

## Instructions for Colonoscopy PLENVU®

### Please read all instructions carefully:

#### *Medications:*

- You **MAY** continue to take aspirin and anti-inflammatory medications (including Ibuprofen, Advil, Aleve, Motrin, Voltaren, etc.)
- If you take any prescription blood thinners (i.e., Coumadin, Warfarin, Eliquis, Brilinta, Xarelto, Plavix, Clopidogrel, etc) and you did not already notify our office, please call our office @ 616-452-7099. We must know if you are on a blood thinner as it may affect your procedure.
- Medications prescribed for your heart, breathing, blood pressure, or seizure may be taken the morning of your procedure with a small sip of water. (Must be taken 3 hours prior to procedure)
- GLP1 medications (Trulicity, Mounjaro, Wegovy, Ozempic, etc) must be stopped prior to your procedure. (If taken weekly, must stop 1 week prior. If taken daily, must stop 1 day prior)
- Marijuana use is prohibited the morning of your procedure, as it affects the efficacy of the anesthesia.
- Please contact your prescribing doctor before stopping any medications.

#### *Driving Restrictions:*

- **You must have a driver stay with you for the duration of your procedure.** You will not be permitted to drive yourself home as you will be administered anesthesia. Plan to spend at least 3 hours at the facility. Your procedure will be cancelled if you do not have a driver to stay with you the entire time.
- You may resume driving the morning after your procedure.

#### *Cancellation Policy:*

- The GI doctor, nursing staff, and anesthesia providers have reserved your appointment time just for you. Therefore, you will be charged a cancellation fee of \$150 if you cancel or reschedule your appointment within 3 business days of your scheduled procedure.
- If you do not show up for your procedure, you will be charged a \$150 no-show fee.
- As a courtesy, our office will attempt to reach you one week prior to your procedure to obtain a verbal confirmation. If you do not hear from us, you are still responsible for contacting our office to confirm your procedure. If we do not receive a **verbal confirmation** 72hrs before your procedure, your procedure will be cancelled and there will be a \$150 fee.
- You may also call our office starting 1 week ahead of your procedure to confirm @ 616-452-7099 and press option 1. You may receive additional calls from the facility you are scheduled with. *However, you must speak to someone within our office to be confirmed, cancelled, or rescheduled.*

#### *Insurance coverage:*

- It is your responsibility to call your insurance company to see if authorization is needed and if your procedure is covered.
- Please be aware you may receive a bill from us, the facility, pathology, or anesthesia.

**Please see next page for your PLENVU® prep instructions.  
If you have any additional questions, please call our office at 616-452-7099**

**Items needed for your PLENVU® Colonoscopy prep:**

PLENVU® prep (provided via prescription) – any additional clear liquids.



PLENVU® is a split dose. Dose one is the evening before your colonoscopy, and dose 2 must be taken a minimum of 2 hours after completing dose 1.

Upon waking up in the morning (the day prior to your colonoscopy), you will start a clear liquids diet.

**No solid food.**

<b><u>DOSE 1</u></b>  <b>The day BEFORE Colonoscopy (Around 3PM)</b>	<b>Step 1</b>	<ul style="list-style-type: none"> <li>Use the mixing container to mix the content of Dose 1 with at least 16 ounces of water by shaking or stirring with a spoon (May take 2-3 minutes to dissolve). Finish dose 1 within 30 minutes.</li> </ul>
	<b>Step 2</b>	<ul style="list-style-type: none"> <li>Refill the container with at least 16 ounces of clear liquid and slowly drink over 30 minutes. <i>Continue clear liquids.</i></li> <li>Wait at least <b>2 hours</b> from dose one to start dose 2.</li> </ul>
<b><u>DOSE 2</u></b>  <b>2 hours after dose 1.</b>	<b>Step 1</b>	<ul style="list-style-type: none"> <li>Use the mixing container to mix the contents of Dose 2 (Pouch A and pouch B) with at least 16 ounces of water shaking or stirring with a spoon (May take 2-3 minutes to dissolve). Finish dose 2 within 30 minutes.</li> </ul>
	<b>Step 2</b>	<ul style="list-style-type: none"> <li>Refill the container with at least 16 ounces of clear liquid and slowly drink over 30 minutes. <i>Nothing to eat or drink after midnight.</i></li> </ul>

**Clear liquid diet list:**

- Gatorade, Powerade, Pedialyte, Smart Water
- Broth or Bouillon (no noodles, meat, or vegetables)
- Coffee or Tea (no milk or creamer)
- Carbonated or Non-Carbonated soft drinks
- Kool-Aid or Fruit Flavored Drinks (**no red or purple**)
- Jell-O or popsicles (**no red or purple**)

**\*Please avoid:** Alcohol, dairy products, noodles or vegetables in soup, and liquids you CANNOT see through.