

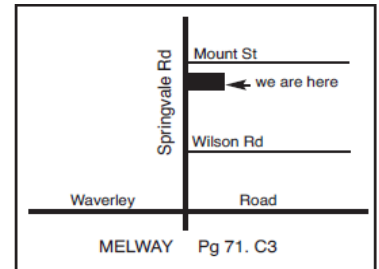
Founder: Dr Robert Lu-Chiang Wong  
(Registered & Accredited Day Hospital)

## Patient COLONOSCOPY Preparation Instruction Booklet - PLENVU

**Gastroenterologists:** Dr Amir Safe Dr Suresh Sivanesan  
Dr Elizabeth Chow Dr Eu Jin Lim Dr Viet Pham

**Examination requested:**  Gastroscopy  Colonoscopy

**For appointments:** 9545 0569



### APPOINTMENT DETAILS

Date \_\_\_\_\_ Time \_\_\_\_\_

### PATIENT DETAILS

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Post Code \_\_\_\_\_

Indications \_\_\_\_\_

### REFERRING DOCTOR DETAILS

Dr \_\_\_\_\_ Provider Number \_\_\_\_\_

Address \_\_\_\_\_ Post Code \_\_\_\_\_

Tel No \_\_\_\_\_ Fax No \_\_\_\_\_ Date of referral \_\_\_\_\_

### REFERRING DOCTORS: PRE-ADMISSION ASSESSMENT

1. Pre-admission assessment form must be filled out and reviewed by our medical staff at least 1-2 weeks before the procedure. The form can be completed at our centre or can be downloaded from our website and sent back to us by email or fax. Please remember to include your referral letter.
2. Some patients may want an appointment before the procedure or separately after the procedure if he/she wishes for more lengthy discussions about the procedure or findings.
3. Our staff can assist with inquiries from you or your patient.

#### **Pre-admission consultation is recommended for the following (a guide):**

- Combinations of cardiovascular, respiratory, metabolic, or endocrine conditions predisposing to coronary heart disease or significant cardiac or respiratory compromise
- Age 80yo and above
- Age 75yo and above plus cardiovascular/respiratory/obstructive sleep apnoea (OSA) symptoms/metabolic/endocrine conditions
- BMI 40 and above; Weight > 120kg regardless of BMI (due to occupational health & safety)
- BMI 35 and above with cardiovascular, respiratory, OSA symptoms, metabolic or endocrine conditions (150cm, >80kg) (160cm, >90kg) (170cm, >100kg) (180cm, >115kg)
- Heart disease including stents, pacemakers, defibrillators, artificial valves, coronary artery disease, arrhythmias, stroke, congestive cardiac failure
- Chronic obstructive airway disease, Obstructive sleep apnoea
- Diabetes requiring insulin or SGLT-2 inhibitors / Kidney or liver disease / Bleeding or clotting conditions

#### **Blood thinning agents: Antiplatelet drugs:**

- Dipyridamole (Persantin, Persantin SR)
- Aspirin-Dipyridamole (Asasantin SR)
- Clopidogrel (Iscover, Plavix, Pidogrel, Plavacor, APO-Clopidogrel)
- Aspirin-Clopidogrel (APO-Clopidogrel, Clopidogrel/Aspirin, CoPlavix, DuoCover, DuoPlidogrel, Piax Plus)
- Prasugrel (Effient), Ticagrelor (Brilinta)
- Ticlopidine (Ticlid, Tilodene)

### **Oral Anticoagulant drugs:**

- Warfarin (Coumadin, Marevan) Dabigatran (Pradaxa), Rivaroxaban (Xarelto), Apixaban (Eliquis), Phenindione (Dindevan)
- Heparin anticoagulants: Heparin (Calciparine, heparin Sodium, Heparinsed Saline), Enoxaparin (Clexane, Lovenox, Xaparin) Dalteparin (Fragmin), Fondaparinux (Arixtra)

### **Insulin or SGLT-2 Inhibitors for Diabetes:**

- Insulin
- Forxiga (Dapagliflozin), Invokana (Canagliflozin), Jardiance (Empagliflozin), Steglatro (Ertugliflozin), Xigduo XR, Jardiamet, Segluromet, Qtern, Glyxambi, Steglujan
- Wegory, Ozempic(semaglutide), Mounjaro(Tirzepatide),Liraglutide(Victoza or saxenda),Trulicity(Dulaglutide),Exanatide(Bydureon, Byetta), Exanatide entended release(Bydureon bcise)
- If you are taking any other diabetes medication, please contact our centre for advice.

### **Deferring procedure:**

- A patient may need to defer his/her procedure if there is possibility of pregnancy, acute viral/bacterial illness, recent falls, recent exacerbations of health conditions etc.
- Other medical/surgical conditions may need to be sorted out first and information provided to us especially cardiovascular, respiratory or endocrine conditions.

### **ANAESTHESIA INSTRUCTIONS (ALL PATIENTS) – IMPORTANT!**

- Intravenous medications (anaesthetic) will be given via a peripheral vein, usually in your hand or forearm.
- Sometimes anaesthetic throat spray (gastroscopy) is used and you will have some mouth & throat numbness for a few hours - after your procedure, be careful about drinking/eating fluids/foods that are too hot or too cold.
- Anaesthesia affects your judgement & coordination. **For safety, within 24 hours of your anaesthetic:**
  - **Do NOT drive any vehicle or operate machinery including cooking implements.**
  - **Do NOT make important decisions or sign legal documents.**
  - **Do NOT drink alcohol/smoke/take mind-altering substances as they may react with the anaesthetic.**
  - **Do NOT care for others without other adult help especially young children.**
- ESCORT: You must have a responsible adult take you home in a suitable vehicle. Train/tram/bus/walking are not allowed.
- COMPANION: **You must have a responsible adult stay with you at home for the rest of the day and overnight.**
- REST: You should rest at home and catch up with oral fluids/food.

### **PATIENT RESPONSIBILITIES FOR SAFETY AND QUALITY OF TEST**

- **Please read and follow our instructions carefully.** Please contact our staff or your doctor if you need further explanations.
- When making your appointment, **please inform staff of your medical conditions, medications, height & weight and if you are breastfeeding or may be pregnant.**
- After we receive your pre-admission forms, **one of our nurses will call you regarding the bowel preparation**, unless you have purchased the prep-kit from our centre and already seen our nurse. **You must speak to the nurse** either in person or over the phone before your appointment, otherwise your procedure may be rescheduled. Please make sure you return the phone call if we leave you a message.
- **You may require a preadmission assessment** at least one week before the procedure day if you have certain health conditions or if you are taking certain medications. Your referring doctor and our staff can advise you.
- Please familiarise yourself with risk and safety of your procedure(s) on page 4. The examinations are usually safe though they carry some **risks** of complications. If you wish to discuss the procedure(s) and their risks with our endoscopist and/or anaesthetist earlier and in greater detail, please make an appointment at least one week before the procedure

### **ABOUT GASTROSCOPY**

- Gastroscopy is a procedure that examines the lining of the oesophagus/food pipe, stomach and duodenum (first part of the small intestine) with an endoscope, which is a long, thin, flexible tube with a camera and light source.
- The endoscope is inserted via the mouth under sedation so you will not be aware of the procedure. Sometimes local anaesthetic is sprayed into your throat.
- Biopsies (tiny samples) may be taken from the lining of the oesophagus, stomach or duodenum with a biopsy forceps.

### **ABOUT COLONOSCOPY**

- A colonoscopy enables the lining of the colon/large intestine/bowel to be examined for abnormalities like inflammation, polyps or cancers. Biopsies/samples may be taken with a biopsy forcep and polyps are generally removed.
- Intravenous sedation will be given, and you will be lying on your left side mainly.
- The bowel must be **as clean as possible** to enable effective examination. It is also important to **avoid dehydration** – so please follow the bowel preparation instructions carefully. We also advise you to **have someone be with you** in case you need any assistance

## COLONOSCOPY PREPARATION

### APPOINTMENT UP TO 11:00AM (INCLUSIVE)

- 1) Purchase from Pharmacy one packet of **PLENVU (CONTAIN Dose 1 AND Dose 2 A+B)** No prescription is needed for these medicines.
- 2) If you **take insulin, SGLT-2 Inhibitors, GLP-1 injection for diabetes or blood thinning agents** (see list of drugs on page 1-2), please follow the instructions given by our doctor at your pre-admission assessment.
- 3) If you are on **fluid restriction due to a medical condition** you need a pre-admission appointment and further advice.

#### 5 days prior Day: Date:

- ✓ Take your regular medications, unless advised otherwise.
- ✗ **STOP** iron tablets, fish oil and fibre supplements such as Metamucil.
- ✗ **STOP EATING** any foods containing:
  - ✗ **Nuts** for example peanut, walnut, almond...etc, and
  - ✗ **Seeds** for example pumpkin seed, chai seed, tomato, passion fruit, kiwi, dragon fruit...etc and
  - ✗ **Multigrain** for example Oats, cereal, multigrain bread

#### 2 days prior Day: Date:

- ✓ Take your regular medications, unless advised otherwise. Reduce the amount of fibrous and fatty foods
- ✓ **You need to start eating “white diet” as listed below**
  - ✓ White bread, white (plain) biscuits, plain cake, Honey, vegemite, butter, margarine, mayonnaise, milk, yogurt
  - ✓ Rice congee, white rice, white noodles, Cornflakes, Rice Bubbles, Chicken breast without skin, fish without skin, eggs, tofu, white potatoes without skin, pumpkin without skin, banana
  - ✗ **Anything not listed above do not eat.**

#### 1 day prior Day: Date:

- ✓ Take your regular medications, unless advised otherwise.
- ✓ Before 12 noon, you may eat light breakfast and light lunch (white diet as listed above).
- ✗ **After 12 noon, only drink clear fluids as listed below, DO NOT consume any solid food, or milk/milk products.**
- ✓ Whilst taking the preparation, you may experience dehydration, hypotension, dizziness, electrolyte imbalance and increased risk of falls. Therefore, it is important that you **drink EXTRA variety of clear fluids** while taking the preparation.
  - ✓ **Clear fluids include:**
    - ✓ **Water, honey water, Black coffee, tea, (no milk/milk products), Clear broth, Bonox**
    - ✓ **Light coloured soft drink, cordial, sports drink, icy pole (avoid deep colouring, such as red, purple)**
    - ✓ **Clear, strained, pulp-free juices, such as apple juice, coconut water**
    - ✓ **Light coloured, clear aeroplane jelly (cannot contain seaweed/seaweed extract)**

<b>7 pm</b>	<b>Drink Dose 1 of PLENVU (mango flavour)</b> <ul style="list-style-type: none"><li>• <b>Mix:</b> Stir “Dose 1” sachet into 500ml of water until it is completely dissolved.</li><li>• <b>Prepare</b> a separate 500ml of any “clear liquid” (listed above).</li><li>• <b>Drink:</b> Alternate between Dose 1 (via straw) and clear liquids within 60 minutes until both are finished.</li><li>• <b>Hydrate:</b> Continue drinking clear fluids to stay hydrated.</li></ul>
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#### Day of procedure Day: Date: Appointment Time:

<b>4 hours before your appointment time</b>	<b>Dose 2 of PLENVU (fruit punch flavour)</b> <ul style="list-style-type: none"><li>• <b>Mix:</b> Stir “Dose 2” sachet A+B into 500ml of water until it is completely dissolved.</li><li>• <b>Prepare</b> a separate 500ml of any “clear liquid” (listed above).</li><li>• <b>Drink:</b> Alternate between Dose 2 (via straw) and clear liquids within 60 minutes until both are finished.</li></ul>
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- ✗ **DO NOT drink any fluids (including water) 3 hours prior to your appointment time.**
- ✗ **DO NOT chew gum or consume mints or lollies.**
- ✓ Please take your morning regular medications for reflux, epilepsy, blood pressure, heart rate and asthma before 6am with a sip of water.
- ✓ When you arrive:
  - ✓ Wear a t-shirt and loose clothing, flat shoes and do not bring valuables with you. Bring spare pair of underpants
  - ✓ Bring all your regular medications to show anaesthetist if you don't know the names of your medication,
  - ✓ Bring Medicare card and private insurance card if you are insured
- ✓ You must have a responsible adult take you home in a suitable vehicle and stay with you at home for the rest of the day and overnight. Train/tram/bus/walking home are not allowed.

**COLONOSCOPY PREPARATION**

**APPOINTMENT FROM 11:15AM**

- 1) Purchase from Pharmacy one packet of **PLENVU (CONTAIN Dose 1 AND Dose 2 A+B)** No prescription is needed for these medicines.
- 2) If you **take insulin, SGLT-2 Inhibitors, GLP-1 injection for diabetes or blood thinning agents** (see list of drugs on page1- 2), please follow the instructions given by our doctor at your pre-admission assessment.
- 3) If you are on **fluid restriction due to a medical condition** you need a pre-admission appointment and further advice.

**5 days prior Day: Date:**

- ✓ Take your regular medications, unless advised otherwise.
- ✗ **STOP** iron tablets, fish oil and fibre supplements such as Metamucil.
- ✗ **STOP EATING** any foods containing:
  - ✗ **Nuts** for example peanut, walnut, almond...etc, and
  - ✗ **Seeds** for example pumpkin seed, chai seed, tomato, passion fruit, kiwi, dragon fruit...etc and
  - ✗ **Multigrain** for example Oats, cereal, multigrain bread

**2 days prior Day: Date:**

- ✓ Take your regular medications, unless advised otherwise. Reduce the amount of fibrous and fatty foods.
- ✓ **You need to start eating “white diet” as listed below**
  - ✓ White bread, white (plain) biscuits, plain cake, Honey, vegemite, butter, margarine, mayonnaise, milk, yogurt
  - ✓ Rice congee, white rice, white noodles, Cornflakes, Rice Bubbles, Chicken breast without skin, fish without skin, eggs, tofu, white potatoes without skin, pumpkin without skin, banana
  - ✗ **Anything not listed above do not eat.**

**1 day prior Day: Date:**

- ✓ Take your regular medications, unless advised otherwise.
- ✓ Before 2 pm, you may eat light breakfast, light lunch (white diet as listed above).
- ✗ **After 2 pm, only drink clear fluids as listed below, DO NOT consume any solid food, or milk/milk products.**
- ✓ Whilst taking the preparation, you may experience dehydration, hypotension, dizziness, electrolyte imbalance and increased risk of falls. Therefore, it is important that you **drink EXTRA variety of clear fluids** while taking the preparation.
- ✓ **Clear fluids include:**
  - ✓ Water, honey water, Black coffee, tea, (no milk/milk products), Clear broth, Bonox
  - ✓ Light coloured soft drink, cordial, sports drink, icy pole (avoid deep colouring, such as red, purple, black)
  - ✓ Clear, strained, pulp-free juices, such as apple juice, coconut water
  - ✓ Light coloured, clear aeroplane jelly (cannot contain seaweed/seaweed extract)

**Day of procedure Day: Date: Appointment Time:**

<b>5 am</b>	<p><b>Drink Dose 1 of PLENVU (mango flavour)</b></p> <ul style="list-style-type: none"> <li>• <b>Mix:</b> Stir “Dose 1” sachet into 500ml of water until it is completely dissolved.</li> <li>• <b>Prepare</b> a separate 500ml of any “clear liquid” (listed above).</li> <li>• <b>Drink:</b> Alternate between Dose 1 (via straw) and clear liquids within 60 minutes until both are finished.</li> <li>• <b>Hydrate:</b> Continue drinking clear fluids to stay hydrated.</li> </ul>
<b>4 hours before your appointment time</b>	<p><b>Dose 2 of PLENVU (fruit punch flavour)</b></p> <ul style="list-style-type: none"> <li>• <b>Mix:</b> Stir “Dose 2” sachet A+B into 500ml of water until it is completely dissolved.</li> <li>• <b>Prepare</b> a separate 500ml of any “clear liquid” (listed above).</li> <li>• <b>Drink:</b> Alternate between Dose 2 (via straw) and clear liquids within 60 minutes until both are finished.</li> </ul>

- ✗ **DO NOT drink any fluids (including water) 3 hours prior to your appointment time.**
- ✗ **DO NOT chew gum or consume mints or lollies.**
- ✓ Please take your morning regular medications for reflux, epilepsy, blood pressure, heart rate and asthma before 6am with a sip of water.
- ✓ When you arrive:
  - ✓ wear a t-shirt and loose clothing, flat shoes, and do not bring valuables with you. Bring spare pair of underpants
  - ✓ Bring all your regular medications to show anaesthetist if you don’t know the names of your medication,
  - ✓ Bring Medicare card and private insurance card if you are insured
- ✓ You must have a responsible adult take you home in a suitable vehicle and stay with you at home for the rest of the day and overnight. Train/tram/bus/walking home are not allowed.

## RISKS & SAFETY OF PROCEDURES

Gastrointestinal endoscopies are usually very safe procedures. However, there is a slight risk of complications requiring further management. If you wish to discuss these earlier or in greater detail, please make a pre-procedure appointment at least one week before your procedure appointment.

### Specific risks of colonoscopy

- a. Abdominal bloating after the procedure due to air used to inflate the large bowel. There may be mild to severe pain that usually settles with walking and moving around to get rid of the air.
- b. Mild abdominal pain may be present for 1-2 days after the procedure.
- c. Abdominal pain following removal of polyp(s) and other symptoms like rapid pulse, fever, per rectum bleeding/bleeding from the bowel may occur within 12 hours-5 days after the procedure. Such symptoms usually settle within 48 hours.
- d. Bowel bleeding following biopsy and polyp removal can occur that may settle spontaneously or may require further treatment.
- e. Perforation of the bowel and other organ injury can occur requiring a hospital admission and surgical repair of the tear or puncture. This is uncommon.

If there is heavy bleeding or severe pain, you may need to have further assessment at your nearest hospital emergency department.

### Specific risk of gastroscopy

- a. Mouth/throat/oesophageal/abdominal pain or discomfort can occur that takes a few days to settle with symptomatic treatment.
- b. Organ injury and perforation through the wall of the oesophagus (food pipe), stomach or duodenum might occur very rarely.

If there is heavy bleeding or severe pain, you may need to have further assessment at your nearest hospital emergency department.

### General risks of gastroscopy and colonoscopy

- a. The procedure may not be finished due to problems inside your body or because of a technical difficulty.
- b. Abnormalities or diseases may be missed or not seen. This is uncommon.
- c. Nausea, vomiting and dizziness may occur. This usually last less than 4 hours.
- d. Bleeding can occur at a biopsy site or where a polyp had been removed. This is usually minor and can be stopped through the scope.
- e. For heavier bleeding or abdominal pains, a hospital transfer may be needed. Admission and interventional endoscopy may occur. Blood transfusion or surgery may be rarely needed to stop bleeding. **Ambulance at your expense may be required to transfer you to hospital.**
- f. Reflux of gastric fluid can occur which can cause coughing and may require suctioning. Mouth/throat abrasion causing soreness, hoarse voice and chest infection may occur. This tends to settle itself. Antibiotics, physiotherapy/other treatments may be needed.
- g. Teeth or dental oral works can be damaged due to instrumentation.
- h. Heart problems like heart attack or abnormal heart rhythms may uncommonly occur and is more common in those with other significant health conditions. Strokes can occur rarely.
- i. Cross infections are rare. Instruments and equipment are either single use or else are thoroughly cleaned and disinfected according to the required standards.
- j. Reactions to sedation drugs including severe allergic reactions can occur.
- k. Deep vein thrombosis can occur and lead to pulmonary embolism – this is rare with endoscopies.
- l. Death is possible due to the procedure or sedation but is extremely rare
- m. As the procedure is done under sedation and not under general anaesthetic, there may be a small risk of awareness during the procedure.

The Glen Endoscopy Centre