



**DIESTIVE**  
DISEASE ASSOCIATES  
**RECTAL ULTRASOUND PREPARATION**

☐ North Florida Regional Medical Center  
6500 W. Newberry Rd. 3<sup>rd</sup> floor  
(You must call to pre-register)  
(352) 333-4060

1. You are scheduled for a Rectal Ultrasound on \_\_\_\_\_ at approximately 11:30 AM. You **MUST** arrive at 9:30 AM.
2. **7 DAYS PRIOR TO PROCEDURE:** If you are taking iron, Vitamin E, aspirin or aspirin products (i.e.: Buffererin, Anacin, Ecotrin, Excedrin, Alka Seltzer, Goody's Powders, Elmiron, Pletal, or Aggrenox) or anti-inflammatory medications (i.e.: arthritis medications Aleve, Motrin, Advil, Ibuprofen and Arthrotec) **you must stop these Seven (7) days prior to your procedure**, unless otherwise instructed by your doctor. The doctor will inform you after the procedure of when to restart the above medications. Some multivitamins contain a small amount of iron, but are all right to take. **Tylenol and Celebrex are okay to take.**
3. **5 DAYS PRIOR TO PROCEDURE:** If you take a blood thinner called **Coumadin, Warfarin, or Jantoven**, you must stop this medication 5 days prior to your procedure. Your labs will be drawn the day before your procedure to check your levels. The doctor will inform you after the procedure when to restart your Coumadin.  
  
Medications you must stop 5 days prior to your procedure include: Plavix, Iron, Vitamin E, Fish Oil, unless otherwise instructed by your doctor. The doctor will inform you after the procedure when to restart the above medications. Some multivitamins contain a small amount of iron, but are all right to take.
4. **3 DAYS BEFORE PROCEDURE:**EAT A LOW ROUGHAGE DIET STARTING 3 DAYS BEFORE THE PROCEDURE. See attached.
5. **DAY BEFORE PROCEDURE:** You will be on a clear liquid diet the entire day before your procedure. Attached is a clear liquid diet.
6. **DAY OF PROCEDURE:** **If you are diabetic, DO NOT TAKE YOUR INSULIN or ORAL AGENT THE DAY OF YOUR PROCEDURE. TAKE HALF (1/2) YOUR USUAL DOSE OF INSULIN or ORAL AGENT THE DAY BEFORE YOUR PROCEDURE. Bring your medication with you the day of your procedure.**  
  
**Eating/Drinking prior to your procedure: Four (4) hours** prior to your procedure: **NOTHING BY MOUTH (not even water)**  
  
**Other medications:** Take your heart, blood pressure, seizure, depression, nerve and/or stomach medications at your normal time of day, but Must be **at least 4 hours prior to your procedure. If you take a respiratory inhaler please take it at your normal scheduled time.**
7. You must have a responsible adult to bring and take you home after the procedure. Your driver must stay on the hospital grounds while you are here. **You must not drive for 16 hours after the procedure.** If you do not have transportation home, the procedure will be cancelled. Taxi service is not an acceptable form of transportation, unless you have a responsible adult with you. You will be ready to go home when your doctor discharges you. Remember you must not drive for 16 hours for your own safety and the safety of others.
8. If you have a change in your health (prior to your procedure), please contact your physician's Team Leader as soon as possible.
9. For any questions regarding these instructions, please call 352-331-8902 between 8am-5pm, Monday thru Friday.  
Ask for Procedure Scheduling Department.
10. Please leave your valuables at home the day of your procedure. Also, due to space limitations, please limit the number **of people that come with you to 1 or 2.**

*You will receive two separate charges for your procedure, one from your DDA physician and one from the facility where the procedure was performed.*

**If you have any changes in your insurance please contact our Insurance department at 352-331-8902**

**A minimum of 48-hours advance notice is required if you must cancel or reschedule you appointment. A missed appointment fee of \$75 will be charged for missed appointments without the minimum 48-hour notice.**

## **LOW ROUGHAGE DIET**

Three days prior to your procedure begin a low roughage diet

All Day on \_\_\_\_\_

### **EAT:**

- Breads, Cereals, crackers, chips, and pasta with less than 1 gram of fiber per serving (ideally, look for products with zero grams of dietary fibers per serving.)
- White rice
- Vegetable juices without seeds or pulp
- Fruit juices with no pulp
- Milk, Yogurt, Pudding, Ice Cream, and cream-based soups and sauces (Strained)
- Tender meat, Poultry, Fish and Eggs
- Oil, Margarine, Butter, and Mayonnaise
- Smooth salad dressings
- Broth-based soups (strained)
- Jelly, Honey and Syrup

### **AVOID:**

- Whole-grain Breads, Cereals and Pastas
- Whole Vegetables and Vegetable sauces
- Whole Fruits, including canned fruits
- Yogurt, Pudding, Ice Cream or cream-based soups with nuts or pieces of fruits or vegetables
- Tough or coarse meats with gristle and luncheon meats or cheese with seeds
- Peanut Butter
- Salad dressing with seeds or pieces of fruits or vegetables
- Seeds
- Nuts
- Marmalade

While consuming a low-residue diet, limit dairy products (such as milk, yogurt, pudding, ice cream and cream-based soups and sauces) to no more than 2 cups a day.

## **CLEAR LIQUID DIET**

ALL DAY \_\_\_\_\_ and up to 4 hours prior to your procedure on \_\_\_\_\_

### **EAT:**

- Clear fruit juices (i.e. Apple juice or White Grape juice)
- Clear broth, bouillon and consommé
- Clear flavored gelatin
- Popsicles and/or flavored ices
- Black coffee, tea, carbonated beverages (Coke, Pepsi, or Sprite) and /or powdered drink mixes (Must Be Clear)
- Salt and Sugar

### **You MUST AVOID the following**

- Juice with pulp (i.e. Orange, Grapefruit, Tomato, or V-8)
- Ice Cream
- Milk and/or Creamer – Including non-dairy and Protein Shakes
- Alcohol
- Anything RED in color

**Please avoid any food or drink red in color**

## GOLYTELY, NULYTELY, OR COLYTE PREP

Your doctor has ordered a special preparation to clean out your large intestine (colon). This preparation is called Golytely (Nulytely or Colyte). It is not absorbed by your body but rinses all solid matter from your colon allowing the doctor to visualize inside your colon. You will have liquid stools. A prescription for Golytely (Nulytely or Colyte) is attached to this instruction packet and should be filled at your pharmacy.

Mix the Golytely (Nulytely or Colyte) the night before you are to begin drinking it and refrigerate it. The Golytely (Nulytely or Colyte) bottle has a fill line on it. Just add water to the fill line, replace cap and shake. The entire day before your exam you will be on a clear liquid diet starting with breakfast.

**START drinking the Golytely \*Nulytely or Colyte between 12:00 P.M. (Noon) and 6 P.M. the day before your examination is scheduled. You may start earlier.**

**Drink the Golytely:** Every 15 Min., drink 8 oz glass of the solution until half of solution is gone.

**If nauseated stop the prep for 45 minutes then resume.** If you feel full or feel cramps or nausea, you may be drinking too fast. Sip the solution slowly. You may add clear, sugar-free, powdered flavor enhancers (such as Crystal Light®) or lemon juice to improve the taste. It is most important to finish drinking the entire bottle of the prep.

If nausea persists, stop drinking the prep and call the office at 352-331-8902 (We have a on call doctor available all hours). Continue to drink clear liquids until bedtime.

### FOR MORNING PROCEDURES

#### TWO TO FOUR HOURS AFTER STARTING GOLYTELY

**Drink the other half:** Every 15 Min. drink 8 oz glass of the solution until the entire solution is gone.

### FOR AFTERNOON PROCEDURES

#### THE DAY OF PROCEDURE BEFORE 6 A.M.

**Drink the other half the Golytely:** Every 15 Min., drink 8 oz glass of the solution until the entire solution is gone.

**USE ONLY IF BOX  IS CHECKED!** Both are available *over the counter* at your local drug or grocery store.

Take 2 Bisacodyl 10 Mg. Laxative Tablets after finishing Golytely prep. (*\*Bisacodyl tablets contain RED DYE\**)

Magnesium Citrate. (**NOT CHERRY FLAVORED**) One bottle, after dinner, two days before the procedure (only for diagnosis of constipation).

**You may want to apply A&D Ointment or KY Jelly to the anal area before and during your preparation for your colonoscopy to relieve anal irritation.**



**INFORMATION REGARDING ENDOSCOPIC ULTRASOUND (EUS)**

Endoscopic Ultrasound (EUS) uses both endoscopy and ultrasound to gather information about parts of the digestive tract. The two technologies combined provide more accurate, detailed information than provided by either alone.

An ultrasound endoscope can show the inside of the digestive tract but also the surrounding tissues and digestive organs. The combined technology allows the physician to see the esophagus, stomach, small and large intestines and even the heart, lungs, liver, spleen, pancreas, gallbladder, bile ducts and prostate gland.

During your EUS, the physician may withdraw cells or fluid from part of a lymph node or tissue for diagnostic purposes during this procedure. This test may be used to determine the stage of some cancers, to evaluate bumps in the stomach, intestinal wall and problems of the pancreas or abnormalities in the bile ducts.

**The risks associated with these procedures include, but are not limited to:** There is the possibility of experiencing a rare allergic reaction to the medications used to achieve sedation. This reaction may result in hospitalization or rarely death. The drugs usually used are intravenous Propofol, Fentanyl, or Versed. On occasion, other drugs such as Demerol and/or Benadryl may be used. Patients may also develop phlebitis, an inflammation of the intravenous site, which may require antibiotic therapy and hospitalization. Other complications are perforation, infection and aspiration.

Perforation is a major, but very uncommon complication of EUS. This is a tear through the lining of the gastrointestinal wall that might require surgery for repair.

The possibility of complications increases slightly if a deep needle aspiration is performed during the EUS examination. These risks must be balanced against the potential benefits of the procedure and the risks of alternative approaches to the condition.

All of the above complications are rare. They have been reported to happen with a statistical frequency of about 20 in 1,000 cases.

Bruising or a small tear in the inside of the lip may occur. Crown, carious or loose teeth, and dental appliances may be damaged if you bite down on the plastic airways or mouth-piece that will be placed in your mouth during your procedure. We cannot be held responsible for this type of damage.

Alternative methods for evaluation of the gastrointestinal tract are radiological studies. These involve drinking a contrast agent or introducing a contrast into the rectum. These are less sensitive than Endoscopy for detecting abnormalities. Once an abnormality is noted, it can only be sampled (biopsied) by surgery or Endoscopy.

Benefits of Procedures/Treatments: The benefit of endoscopic evaluation is that EUS is a direct inspection and aspiration biopsy may be performed in the same procedure. This will help establish your diagnosis.

***My signature below indicates that I have read and understand the handout "DIGESTIVE DISEASE ASSOCIATES INFORMATION REGARDING GASTROINTESTINAL ENDOSCOPY". I have had the opportunity to ask questions about the procedure and my questions, if any, have been answered to my satisfaction.***

***My signature below also indicates that if I have a biopsy taken during my procedure, I should hear from the office in about 14 day if not I will call in 14 days ( \_\_\_\_\_ ) to get my results.***

\_\_\_\_\_  
Print Patient's Name

X \_\_\_\_\_  
Patient's Signature

\_\_\_\_\_  
Witness' Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
DDA Patient Number

\_\_\_\_\_  
Procedure Date- Rectal Ultrasound