COLONOSCOPY WITH GOLYTELY PREPARATION

ITEMS NEEDED FOR YOUR COLONOSCOPY PREP:

* One gallon jug of Golytely Prep (a prescription will be faxed to your pharmacy)
PLEASE NOTE: follow below instructions only, please do not follow the instructions given at the pharmacy.
* 2 Dulcolax/Bisacodyl 5 mgs **TABLETS** (No soft gels or gummies)

THE PREP:

**Add drinking water to the Golytely jug up to the indicated line near the top. Shake until powder is mixed with liquid and chill in the refrigerator
**12:00 NOON take 2 Dulcolax/Bisacodyl tablets with an 8oz. glass of water
**1:00pm--DRINK 1/2 GOLYTELY SOLUTION--- One 8oz. glass every 10-15 minutes. If you experience bloating, nausea or discomfort, SLOW DOWN and allow more time
**3:00pm--DRINK the other half of the Golytely Solution until gone
Be sure to drink all of the solution. Not completing the bowel prep may result in rescheduling your procedure. By the morning you should be having greenish-yellow to clear liquid bowel movements.

NOTE: It is common to experience abdominal discomfort until the stool has flushed from your colon. This may take 2 to 4 hours, sometimes significantly longer. If this occurs, continue drinking clear liquids until you have a bowel movement.
STOP drinking the bowel prep solution and contact our office, if you experience severe distention, pain, or vomiting

MORNING OF PROCEDURE:

Nothing by mouth (solid food or liquids) the morning of your procedure. If you take daily medication, you may have a sip of water with your medication.

CLEAR LIQUID DIET

*Gatorade, Pedialyte, or Powerade
*Coffee or tea (NO milk or non-dairy creamer)
*Carbonated or non-carbonated soft drinks
*Kool-aid or other fruit flavored drinks
*Apple juice, white cranberry juice, or white grape juice
*Jell-O, popsicles
*Chicken, beef, or vegetable broth

NOT ALLOWED

*Red or purple items of any kind
*Alcohol
*Milk or non-dairy creamers
*Juice with pulp
*Hard candy or gum
*Any liquid you cannot see through

(COLONOSCOPY CODES RANGE FROM 45378-45385)

1. **STATEMENTS** - You will receive separate bills from the following companies:

   ***Northeastern Gastroenterology** - Physician fee and Pathology fee (professional and/or technical component)
   ***Mountain Laurel Surgery Center or CHS Facilities** - Facility fee
   ***Keystone Medical Lab** - Pathology fee (technical component)

2. **CANCELLATION NOTICE** - Northeastern Gastroenterology and Mountain Laurel Surgery Center require 24 hours notice. There will be a fee of $100.00 for Mountain Laurel Surgery Center for all tests not canceled in advance.

3. **REFERRAL** - IF your insurance requires a referral from your Primary Care Physician, please be sure to bring the referral with you at the time of your scheduled visit OR the physician's office can fax the referral directly to us.

4. **PRECERTIFICATION** -IF your insurance plan requires a precertification for a colonoscopy (PROCEDURE CODES 45378-45385) being done at an ambulatory surgical center or a hospital, please let us know and we will contact your insurance carrier to obtain it.

5. **SCREENING COLONOSCOPIES** - If your insurance plan has a wellness package,you *need* to let our billing department know prior to your procedure the answers to the following questions:

   A. Does your plan cover colonoscopy screenings? (A screening means you are having no problems that would warrant a colonoscopy for diagnostic reasons)

   B. How often does your plan allow you to have a screening?

PLEASE NOTE- A screening colonoscopy will change to a diagnostic colonoscopy if a biopsy is done

PLEASE KEEP IN MIND THAT YOUR INSURANCE POLICY IS A CONTRACT BETWEEN YOU AND YOUR INSURANCE COMPANY. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT OUR BILLING DEPARTMENT AT 570-253-3391