



COLON AND RECTAL CENTER OF ARIZONA

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A member of Arizona Associated Surgeons

What to expect the day of your colonoscopy:

When you arrive at the facility where your procedure will be done, the staff there will check you in. You will be taken to a room to change into a patient gown and asked to wait on a gurney bed. A nurse of anesthesia doctor will take your history, check your vital signs, and start an intravenous line. You will see Dr. Forstner-Barthell shortly before your procedure starts. Once your doctor arrives, the nursing staff will start sedation medication and will begin the procedure.

Most patients fall asleep with the sedative and narcotic medications we administer and afterwards have little or no memory of the procedure. There is a maximum amount of medication we can give safely in an outpatient setting; it is extremely rare that we reach this level-thus most patients sleep comfortably. Some patients want to be awake and watch the procedure; let the nurse or doctor know if this is the case.

In patients who are very overweight, suffer from sleep apnea, or have a history of prior traumatic colonoscopy, we will request that an anesthesiologist be present - these doctors can safely induce deep sleep like an anesthetic while safely protecting your breathing and airway. An anesthesiologist must be arranged prior to the date of the procedure by the surgery scheduler, Pat. A few patients don't want medications at all –although this may seem incredulous to many, these are the lucky few who can undergo a colonoscopy without it causing any pain. They are asking questions, smiling and chatting during the procedure.

After the colonoscopy is done, you will be wheeled on your gurney to a recovery area. Here a recovery nurse will keep a close watch on you and monitor your vitals until you are fully awake. You will be asked to pass gas, clearing the air we placed in your colon during the procedure. Your ride or family member will join you here. The doctor will meet with you and tell you the results of the colonoscopy.

If polyps or biopsies are done during your procedure, they will take up to a week to be evaluated at the pathology department. When we receive the report back at the office, the doctor reviews the results and they you will receive a phone call from our office about the results. If we do a biopsy and you have not heard back from our office within a week of your procedure, please call to check on your pathology report. Never assume “no news is good news”.



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REMEMBER:

EATING AND DRINKING:

You will need to fast, nothing to eat, for eight hours prior to the colonoscopy. You can have clear liquids such as water up until four hours prior to your procedure. If you eat or drink, we will need to cancel the procedure as it is unsafe to sedate you with food or fluids in your stomach.

MEDICATIONS:

If you take medications for high blood pressure or for your heart in the morning, you should take those medications with a sip of water. Don't skip heart medications without specific approval from a physician. If you have any questions about whether or not to take your blood pressure or heart medications, call the office.

Do not take aspirin or blood thinners such as Plavix and Coumadin for 7 days before your procedure. Of we remove a polyp during your procedure, we may ask you to remain off of those medications for another 10 days after the procedure. If you forget and take your blood thinners, we can still sometimes remove small polyps, but you must accept a higher risk of bleeding that could be so serious that you would require surgery to stop it. Let us know if you forget to stop your blood thinners, or if you believe you should continue on them.

Diabetic patients should use their blood sugar pills and shots carefully in preparation for the procedure. If you take a pill such as Metformin or Glyburide for your diabetes, do not take this medication on the morning of the procedure. If all goes well, you can restart your diabetes medications later in the day. If you take insulin, take half of your normal evening dose of long acting insulin on the night before the procedure. Check your blood sugar on the morning of the procedure and take short acting insulin if necessary. After the procedure when you are eating your normal diet, you can resume your regular diabetic pill and shot regimen. Check with your primary care doctor for instructions about your insulin if you have any questions.

The above information should be used in combination with direction from Dr. Forstner-Barthell or her assistants, and does not constitute medical advice.

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