ Average Risk Colonoscopy Screening:

Colorectal cancer screening is recommended at age 45. A colonoscopy is considered screening if you are 45 years old or older; you have not had a colonoscopy within the last 10 years; do not have any gastrointestinal symptoms; or do not have any **history** of gastrointestinal disease, colon polyps, and /or colon cancer. *****Some insurance plans will not cover a screening colonoscopy before the age of 50. If under 50, we recommend contacting your insurance for guidelines. All authorizations and payments of benefits are subject to terms, conditions, limitations, and exclusions of the member's contract at time of service*****

Surveillance/ High Risk Colonoscopy Screening:

Patients with a personal history of colon polyps and/or colon cancer, family history of colon polyps and/or colon cancer, personal history of Crohn's Disease, or Ulcerative colitis fall under this category. You may need to repeat a colonoscopy every 2-5 years for surveillance purposes. This type of procedure may be reimbursed by some insurance carriers or it may go towards your deductible.

Diagnostic Colonoscopy:

Patients undergoing a diagnostic colonoscopy have current gastrointestinal symptoms and your referring provider has ordered this procedure as it may help determine any causes for your symptoms. It is considered a medical procedure and will be applicable to your deductible/ coinsurance.

EGDs:

This is a diagnostic procedure and will potentially be applicable to your deductible/copay.

Cost Estimate:

If you would like to get an estimate of possible costs, you may call the numbers below:

- Professional Charges:
 - Colorado Mountain Medical: 970-363-5431
- Facility Charges:
 - Edwards Surgery Center: 970-569-7400
- Anesthesia:
 - Anesthesia Partners of Colorado: 970-315-3858
- Pathology Charges:
 - Paramount pathology Services 970-945-7564
 - Valley View Hospital Patient insurance verification: 970-384-6888

Scheduling: 970-363-5431 Clinical Questions: 970-363-5376

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