Your Guide to

Colonoscopy: Frequently Asked Questions



About Preparation and Recovery

Colonoscopies can help diagnose, treat and prevent a variety of conditions, including colorectal cancer. In order for the procedure to be successful, however, preparation is required. This handout will help you understand some of the most frequently asked questions regarding what to expect before and after your procedure.

1. Can I have a colonoscopy without doing the preparation?

The short answer is no. Colonoscopy prep is designed to "clean out" the colon, which allows the doctor to see and address abnormalities that might otherwise be hidden or difficult to find. For example, some polyps (or growths) can be flat and easily missed if prep is not completed correctly.

2. Why do I need to do a prep the night before and morning of my colonoscopy?

The body continues to produce digestive liquids even if you're not eating, which can build up in the colon between rounds of preparation. Repeating your prep in the morning ensures the entire area can be seen clearly by the doctor. It might be mildly unpleasant, but prep is an extremely important part of the process!

3. What should I do if my colonoscopy prep makes me feel nauseous or causes me to vomit?

If your prep makes you feel nauseous, try drinking it more slowly. Consuming the liquid cold from the fridge or using a straw may also help. If needed, it's okay to take a break to let your stomach settle.

4. How will I know if the prep is working properly?

When the prep is completed, your bowel movements should be liquid and clear to yellow in color. If your bowel movements are solid or brown in color on the morning of your procedure, call your doctor's office to reschedule. You may need a longer prep or a different kind of prep.

5. Why is it important that I do not eat or drink anything besides my prep on the day of my colonoscopy?

Having an empty stomach during your procedure is important for your health and safety. By not eating anything and avoiding things like chewing gum, chewing tobacco and hard candy, you can reduce the chance of vomiting or inhaling saliva into your lungs during the procedure.

6. Will I need to have a pregnancy test before my procedure?

If applicable, those under the age of 60 who have not had a hysterectomy will need to provide a urine sample for pregnancy testing prior to the procedure.

Reminder: You cannot have anything to eat or drink (including water) the day of your procedure <u>except</u> your bowel prep and a small sip of water to take your medicine.

7. What medications do I take before my colonoscopy, and when should I take them?

- If you take an iron supplement, stop taking them five (5) days before your procedure to avoid discoloration of your stool.
- The office will let you know which of your medications need to be stopped and for how long. Some of the most commonly adjusted medications include blood thinners and diabetic medications.
- Diabetic medications come in many different forms. Some may have no interruptions, while others may need adjusted well in advance of your colonoscopy. If you take any of the following and have not talked with your healthcare team, please contact the office to discuss directions the week before:
 - Dulaglutide (Trulicity), Exenatide ER (Byduren BCise), Semaglutide (Ozempic/Wegovy), Tirezepatide (Mounjaro) Hold for seven (7) days prior to procedure*
 - Canagliflozin (Invokana), Dapagliflozin (Farxiga), Empagliflozin (Jardiance), Ertugliflozin (Steglatro) Hold for 3-4 days prior to procedure*
 - Exenatide (Byetta), Liraglutide (Victoza/Saxenda), Lixisenatide (Adlyxin), Semaglutide (Rybelsus) Hold for 24 hours prior to procedure*
 - Glimepiride (Amaryl), Glipizide (Glucotrol), Glyburide (Glynase), Metformin (Glucophage) Hold day of procedure*
 - Alogliptin (Nesina), Linagliptin (Tradjenta), Saxagliptin (Onglyza), Sitagliptin (Januvia) Take as normal*
 *These are general guidelines and may change based on your personal medical history. Take as directed by a healthcare professional.
- Any medications that you are able to take the morning of your colonoscopy should be taken with a small sip of water.

8. What should I expect when recovering from my colonoscopy?

- You will not be able to drive for 24 hours after your procedure. Someone must drive you home; if you do not have a driver, it may be necessary to reschedule your procedure.
- Avoid making large purchases, legal decisions or signing legal documents for 24 hours.
- Avoid activities that require balance or coordination (like hiking, biking, climbing, etc.) for 24 hours.
- Avoid alcohol and sedative medications after your colonoscopy.
- You will want to eat a soft, mild diet after your colonoscopy. This means avoiding foods that are crunchy, coarse, or high in fat. Scrambled eggs, applesauce, mashed potatoes and broth-based soups are ideal.
- It's normal to not have a bowel movement for 1-3 days after your colonoscopy.
- If you need a work excuse, please let our staff know. We are happy to provide one to you.

9. Are there any side effects to be aware of after anesthesia?

- You may feel nauseous after anesthesia.
- It is normal to feel groggy, tired or dizzy, but these feelings should fade throughout the day.
- You may have a sore or scratchy throat if a breathing tube was used.
- You may experience forgetfulness shortly after anesthesia. This will resolve with time.

10. How long will it take to get my test results back?

Although you might not remember it immediately after your colonoscopy, your doctor will discuss your procedure with you and the adult/driver accompanying you before you leave the facility. This report will only include the findings your doctor was able to see during the colonoscopy, but it might take several days to receive results from biopsies or additional testing.