LONDON DIGESTIVE DISEASE INSTITUTE

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PATIENT INSTRUCTIONS

Upper Endoscopy and Colonoscopy

(2-Day PegLyte Preparation)

Patient Name: _____ **Physician:** _____

Appointment Date: _____ **Arrival Time:** _____

LOCATION:

London Digestive Disease Institute
785 Wonderland Road South, Suite 253A (Second Floor)
London, ON N6K 1M6

If you have questions regarding your procedure or cannot attend, please contact the office immediately. Wait lists for this procedure are very long and it is important to give at least one week's notice to cancel or reschedule so that your appointment may be offered to another patient.

ENDOSCOPIC PROCEDURE - IMPORTANT INSTRUCTIONS

- Propofol sedation is used for endoscopic procedures.
  - **You must have an adult (family member or friend) who will stay in the waiting room throughout the procedure and drive you home afterwards. You cannot drive yourself home.**
- If you choose not to receive sedation, you may go home alone, but the procedure may be uncomfortable and/or incomplete.
- Do not drive, operate machinery, or drink alcohol for 12 hours after your procedure.

Please bring the following items to your appointment:

- Your health card
- A current list of all medications you take and allergies
- A copy of your completed LDDI Pre-Endoscopy Anesthesia Patient Questionnaire
- A covered water bottle
- A reusable bag for your belongings

Please avoid wearing jewelry, perfume, or cologne.

MEDICATIONS & MEDICAL CONDITIONS

- Stop iron supplements 7 days before the procedure.
- If you take blood thinners (other than aspirin), contact the office immediately for specific instructions.

- You may be instructed to alter your medication several days prior to your procedure.
    - Examples: Plavix (clopidogrel), Ticlid (ticlopidine), Brilinta (ticagrelor), Coumadin (warfarin), Pradaxa (dabigatran), Eliquis (apixaban), Xarelto (rivaroxaban).
- If you have diabetes and take insulin or other medications, contact the office immediately for specific instructions. You may be instructed to alter your medication several days prior to your procedure. Please ensure you bring your insulin or medication on the day of your procedure.
- Stop GLP-1 medications 14 days before your appointment.
    - Examples: Ozempic (semaglutide), Saxenda (liraglutide)
- Please notify our office if you have kidney disease or congestive heart failure. You may be instructed to use an alternative bowel cleansing solution.
- Continue all other medications as usual, including the day of the procedure.

HOW TO PREPARE

The following medication can be purchased over the counter at your pharmacy:

Two (2) 4-litre bottles of PegLyte.

Tip: PegLyte tastes better chilled — keep it in the fridge.

One Week Prior To Your Procedure:

- Stop eating nuts, seeds (poppy seeds, flax seeds and sesame seeds), corn, popcorn, fruits containing seeds (kiwi, raspberries, strawberries, tomatoes).

Two Days Before Your Procedure:

- Start a clear liquid diet only. NO SOLID FOOD.
    - Examples of clear liquids: water, apple juice, sports drinks, clear broth, popsicles, Jell-O, black coffee or tea (no milk/cream). *Please avoid RED, BLUE, PURPLE coloured drinks*.
- At 6:00PM, mix your first PegLyte bottle with water to the 4L mark.
- Drink 1 glass (240 ml) every 10 minutes, until you finish 2 litres.
    - This will take about 60–90 minutes.
- Refrigerate the remaining 2 litres for the next day.
- Continue drinking clear fluids throughout the evening.

One Day Before Your Procedure

- Continue clear liquids only all day. NO SOLID FOOD.
- At 12:00 PM (noon), drink 2 litres of PegLyte (same method: 1 glass every 10 minutes).
- At 8:00 PM, drink the remaining 2 litres (same method).
- Continue clear liquids through the day and evening.

Procedure Day

- NO SOLID FOOD.
- 4 hours before your procedure, drink the final 2 litres of PegLyte (1 glass every 10 minutes).
    - You may need to wake up early or during the night to complete this step.
- If your appointment is in the afternoon, adjust timing so the last dose finishes 4 hours prior.
- Stop drinking anything 2 hours before your arrival time.
- Do not chew gum or suck on candy.

UNDERSTANDING YOUR PROCEDURES

What is a Colonoscopy and Upper Endoscopy?

These tests use thin, flexible tubes with cameras to examine:

- Your upper digestive tract (via the mouth)
- Your colon (large bowel) and rectum (via the rectum)

They help investigate symptoms such as:

- Heartburn, trouble swallowing, vomiting, bleeding, diarrhea or constipation abdominal pain

During the procedure, the doctor may:

- Take a biopsy (a small tissue sample)
- Remove polyps (abnormal growths that can become cancerous)
    - You will not feel the biopsy or polyp removal.

What to Expect During and After Your Procedure

- You will receive propofol anesthesia for your sedative. This will be administered by an Anesthesiologist.
- A spray may be used to numb your throat.
- You may feel bloating or need to pass gas due to air inflated during the procedure.
- You will stay in the recovery room until the anesthesia wears off.
- Afterward, you can eat and drink as usual unless specified by your physician.
- Avoid alcohol for at least 12 hours.

RISKS AND COMPLICATIONS

These procedures are generally very safe. However, potential complications include:

- Sedation-related issues: low blood pressure, low oxygen, or difficulty waking.
- Bleeding from biopsy or polyp sites — usually minor.
- Perforation (a tear in the digestive tract wall):
    - Occurs in about 1 in 5000 endoscopies and 1 in 1000 colonoscopies.
    - May require hospitalization, IV fluids, blood transfusion, antibiotics, surgery, or an ostomy bag.

Limitations: These tests are not perfect — in rare cases; polyps, lesions or other serious problems in the colon may not be seen and can be missed.

If you experience any problems after your procedure, please contact the office immediately (519) 204-6333.