



## FREQUENTLY ASKED QUESTIONS

### **When should I expect my first bowel movement after starting prep?**

- This varies anywhere from 30 minutes to 1 hours after taking the solution. Stay near your bathroom! Increase bowel movements can cause irritation. We recommend applying a small amount of Vaseline to the rectal area to help relieve this. Additionally, if you have a history of hemorrhoids, it is recommended to have hemorrhoid cream on hand in case you need it.

### **What if I have nausea or vomiting with the colonoscopy prep?**

- Try chilling the prep in the refrigerator or put it on ice.
- Sometimes drinking too much too fast can be a lot for your system to handle. Stop drinking the solution and take a break. This might mean 30-60 minutes before you resume drinking the solution. After nausea has decreased or stopped, you can restart the prep but drink a bit slower. If nausea or vomiting persists, please call our office at 978-741-4171 on or off business hours to speak with our staff.

### **What if I have an upper respiratory infection, active urinary tract infection or are menstruating?**

- If you are currently taking antibiotics for an upper respiratory infection or urinary tract infection (UTI) please call our office at 978-741-4171 to discuss your symptoms with someone from our clinical care team. We will determine if it is ok for you to proceed with your procedure.
- If you are menstruating, this will not interfere with the exam.

### **Can I use the “pill” or “alternative” colonoscopy prep?**

- The pill preps are phosphate-based preps similar to Osmoprep or Fleet phosphosoda. We have moved away from using these preps because of the increasing reports of chronic kidney problems associated with these bowel preps. Additionally, they disrupt electrolyte balance and can cause dehydration.

### **What is PEG/GoLytely solution and why is it NSPG’s “chosen” option for colonoscopy prep?**

- PEG solutions push a large volume of fluid through the intestines to force out waste. It’s considered safer than other prep options because it doesn’t disrupt electrolyte balance or cause dehydration. The downside is that the solution tastes salty, and the large amount of fluid can make some people feel nauseated. Other symptoms are vomiting, bloating and cramping. However, the symptoms go away fairly quickly, and you can add things such as lemon-flavored Crystal Light to help the solution taste better.

### **Can I take my medications the morning of my appointment?**

- For medications that must be taken at a scheduled time and you cannot miss doses (i.e. anti-anxiety and depression meds) you can take your medications with a sip of water. Otherwise, please hold your medication until after your procedure (unless instructed differently by our providers).
- If you take blood thinners (not including Aspirin) and/or Insulin and have not been evaluated by one of our physicians or nurses, please call our office immediately to discuss.
- If you have non-insulin dependent diabetes and are on oral medication(s), take half of your normal dose the day prior to your procedure and hold your medication the day of. You may resume your normal schedule the day after your procedure.

## FREQUENTLY ASKED QUESTIONS (cont'd)

### **Do I have to continue taking the prep if my stool is passing clear?**

- No. Once your stool is running clear or looks similar to the color of urine, this means you have a clear colon and can just continue your clear liquid diet.

### **After a procedure can I go home by myself?**

- No. If you receive any amount of sedation medication you will need a family member or friend to take you home. You may not drive, take public transportation or a taxi alone after the procedure.

### **When will I be able to resume normal activity after the procedure?**

- Usually by the next day.

### **When will I be able to return to work after the procedure?**

- By the next day.

### **What medication is used for sedation during the procedure?**

- We use a combination of two or three medications which are rapidly acting intravenous sedatives. The amount and combination can vary based on each person's medical history. A gastroenterologist will make this determination after reviewing your past medical history, current medication list and allergy list. If you have further questions or concerns, please feel free to contact our office at 978-741-4171.

### **Will I meet the physician doing the procedure prior to the procedure?**

- Yes. If you have not met the physician in the office, you will meet the physician in the endoscopy unit prior to the procedure.

### **What time should I arrive for my procedure?**

- If your procedure is scheduled at NSMC/Salem Hospital: You should arrive 60 minutes prior to the scheduled procedure start time. Please report to the Wheelock 5 Endoscopy Unit.
- If your procedure is scheduled at the MGH/Center for Outpatient Care: You should arrive 60 minutes prior to your scheduled procedure time if you are receiving regular sedation. But, if you are receiving "deep sedation" you would need to arrive 90 minutes early. You would have been told by either the scheduler or received a call from the endoscopy nurse if you were elected to receive deep sedation.

### **What time will I be ready to leave after my procedure?**

- You should expect to be at the hospital for 2 to 2 ½ hours from your arrival time.