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Charles F. Barish, MD

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Patient's Name: _____ Doctor: Barish Ender Kaplan Herschelmann

Procedure Date: _____ Procedure Time: _____ Arrival Time: _____

LOCATION

Wake Gastroenterology Endo Ste. 3100 Blue Ridge Road, Suite 300 Raleigh, NC 27612 (919) 781- 7500	Raleigh Endoscopy Center 2417 Atrium Drive, Suite 101 Raleigh, NC 27607 (919) 791-2060	Raleigh Endoscopy Center North 8300 Healthpark drive, Suite 210 Raleigh, NC 27615 (919) 256-7980
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Please call Endo scheduling if you need to cancel or reschedule your appointment:
ext. 1281 or ext. 1278

PLEASE NOTIFY THE SCHEDULING OFFICE IF YOU ARE TAKING ASPIRIN OR COUMADIN, OR IF YOU HAVE SIGNIFICANT MEDICAL PROBLEMS.

**YOU MUST CANCEL OR RESCHEDULE AT LEAST 2 BUSINESS DAYS PRIOR TO YOUR APPOINTMENT TIME OR THERE WILL BE A \$250.00 CHARGE.
(This includes cancelling the morning of your procedure)**

Make sure to bring your current insurance cards and a copy of your driver's license

MOVIPREP (Split dosing) INSTRUCTIONS

You will need to drink a laxative solution (called MoviPrep) to clean your colon. You must complete the entire prep to ensure the most effective cleansing. Purchase one MoviPrep kit from your pharmacist using the enclosed prescription.

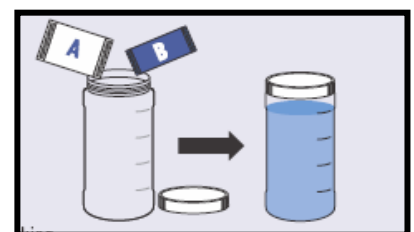
It is important that you drink only clear liquids the day BEFORE and the day OF your colonoscopy. Nothing by mouth four hours prior to your procedure.

➤ **Two days before your colonoscopy**

1. Soft diet/low fiber. No nuts, popcorn, hard fruit or vegetables.
2. Fill your prescription for MoviPrep. If you tend to be constipated, or sometimes need laxative, take 2 tablespoons of Milk of Magnesia at 8 PM.

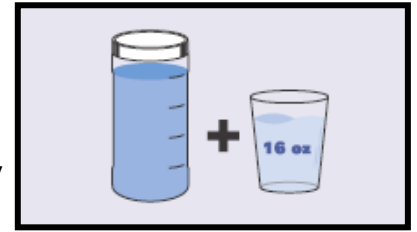
➤ **One day before your colonoscopy**

1. No solid food - Clear liquids only for breakfast, lunch & dinner.
2. Morning: Prepare your MoviPrep solution
Empty 1 pouch A and 1 pouch B into the disposable container; add lukewarm water to the top line of the container; mix to dissolve and refrigerate



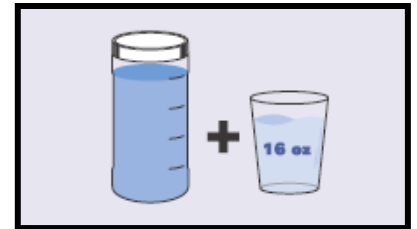
Evening: Date: _____ **Begin** your prep at 6:00pm

1. The MoviPrep container is divided by four marks. Every 15 minutes, drink the solution down to the next mark (approximately 8 ounces), until the full liter is complete.
2. Drink an additional ½ liter of the clear liquids of your choice. You may start going to the bathroom after only a couple of glasses, but be sure to **drink ALL of the solution**.
3. Continue drinking clear liquids until bedtime.
4. **Prepare** the second container of MoviPrep and refrigerate.



Morning of Procedure: Date: _____ Time: _____

1. Five hours prior to procedure begin to drink the second liter. Drink 8 oz every 15 minutes until the full liter is complete. Be sure to **drink ALL of the solution**.
2. Be sure to drink an additional ½ liter of clear fluid. You may drink any clear liquid of choice. This is very important to ensure a successful prep and adequate hydration.
3. You may drink the additional liquid during and after the prep up to four hours prior to the procedure
4. **NOTHING BY MOUTH FOUR HOURS PRIOR TO PROCEDURE.**



LOW or SOFT FIBER DIET: 2 Days prior to colonoscopy

No vegetables, hard fruit or nuts

SOUPS: Broth or cream soups

MEATS: Tender Veal, beef, lamb, ham, chicken, turkey, liver, pork, fish or shellfish

FRUITS: Fruit juices, peeled or baked apples, ripe banana, canned peaches, canned pears, plums, apricots and cherries

CEREALS & BREADS: Refined cereals such as corn flakes, puffed rice, corn pops, frosted flakes, rice krispies, well cooked oatmeal, rice, noodles, macaroni, spaghetti, farina, grits, cornmeal, cream of wheat, white bread, plain crackers, plain rolls, biscuits, cornbread, plain waffles, and pancakes

DESSERTS: Pudding, custard, ice-cream, sherbet, cookies, gelatin desserts

BEVERAGES: Coffee, tea, juices, carbonated beverages, and milk

FATS: Butter, margarine, cream, sour cream, oil, crisp bacon, smooth peanut butter, mayonnaise

MISC: Eggs, Seasonings, jelly, honey, syrup, lemon juice, vinegar, cocoa, catsup, mustard, gravy, sauces, hard and chocolate candy made without nuts, coconut and dried fruits

CLEAR LIQUID DIET: 1 Day prior to colonoscopy

SOUPS: Clear bouillon, clear broth, of consommé

BEVERAGES: Tea, black coffee (decaf/regular), carbonated beverages (soft drinks), Kool-aid, Gatorade, water

JUICES: Cranberry, grape, apple (NO orange juice or tomato juice)

DESSERTS: Jell-O, Iced popsicles, water ices (DO NOT USE red flavors)

MISC: Sugar, salt, hard candy (lifesavers, etc.)

SPECIAL MEDICATION INSTRUCTIONS

We recommend you make the following medication changes prior to your procedure:

- **Blood-thinning medications** (such as Coumadin, Ticlid, Plavix, Persantine, Aggrenox and Lovenox) may need to be discontinued prior to your procedure. **Please contact your prescribing physician** for instructions well in advance; you may need to be off these drugs **up to 10 days** prior to your procedure.
- **Unless prescribed by your physician**, please avoid the following medicines if possible: aspirin, aspirin products (e.g. Alka-Seltzer, BC Powder, etc.) or non-steroidal anti-inflammatory drugs (e.g. Ibuprofen, Nuprin, Advil, Aleve, Motrin, etc.) for 5 days prior to your appointment.
- **Do not take iron pills for 7 days** prior to your procedure.
- **Continue to taking your other prescribed medications (e.g. blood pressure pills) as usual**; if you have any questions about your medications, call your prescribing physician.
- **Diabetic patients**
If you take an oral hypoglycemic ("sugar pill"), **do not take it the day of your procedure**. If you are taking **insulin**, you should only take **half (1/2) of your usual scheduled insulin dose** before your procedure.

COLONOSCOPY PREPARATION INSTRUCTIONS

You have been scheduled for a Colonoscopy with Wake Gastroenterology. (a division of Wake Internal Medicine Consultants, Inc.) This is an examination of your large intestine (colon). A long flexible tube (colonoscope) will be inserted into your rectum and passed through your colon. Your colon will be examined in detail. Additional procedures may be performed such as taking tissue samples (biopsies) and removing polyps.

Please read all the instructions ahead of time so you can be adequately prepared for this procedure. Wake Internal Medicine performs colonoscopy at three locations. Please refer to the cover letter to verify the location of your appointment.

You must have a responsible companion, family member, or friend, 18 years of age or older escort you the endoscopy suite, be available during your procedure, be present at the time of your discharge, drive you home, and stay with you for several hours after your procedure.

If you come **without** an escort to the Wake Gastroenterology unit, the nurse will need the name and phone number of your escort to verify that they will meet you at the end of the procedure. You **may not go home alone** in a taxi, shuttle van, or bus, as these drivers will not be responsible for you. If you receive sedation, you may not drive until the next day. **If you are scheduled at one of the REC locations, your driver MUST remain on site during your procedure.**

If your escort does not accompany you to the unit, or your escort/ driver cannot be contacted, your procedure unfortunately will be rescheduled.

For questions regarding your appointment or preparation, please call (919) 781-7500.

ALL COLONOSCOPY-SIGMOIDOSCOPY-GASTROSCOPY PATIENTS

PRIOR INSURANCE APPROVAL

Some insurance companies require prior approval for these procedures done in the office. It is your responsibility to check with your insurance company for prior approval. If they require authorization, please call our office, (919) 781-7500, ext. 1247, with all pertinent information and we will obtain the authorization. Some insurance companies may not cover screening procedures. If your doctor has requested your procedure because you have reached the age where these procedures are recommended, your insurance company considers this a screening procedure. It is your responsibility to see how your insurance company will cover the procedure. For some outpatient procedures, insurance companies will cover at a percentage or copay different than they would for an office visit.

WAKE INTERNAL MEDICINE PAYMENT POLICY

PAYMENT IS DUE AT THE TIME OF SERVICE

Wake Internal Medicine Consultants does require patients with Medicare and noncontracted insurances to pay to pay your estimated cost of the procedure in full one week prior to services being rendered. This is an estimated cost only and is subject to change in response to the physician's findings and subsequent treatment.

If you have Medicare your estimated cost will be based upon the current Medicare Limiting Allowable, for all other plans your estimated cost will be based upon our current fee schedule. Our office will submit a claim to your insurance company on your behalf. Your insurance company will then remit their payment directly to you, the insured.

If you have insurance that is deductible, coinsurance, or copay the patient will be responsible to pay the full amount prior to services being rendered. For example; if BCBS State is your insurance and have not met your deductible of \$350.00 you will be expected to pay up to \$350.00. If you have met your deductible you will be asked to pay a \$150.00 down payment that is to offset the 20% patient coinsurance.

We thank you for your patience and cooperation through the billing process and greatly appreciate you choosing Wake Internal Medicine for your medical care. If you have any questions regarding your fees please call (919) 781-7500 ext 1324.

ALL COLONOSCOPY – UPPER ENDOSCOPY PATIENTS

Because of the medication you receive, you may not remember the procedure or speaking with the doctor afterwards. We encourage you to ask questions prior to the procedure and to call our office afterward, should you have any questions. The doctor will discuss his findings with you after the procedure. If biopsies or polyps were removed during the procedure, you should receive a phone call regarding the findings within 5-7 business days. If you have not heard from our office about the pathology results within 7-10 business days, please call.

Many insurance companies have additional benefits for screening colonoscopies. If during a screening colonoscopy abnormal findings such as a polyp or lesion is detected and removed, the service then becomes diagnostic. While we always try to minimize any out of pocket expense for our patients, we must comply with these mandates so please verify these benefits with your insurance carrier.

Lower GI Endoscopy *Viewing Your Colon*

What Is Lower GI Endoscopy?

Lower GI endoscopy is a special exam of your lower gastrointestinal (GI) tract. If you are having symptoms of a lower GI problem or have had an abnormal x-ray, this procedure may be done to get a better look. It can also help treat certain lower GI problems.

What Is An Endoscope?

During endoscopy, a long, narrow, flexible tube called an endoscope is used. This instrument contains a strong light video camera. Your GI tract can then be viewed on a video screen.

Getting Ready

Follow these and any other instructions you were given before your endoscopy. If you don't follow the doctor's instructions carefully, the test may need to be cancelled or done over.

For a colonoscopy, you may be told not to eat and to drink only clear liquids for 1 to 2 days before the exam.

Take any laxatives that are prescribed for you. An enema may also be prescribed.

Arrange for someone to drive you home after the exam if you will be sedated.

What to Tell Your Health Care Provider

Tell your healthcare provider before the exam if any of the following is true for you:

You are allergic to any medication or anesthetic.

You take any medication, especially aspirin or blood thinners.

You have heart or lung problems

You are pregnant.

The Procedure

The doctor and a nurse or technician performs the procedure. Colonoscopy can take 30 minutes or longer. Sigmoidoscopy often takes less than 15 minutes.

During the Procedure

You lie on the table on your left side.

For colonoscopy, you are given sedating (relaxing) medication through an IV (intravenous) line. Sigmoidoscopy usually doesn't require sedation.

The endoscope is inserted into your rectum. You may feel pressure and cramping. If you feel pain, tell your doctor or nurse. You may receive more sedation or some pain medication.

The endoscope carries images of your colon to a video screen. Prints of the image may be taken as a record of your exam.

When the procedure is done, you rest for a time. If you have been sedated you must have an adult drive you home.

Lower GI Anatomy

Lower GI endoscopy allows your doctor to examine your lower GI tract. Your entire colon and rectum can be examined (colonoscopy) or just the rectum and sigmoid colon can be examined (Sigmoidoscopy).

What Lower GI Endoscopy Can Do

Lower GI endoscopy helps diagnosis inflammation of the colon (colitis). It can be used to remove growths (polyps) from the wall of the digestive tract. It can be used to take a sample of tissue (biopsy) for later study.

It can pinpoint causes of bleeding or pain. It can also help detect colon or rectal cancer.

After the Procedure

You may hear some test results before you go home. If you had polyps removed or a biopsy, results may take several days. Follow your doctor instructions for how to care for yourself after the procedure.

When to Call Your Doctor

Call if you have any of the following:

Pain in your abdomen

Fever

Rectal bleeding