Double

EGD | Colonoscopy

Areas Examined & Treated	
Areas	• Esophagus • Stomach • Duodenum • Right Colon • Transverse Colon • Left Colon • Rectum

The Procedure	
Upper Endoscopy / EGD	
Diagnostic	• This is an internal examination of the entire length of the upper GI tract • It is performed using an instrument called an endoscope • The endoscope has a small camera attached to a flexible tube • It may provide a visual diagnosis • Biopsies may be taken

Phone: 832-632-4070 | Fax: 832-688-9496
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Therapeutic	• Various therapeutic maneuvers can be performed • Benign or precancerous polyps may be removed
Colonoscopy	
Diagnostic	• This is an internal examination of the entire length of the colon • It is performed using an instrument called a colonoscope • The colonoscope has a small camera attached to a flexible tube • It may provide a visual diagnosis • Biopsies may be taken
Intervention	• Various therapeutic maneuvers can be performed • Benign or precancerous polyps may be removed

Before Your Procedure	
Schedule Your Procedure	
Appointment	Schedule your procedure appointment with GastroDoxs by phone @ 832-632-4070 or in the office

Location	• A procedure location will be suggested based on your insurance & geographic area • Please refer to the locations page on our website
Insurance	Our team will obtain the required insurance prior authorization, if needed
Financial	GastroDoxs provider fees will be collected upon scheduling your procedure
Orders	Our team will send your procedure orders to the surgery center
Transportation	• Do not plan to drive after your procedure • You must have someone 18 years old or above to drive you home • No Uber | Lyft | Cab
Changes	To cancel or reschedule, call or text GastroDoxs @ 832-632-4070

Register with the Surgery Center	
General	• The procedure time slot that GastroDoxs has given to you is an approximate time slot. The final time slot will be determined and communicated by the Endoscopy/Surgery Center. Please arrive at the time the center has instructed you to do so. • A representative from the hospital or surgery center will call you to discuss the registration process, time & location of your procedure
Clinical	The pre-assessment testing team will discuss the following: • Clearance if necessary • Medical History • Medications • Pre-anesthesia questionnaire • Surgical history
Financial	• Hospital, anesthesia & pathology fees are independent from GastroDoxs • The other fees not related to GastroDoxs are to be discussed directly with the other providers, hospital or surgery center • If you have not heard from the financial representative 24 hours before your procedure, call them at that time

Clearance	

Cardiac
Hematology
Neurology
Pulmonary
	• You may need a clearance if you have high risk conditions requiring clearance
	• You may need a follow-up with your Doctor or Provider before they can issue a clearance
	• Our team will send your Doctor or Provider a clearance request from our office
	• Once our team has your clearance on file, we will call you to schedule your procedure
	• You may need a clearance if you are on blood thinners or these medications
	  ○ Apixaban | Eliquis
	  ○ Clopidogrel | Plavix
	  ○ Dabigatran | Pradaxa
	  ○ Edoxaban | Savaysa
	  ○ Prasugrel | Effient
	  ○ Rivaroxaban | Xarelto
	  ○ Ticagrelor | Brilinta
	  ○ Warfarin | Coumadin & Jantoven

Medications	

1 Week Before	• Hold > Anti-Diarrheal Medication - Imodium, Kaopectate, Pepto-Bismol
	• Hold > Iron Tablets
	• Hold > Multivitamins
	• Hold > GLP1 Agonist Medication:
	  ○ Dulaglutide (Trulicity)
	  ○ Exenatide (Byetta)
	  ○ Exenatide Extended Release
	  ○ (Bydureon BCise)
	  ○ Liraglutide (Victoza)
	  ○ Lixisenatide (Adlyxin)
	  ○ Semaglutide (Ozempic, Wegovy, Rybelsus)
	  ○ Tirzepatide (Mounjaro)

1 Day Before	• Hold > Oral Diabetes Medication • Insulin > Take ½ the dose
Procedure Day	• Blood Pressure Medication > as instructed by the pre-assessment team • Insulin > Hold • Others > Hold

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Other	• Continue to take your medications unless specified below • Blood thinners will require a clearance on file before scheduling • The pre-assessment team (PAT) will review your medications & may make other recommendations also
Diet Instructions	
2 Weeks Before	
Foods	No change
Liquids	Drink plenty of water
1 Week Before	
Foods	No Nuts or Seeds - berries, cashews, corn nuts, peanuts, pecans, popcorn, walnuts Low Fiber Diet • Foods - white bread, cheese, eggs, yogurt • Soups - clear vegetable, chicken or beef broth • Vegetables - cooked without skin like mashed potatoes • Fruits - pureed fruits without skin like applesauce

Liquids	Drink plenty of water
1 Day Before	
Foods	• Clear Liquid Diet • Soups - clear vegetable, chicken or beef broth • Juices - clear only without pulp • Stop - All food after 12am - midnight
Liquids	• Drink plenty of water • No alcohol • No red or purple colored drinks • Stop - All liquids after 12am - midnight
Procedure Day	
Procedure Day	• No food or liquids on the procedure day • Blood Pressure Medication > as instructed by the pre-assessment team • Insulin > Hold • Others > Hold

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Bowel Preparation Instructions	
Bowel Preparation Instructions	All Preparations • Clenpiq • Colyte • Gavilyte C|G|N • Golytely • Magnesium Citrate • Moviprep • Nulytely • PEG 3350 • Plenvu • Suflav • Suprep • Sutab

Procedure Day	
Upper Endoscopy / EGD	
Diet	No food or liquids on the procedure day
Arrival	• Please ensure you arrive 1-1.5 hours before your procedure • You will check in at registration when you arrive

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Pre-Procedure	• The clinical team will go through the clinical assessment as well as risks & benefits of the procedure • The anesthesia team will explain all aspects before the procedure • Consent forms the procedure will need to be signed
Sedation	• An intravenous line will be inserted into your arm to administer medication • You will be given intravenous sedation medication during the procedure
Position	• You will be instructed to lie on the left side with your knees up to your chest
Visualization	After sedation, the endoscope is inserted through the mouth & gently advanced to visualize the esophagus, stomach & duodenum

Post-Procedure	• It will take approximately 30 minutes to 1 hour to recover from the anesthesia • The clinical team will observe for any symptoms or signs of abdominal pain, vomiting, dizziness, blood pressure issues, heart rate issue, fever • If you are doing well & have woken up from the anesthesia you will likely be discharged to go home 1 hour after the procedure
Diagnostic	• If any diagnostic tissue samples or biopsies are required it can be obtained through the endoscope during the procedure • Biopsies may be taken
Therapeutic	If intervention is required, it will be done during the procedure
Pathologist	• Biopsies are tissue samples that are reviewed by a Pathologist under the microscope • The Pathologist will determine the nature of the tissue samples • The Pathologist will send the reports to our office

Follow-Up	• Our providers will review the report in detail • The findings will be reviewed with you in detail upon follow-up
Colonoscopy	
Diet	No food or liquids the day of the procedure day
Arrival	• Please ensure you arrive 1-1.5 hours before your procedure • You will check in at registration when you arrive
Pre-Procedure	• The clinical team will go through the clinical assessment as well as risks & benefits of the procedure • The anesthesia team will explain all aspects before the procedure • Consent forms the procedure will need to be signed
Sedation	• An intravenous line will be inserted into your arm to administer medication • You will be given intravenous sedation medication during the procedure

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Position	You will be instructed to lie on the left side with your knees up to your chest
Visualization	• After sedation, the colonoscope is inserted through the anus & gently advanced to visualize the colon • Since better views are obtained during withdrawal than during insertion, a more careful examination is done during withdrawal of the scope
Post-Procedure	• It will take approximately 30 minutes to 1 hour to recover from the anesthesia • The clinical team will observe for any symptoms or signs of abdominal pain, vomiting, dizziness, blood pressure issues, heart rate issue, fever • If you are doing well & have woken up from the anesthesia you will likely be discharged to go home 1 hour after the procedure
Diagnostic	• If any diagnostic tissue samples or biopsies are required it can be obtained through the endoscope during the procedure • Biopsies may be taken

Intervention	• If intervention is required, it will be done during the procedure • Polyps may be removed with electrocautery snares, & photographs may be taken
Pathologist	• Biopsies are tissue samples that are reviewed by a Pathologist under the microscope • The Pathologist will determine the nature of the tissue samples • The Pathologist will send the reports to our office
Follow-Up	• Our providers will review the report in detail • The findings will be reviewed with you in detail upon follow-up

After Your Procedure	
Recovery	• You will be under observation for 30 minutes to monitor for any symptoms • You will be awake within 30 minutes but may still be groggy for 12-24 hours • Do not plan to drive the remainder of the day after your procedure

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Transportation	• Do not plan to drive after your procedure • You must have someone 18 years old or above to drive you home • No Uber | Lyft | Cab
Symptoms	Normal post procedure symptoms: • Bloating • Gas • Slight abdominal pain • Some diarrhea • Weakness Abnormal post procedure symptoms: • Bleeding • Excessive vomiting • Fever > 100 • Severe abdominal pain • Any other severe or unusual symptoms • Please call 911 & go to the nearest emergency room
Appointment	Ensure that you have a follow-up 2-3 weeks after the procedure
Results	• Your results will be discussed in detail • Treatment recommendations will be given
Questions	Call or text GastroDoxs @ 832-632-4070