Preparation for Colon and rectal Surgery

Name: ______________________________

Surgery: ______________________________
____________________________________
____________________________________
Surgery Date: _________________________

Surgery Time: _________________________

Arrival Time: _________________________

Location:

☐ Rush Tower OR 5th Floor
☐ Professional Building CRS Clinic 810
☐ Professional Building Endoscopy 377
☐ Jelke Building Endoscopy
☐ Rush Atrium Pediatric OR
☐ Rush Oak Park Outpatient OR

Patient information materials developed in the Section of Colon and Rectal Surgery at Rush University Medical Center. The information contained in this brochure is believed to be accurate; however, questions about your individual health should be referred to your physician.

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Rush is a not-for-profit health care, education and research enterprise comprising Rush University Medical Center, Rush University, Rush Oak Park Hospital and Rush Health.
We understand that planning for surgery can be a stressful experience. Our goal is to help decrease your stress by assisting you in preparing for your procedure. Please read all of these instructions carefully. If you have any questions, call us at 312-942-7088.

I. Arrival

You will be called by 3 pm on the day before your surgery and told the exact time to arrive. If your surgery is scheduled on a Monday, you will be called the Friday before. We asked that you arrive two hours before your surgery time so that you may be registered and ready for surgery in a timely manner. Please write your surgery time in the space on Page 1. If you have not received a phone call by 3 pm the day before surgery or if you were not already told when to arrive, please call 312-947-0787.

When you arrive for your surgery, you will need to check in at Registration. There are 2 Registration Areas:

- Main Atrium Hospital located at 1650 W. Harrison on the 4th Floor (which can be entered from the hospital garage).
- New Hospital Tower located at 1620 W. Harrison, on the 1st floor. You may use our convenient valet parking or park in the attached hospital garage.

II. Diet

Unless told otherwise, you will start a clear liquid diet on the day before surgery. You may also need to take a solution to help cleanse your colon (bowel) before surgery. Please read the instructions carefully! Failure to do so will result in cancellation of your surgery!

- Start a clear liquid diet at 6:00 am on the day before surgery.
- NOTHING to eat or drink after 10:00 PM the night before your surgery EXCEPT the medications that you were instructed to take with a sip of water.
- Do not drink any alcoholic beverages for 2 days before your surgery.

Preoperative Clear Liquid Diet

<table>
<thead>
<tr>
<th>Beverages</th>
<th>Soups</th>
<th>Desserts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Water</td>
<td>Chicken, vegetable, or</td>
<td>Hard candies</td>
</tr>
<tr>
<td>Tea/Coffee (no milk or</td>
<td>beef broth/bouillon</td>
<td>Jello (no fruit or toppings)</td>
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<tr>
<td>cream)</td>
<td></td>
<td>Popsicles (no sherberts, ice cream or</td>
</tr>
<tr>
<td>Soft drinks (orange,</td>
<td></td>
<td>fruit bars)</td>
</tr>
<tr>
<td>ginger ale, Sprite, 7 UP,</td>
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<td></td>
</tr>
<tr>
<td>etc)</td>
<td></td>
<td></td>
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<tr>
<td>Gatorade</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kool-AID</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strained fruit juices (no</td>
<td></td>
<td></td>
</tr>
<tr>
<td>pulp)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
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</tr>
</tbody>
</table>

NOTHING COLORED RED OR PURPLE
III. Medications

There are some medications that may cause problems during surgery. Speak with your prescribing doctor about your medications at least 2 weeks before your surgery.

Some of the more common medications to stop/ or continue:

<table>
<thead>
<tr>
<th>STOP 7 Days Before Surgery</th>
<th>STOP 5 Days Before Surgery*</th>
<th>STOP 2 Days Before Surgery*</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Aspirin</td>
<td>Coumadin</td>
<td>Glucophage/ Metformin</td>
</tr>
<tr>
<td>• Ibuprofen (Motrin, Advil)</td>
<td>Plavix (or earlier if your doctor recommends this)</td>
<td>*Please speak with your prescribing doctor before stopping your these medications prior to surgery</td>
</tr>
<tr>
<td>• NSAIDS (Aleve, Relafen)</td>
<td></td>
<td>*Please speak with your diabetes doctor regarding your diabetic medications and insulin prior to surgery</td>
</tr>
<tr>
<td>• Gout Medications (Indomethacin, Colchicine)</td>
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<td></td>
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<tr>
<td>• Glucosamine +/- Chondroitin</td>
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</tr>
<tr>
<td>• Vitamin E, Ginseng, St. John’s Wort, Black Cohosh, garlic, and all herbal supplements</td>
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<td></td>
</tr>
</tbody>
</table>

*DO NOT TAKE ON THE DAY OF SURGERY*  
Water pills/ diuretics - Lasix/ furosemide, Hydrocholrothiazide, Aldactone/ spironolactone, Diovan HCT

*DO TAKE ON THE DAY OF SURGERY*  
Blood pressure medications (antihypertensives) and heart medications with a sip of water

*Insulin doses should be adjusted before surgery while on clear liquid diet and on the morning of surgery. Talk with your diabetes doctor or primary care physician for dosing instructions

IV. Bowel preparation

On the afternoon prior to your procedure, you will need to perform one of the following preparations to clean out the bowel.

- **Miralax Prep**
  
  **Buy**
  
  • 4 Dulcolax laxative tablets
  • 1 Miralax powder container 255 gm
  • 1 bottle of Gatorade 64 ounces, flavor of your choice but no red color

  **2:00 pm** Take 1 Dulcolax tablets by mouth
  **4:00 pm** Mix entire 255 gm bottle of Miralax with the 64 oz bottle of Gatorade.
  Drink all of the solution over the 1.5- 2 hours (about 1 glass every 15 minutes).
  **8:00 pm** Take 2 more Dulcolax tablets with glass of water.
□ **MoviPrep** (take prescription to pharmacy)

You will receive 4 pouches and a container (2 of Pouch A and 2 of Pouch B)

**2:00 pm**
- Empty Pouch A and Pouch B into the 1 liter disposable container. Mix to dissolve.
- Drink full liter. The MoviPrep container has 4 marks. Drink the solution to the next mark every 15 minutes until it is gone.
- Drink 2 additional full glasses (8 oz each) of water or another clear liquid of your choice.

**6:00 pm** Repeat as above with the second set of pouches followed by an additional 2 full glasses (8 oz each) of clear liquids.

□ **Golytely Prep** (take prescription to pharmacy)

You will receive 1 large container with powder inside.

**12:00 pm** Mix the Golytely according to instructions on the container.
   Place in the refrigerator after mixing

**6:00 pm** Start drinking the Golytely mixture (1 glass every 15 minutes) until gone.

   Continue clear liquid diet until 10:00 PM.

□ **Magnesium citrate prep**

Buy
- 2 bottles of magnesium citrate 10 oz
- 4 Dulcolax laxative tablets

**2:00 pm** Drink 1 bottle of magnesium citrate over 30 minutes.

**3:00 pm** Take 2 Dulcolax tablets by mouth.

**5:00 pm** Drink 1 bottle of magnesium citrate over 30 minutes.

**6:00 pm** Take 2 Dulcolax tablets by mouth.

   ***Between 6:00 pm and 10:00 pm drink at least 4 glasses of clear liquids***

□ **Clear Liquids Only Prep**
   (Includes ileostomy patients)
   - Follow the Clear Liquid Diet above.
   - Drink 2-3 quarts of water and clear Gatorade or diet soda during the afternoon.
   - Do not eat or drink anything for 8 hours before surgery.

□ **Antibiotics**
In some cases, antibiotics by mouth should be taken. Neomycin and metronidazole (Flagyl) tablets should be taken at 5:00 PM, 6:00 PM and 10:00 PM. If you are allergic to or intolerant of either of these medications, let us know.
V. The morning of the procedure

For your safety and comfort, you must follow these pre-surgery instructions:

- Do not eat or drink anything after 10:00 PM the night before surgery.
- Do not drink any alcoholic beverages during the 2 days before your surgery.
- Brush your teeth without swallowing toothpaste/water.
- Do not wear contact lenses
- Do not bring valuables or wear jewelry. All jewelry must be removed before going to the operating room. Bring the case in which you place your eyeglasses or contact lenses; using the case will help prevent loss.
- Do not wear makeup and remove all colored nail polish.
- Wear casual, comfortable, loose-fitting clothing.
- You will be asked to remove your dentures before surgery. They will be placed in a denture cup and returned to you after surgery.
- Bring a list of your allergies and a list of all current medications (including doses and frequency) to the hospital.

If you are not completely cleaned out (your stools are not watery and straw-to-clear colored), administer a Fleet Phosphosoda enema 1-2 hours prior to leaving home. Lie on your left side with your left leg straight and your right leg drawn up. After removing the enema from the box, remove the green cap. Insert the lubricated tip of the bottle gently into your anus all the way to the bottom of the slender tip and squeeze out the contents of the bottle. Then, remove the cap from the bottle, refill it with luke warm tap water and administer this in the same way and in addition to the Fleet enema to double the volume of fluid placed. This improves the effectiveness of the enema. Retain the enema fluid for as long as you can up to 5 minutes, then expel it in the toilet.

VI. Questions

If you have any questions or problems, call your doctor. If you experience problems outside of office hours or on weekends call the hospital page operator and ask for the physician on call for Colon and Rectal Surgery. If you cannot wait, come to the Emergency Room.

VII. Cancellations

If for any reason you are unable to keep this appointment, please notify us as soon as possible. For questions or to change your appointment call our office at 312-942-7088.
Pre-Surgical Patient Checklist
Complete checked items.

Today's Date: ______________

☐ LAB TESTS: _________________________________________________________________

Walk-in lab at Rush: POB Suite 104, Elevator 1

Hours: Monday- Friday, 7am-5:30pm

Saturday 8am -1:30 pm

☐ EKG: Walk-in, no appointment needed. Rush, POB Suite 461____________________

☐ CHEST X-RAY: Walk-in, no appointment needed. Rush, POB Suite 461____________

☐ CT SCAN: Call 312-563-3064 to schedule, Rush, POB Suite 461________________

☐ ULTRASOUND: Call to 312-942-5741 to schedule______________________________

☐ COLONOSCOPY: Our office will schedule______________________________________

☐ PET SCAN: Our office will schedule___________________________________________

☐ PRIMARY CARE MEDICAL CLEARANCE________________________________________

☐ CARDIOLOGY APPOINTMENT:________________________________________________

☐ PULMONARY APPOINTMENT:________________________________________________

☐ ANESTHESIA APPOINTMENT: Our office will schedule__________________________

☐ OTHER APPOINTMENTS:_____________________________________________________

☐ BOWEL PREPARATION: Please take prescription to your local pharmacy

If you have any documents to fax, please put

Attention: ___(your specific surgeon)___ and fax to 312-563-2080.