

OGD & Colonoscopy with or without Rubber Band Ligation
Colonoscopy with or without Rubber Band Ligation
Double Balloon Enteroscopy (Balloon Assisted Enteroscopy)
Lower Endoscopic Ultrasound (EUS) with or without Fine Needle Aspiration (FNA)
Procedure Date:
Reporting Time: AM / PM

An SMS will be sent to you 1 working day (between 1.00PM to 3.00PM) before the day of procedure to inform on the reporting time. If you have not received the SMS by 3.00PM, you may reach us at 6930 6001 (Admissions Enquiries).

What is Endoscopy?

It is a special technique for looking inside a part of an organ. The endoscope is a thin, long and flexible tube with a tiny video camera and light on one end. The image captured from the video camera is then shown on a TV monitor for a detailed view.

Endoscopy is a safe and effective way to examine the lining of organs such as the stomach, small intestine, and colon. Your doctor can pass tiny surgical tools through the scope to remove polyps or to take a sample of tissue.

Preparing for Endoscopy

1. GENERAL ADVICE

- Do not wear any jewellery or bring any valuables.
- Remove all nail polish. Do not wear high-heeled shoes.
- Procedure start time may vary, depending on how complex the previous procedures are before yours. Sometimes, the procedure may be delayed or moved to a later time.
- Hospitalization Leave will be issued to you for the day of your procedure.

2. SEDATION ADVICE

- If you require sedation, the medication will be given to you through intravenous injection.
- A responsible adult is required to accompany you home as you may feel drowsy after the procedure, due to the effects of sedation.
- Do not drive a car or any other vehicle, or ride a bicycle or personal mobility device.
- Avoid signing legal documents, operating machinery, exercising or consuming alcohol for 24 hours after the procedure.

3. DIET ADVICE

To allow the endoscopist to look at the bowel lining clearly, you will need to follow a low residue diet for **3 days** before the procedure. You may continue to have regular portions at your meal times.

Date of procedure:	/					
Low residue diet from:	/	/	till	/	/	

Rice and Alternatives



Allowed: White rice / porridge, white bread, plain biscuits, egg noodles, idli, iddiyappam (putu mayam), rice cereal













Avoid: Brown rice/ porridge, wholemeal/wholegrain bread & biscuits, chapatti, oats

Meat and Alternatives



Allowed: Fish, chicken, pork, eggs, shellfish e.g. prawns, tofu, taukwa, vegetarian mock meat













Avoid: Red meat e.g. beef & mutton, tempeh, beans, lentils, nuts & seeds, yoghurt, cheese

Fruits and Vegetables



Avoid: ALL fruits and vegetables

Fluids



Allowed: Water, clear soup, light coloured juice e.g. apple/pear juice, colourless soft drinks e.g. Sprite/7-Up/cream soda









Avoid: Milk, soy milk, yoghurt drinks, cream soup, malted drinks e.g. milo/horlicks, dark coloured liquids e.g. coffee/tea, grape juice, prune juice etc., red coloured liquids e.g. tomato juice

4. MEDICATION ADVICE

• Inform your doctor of all the medications you are taking.

Medications to Continue taking, even on the day of procedure with small amount of plain water

Anti-hypertensive medication

Thyroid medication

Medications to <u>STOP</u>					
Category of Medication	Example of medications	Date to stop	Comments		
Blood-thinning medication*	Aspirin (Cardiprin), Warfarin (Marevan), Clopidogrel (Placta), Ticlopidine (Ticlid), Dipyridamole (Perazodin), Rivaroxaban (Xarelto), Apixaban (Eliquis)		To follow doctor's instructions		
Possibly blood-thinning supplements*	Echinacea, Ephedra, Garlic, Gingko (Tanakan), Ginseng, Valerian, Hypericum (St. John's Wort), Kava (Kavain), Traditional Chinese Medicine (TCM), Ayurvedic, Jamu	Stop <u>1 week</u> before procedure unless otherwise advised			
Iron supplements	Ferrous Gluconate (Sangobion), Ironhy- droxide polymaltose complex tablet and drops (Maltofer)	Stop <u>1 week</u> b procedure unle advised			
Diabetes Medication	Refer to Appendix 1A/B (see Pages 16-18)		18)		

Note: If you are unsure of which medication to take/stop, please bring along your medication.

^{*} This list is not exhaustive. If you are unsure, please approach our staff for help.

5. BOWEL PREPARATION

If you are prescribed with Picoprep: AM procedure (Reporting time before 12PM) No more food after 6PM. (1 day before Dissolve 1st packet of Picoprep procedure) in 150ml of water. Date: / • Followed by 5 large cups (250ml Time: 6PM each) of clear liquid spread over 1 hour 30 minutes. Dissolve 2nd packet of Picoprep (1 day before in 150ml of water. procedure) • Followed by 3 large cups (250ml Date: / each) of clear liquid spread over Time: 10.30PM 1 hour. No more water/fluids 4 hours before your reporting time. PM procedure (Reporting time on or after 12PM) Dissolve 1st packet of Picoprep (1 day before in 150ml of water. procedure) • Followed by 5 large cups (250ml Date: / each) of clear liquid spread over Time: 9PM 1 hour 30 minutes. You may have a small meal (Procedure day) (1 slice of bread OR 2 biscuits with 1 cup of Date: / / plain water). Time: 5AM - 6AM • No more food after 6AM. Dissolve 2nd packet of Picoprep (Procedure day) in 150ml of water. Date: / / • Followed by 3 large cups (250ml Time: 6AM each) of clear liquid spread over

1 hour.

 No more water/fluids 4 hours before your reporting time.

☐ If you are prescribed with Fortrans:



Course 1: (2 packets of	Fortrans)
☐ AM procedure (Rep	orting time before 12PM)
(1 day before	No more food after 6PM.
procedure) Date:// Time: 6PM	 Mix 2 packets of Fortrans to 2L of plain water.
Time. OF W	• Drink 2L of solution spread over 2 hours.
	 Drink 2ml (or otherwise advised) of simethicone if prescribed.
	 No more water/fluids 4 hours before your reporting time.
PM procedure (Rep	orting time on or after 12PM)
(1 day before procedure) Date://	Mix 1st packet of Fortrans to 1L of plain water. Prink 1L of solution spread ever 1 hour.

Time: 6PM • You may have a small meal (Procedure Day) (1 slice of bread OR 2 biscuits with 1 cup of Date: / / plain water). Time: 5AM - 6AM • No more food after 6AM. • Mix 2nd packet of Fortrans to 1L of plain water. (Procedure Day) Date: ___/__/_ • Drink 1L of solution spread over 1 hour. Time: 6AM • Drink 2ml (or otherwise advised) of simethicone if prescribed. • No more water/fluids 4 hours before your reporting time.

☐ If you are prescribed with Fortrans:



Course 2: (4 packets of Fortrans)

AM procedure (Reporting time before 12PM)						
(1 day before procedure) Date:/ Time: 6PM	 No more food after 6PM. Mix <u>2</u> packets of Fortrans to 2L of plain water. Drink 2L of solution spread over 2 hours. 					
(Procedure Day) Date:// Time: 4AM	 Mix <u>2</u> packets of Fortrans to 2L of plain water. Drink 2L of solution spread over 2 hours. Drink 2ml (or otherwise advised) of simethicone if prescribed. Finish all by 6AM. No more water/fluids after 6am on day of scope, until after scope. 					

☐ **PM** procedure (Reporting time on or after 12PM)

(1 day before procedure) Date:// Time: 6PM	 Mix <u>2</u> packets of Fortrans to 2L of plain water. Drink 2L of solution spread over 2 hours.
(Procedure Day) Date:// Time: 5AM - 6AM	 You may have a small meal (1 slice of bread OR 2 biscuits with 1 cup of plain water). No more food after 6AM.
(Procedure Day) Date:// Time: 6AM	 Mix <u>2</u> packets of Fortrans to 2L of plain water. Drink 2L of solution spread over 2 hours. Drink 2ml (or otherwise advised) of simethicone if prescribed. No more water/fluids 4 hours before your reporting time.

After taking Picoprep or Fortrans:

- It will make you pass motion often
- Drink plenty of clear liquids to prevent dehydration and to help clean out your colon completely
- If vomiting, cramping and/or pain occur, stop the medication.
 Consult your family doctor, polyclinic doctor or primary physician. Go to the Emergency department if you are unable to locate any doctor
- You know your colon is cleansed when the stool coming out is yellow, watery and clear like urine

Improper preparation may result in you having to repeat the Endoscopy procedure

Stool Colour



Disclaimer

Bowel preparation course may be adjusted in view of clinical condition or endoscopist preference.

☐ If you are prescribed with Fleet Enema:

Please follow the instructions below.

- 1. Wash your hands before and after using this product.
- 2. Remove the protective cap from the applicator tip.

Position for using an enema:



■ Left-side position: Lie on left side knee bent, and arms resting comfortably.



- Knee-chest position: Kneel, then lower head and chest forward until left side of face is resting on surface with left arm folded comfortably.
- 3. Separate buttocks with the non-dominant hand and locate anus.
- 4. Take deep breaths and slowly exhale during insertion.
- 5. Gently insert the tip into the anus about 5 cm to 7.5 cm into the rectum as far as the nozzle can go.
- 6. Squeeze the bottle slowly until all the solution is expelled and hold the tip in situ for 1 minute. If resistance is encountered on inserting the applicator tip or administering the solution, discontinue the procedure and inform your doctor.
- 7. Do not forcefully administer the enema into the rectum as this can cause injury.
- 8. Withdraw the nozzle slowly while keeping bottle compressed.
- 9. Retain the solution as long as possible or until the urge to pass motion is strong.
- 10. This product generally produces bowel movement in 2-5 minutes.
- 11. Fleet Enema is to be given 1 to 2 hours before you leave your house as you need some time for bowel movement.

On the Day of Procedure

- Please register at the Endoscopy Centre (refer to the map on pages 13-14).
- Your written consent will be obtained before the procedure. If it is not obtained and you are below 21 years old, a parent / legal guardian must be present to give consent.
- The whole procedure takes between 2 to 4 hours. This includes registration, preparation, procedure, recovery and discharge.
- Local anaesthesia (spray, gel) with or without intravenous sedation would be given. If sedation is given, your pulse rate and oxygen level would be monitored with a finger probe throughout. The doctor performing your procedure may or may not be the same doctor whom you met during consultation in the clinic.
- During the procedure, depending on individual patient and their sensitivity to pain, you may experience discomfort, varying in intensity.
- For your safety, movement during procedure is discouraged unless advised by the doctor. Nurses may assist to hold you to maintain your position for the scope procedure.

After the Procedure

- After the procedure, you will be transferred to the Recovery Area to rest and recover from sedation.
- Light refreshments will be provided.
- You may experience mild discomfort such as bloating and throat soreness which should ease within 1 2 days.
- Our nurse will contact your next of kin or accompanying adult once you are assessed ready for discharge.
- Before you leave, our nurse will give you a follow-up appointment and discharge instructions.
- Should you experience severe pain, vomiting or excessive bleeding, consult your family doctor, polyclinic doctor or primary physician. Go to the nearest Emergency department if you are unable to contact any doctor.

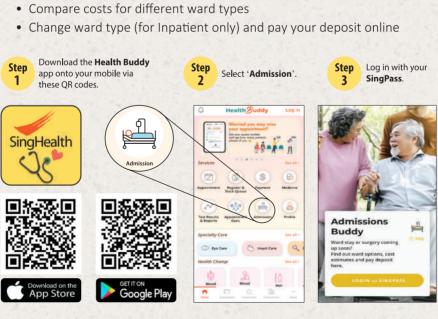
What To Bring For Admission

NRIC / Birth Certificate (if you are under 15 years old) / Work Permit / Passport (if you are a foreigner);				
Completed Medical Claims Authorisation Form of the MediSave Account Holder;				
NRIC / Birth Certificate of the MediSave Account Holder, if you are not the MediSave Account Holder;				
Medical Benefits Identification Documents such as Civil Service Card, Medical Benefit Identification Identity Memo, Blood Donor Card;				
Letter of Guarantee				
Deposit: \$				
Others:				

Download and Access via Health Buddy

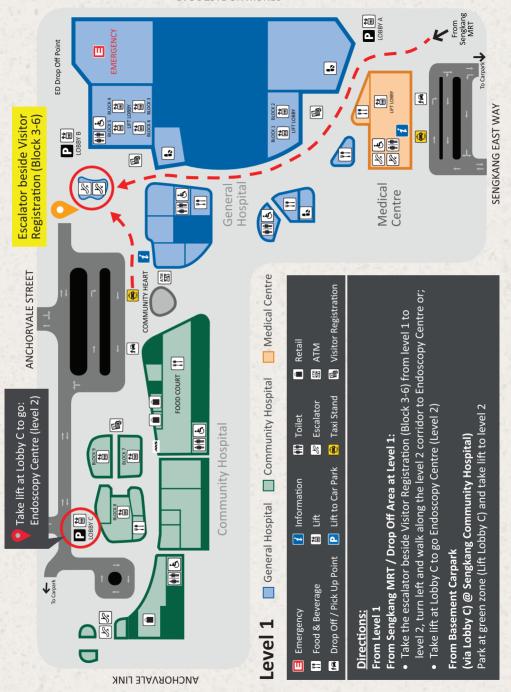
You can now access the Health Buddy App to:

- View your estimated bill size and key information about your admission





SENGKANG EAST ROAD



Important Numbers

For enquiries, please contact:

Admissions Office (For change of procedure date and enquiry on diet preparation)	6930 6001
Outpatient Pharmacy (For enquiry on medication preparation)	6930 2262
Medical Records Office (For request of medical reports) Email: medicalreports@skh.com.sg	6930 6003
General Enquiries Hotline (To check visiting hours and other general enquiries) Operates 24h	6930 5000
Outpatient Appointments Hotline (To check, make or cancel outpatient clinic appointments)	6930 6000
Payment Enquiries (For payment and billing enquiries)	6407 8108

Please ask questions when in doubt. The instructions in this leaflet are not intended to be exhaustive. You may receive different or additional instructions from your doctor. Please follow any specific written or oral instructions given to you by your healthcare provider.

Morning Procedure (No breakfast on day of procedure)

You should take your diabetes medications and insulin as usual the day before the procedure. You may adjust your diabetes medications as follows. If you are unsure of how to adjust your medications, please check with your usual diabetes doctor.

Type of Medication	Medication Instructions Before Procedure	Medication Instructions After Procedure	Notes
Dapagliflozin, Empagliflozin, Combination drugs containing dapagliflozin/ empagliflozin	Do not take 2 days before and on the day of procedure if going for colonoscopy.	Resume the medication when eating well.	
Other Oral diabetes medications Victoza/ Byetta/ Saxenda	Omit your morning diabetes medications.	Once a day medication can be taken after the procedure, at lunchtime. Take any lunch/evening medications as usual - do not take any extra dose to replace any missed morning dose.	
Basal insulin Insulatard, Lantus, Toujeo, Levemir, Soliqua	Take 70% of your usual morning dose. Or Take units.	Take any dose due at lunch/ dinner/ bedtime as usual.	
Short or rapid acting insulins Actrapid, Novorapid, Apidra, Humalog	Do not take breakfast dose*.	Take lunch insulin as usual.	
Pre-mixed insulins <i>Mixtard, Novomix, Humalog Mix, Ryzodeg</i>	Do not take morning dose.	Take ½ your morning dose before lunch and your usual dinner dose. If you usually take insulin at lunchtime, take your usual lunch dosedo not take extra to replace any missed morning dose.	

Insulin Pump Stay on usual basal. Omit breakfast bolus*	Take lunch bolus as usual.	
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^{*}If you have high blood glucose and have a correction factor/scale to follow from your diabetes doctor, take your usual correction dose.

Treat low blood glucose (< 4 mmol/L) with 15g rapid-acting carbohydrates, such as 3 - 4 glucose tablets, 3 - 4 chewable sweets, even during the time when you are not supposed to take any food.
 Re-check your blood glucose 15 minutes after treating and repeat treatment until your blood glucose is above 4 mmol/L.

APPENDIX 1B

Afternoon Procedure (Light breakfast on day of procedure)

You should take your diabetes medications and insulin as usual the day before the procedure. You may adjust your diabetes medications as follows. If you are unsure of how to adjust your medications, please check with your usual diabetes doctor.

Type of Medication	Medication Instructions Before Procedure	Medication Instructions After Procedure	Notes
Dapagliflozin, Empagliflozin, Combination drugs containing dapagliflozin/ empagliflozin	Do not take 2 days before and on the day of procedure if going for colonoscopy.	Resume the medication when eating well.	
Other Oral diabetes medications Victoza/Byetta/ Saxenda	Omit your morning and lunch diabetes medications.	Take any evening medications as usual. Do not take an extra dose to replace any missed morning/lunch dose.	
Basal insulin Insulatard, Lantus, Toujeo, Levemir, Soliqua	Take 70% of your usual morning dose. Or Takeunits.	Take any dose due at dinner/bedtime as usual.	

Short or rapid acting insulins Actrapid, Novorapid, Apidra, Humalog	Do not take breakfast and lunch dose*.	Take dinner insulin as usual.	
Pre-mixed insulins Mixtard, Novomix, Humalog Mix, Ryzodeg	Take ½ your morning dose. Or Takeunits.	Take your usual dinner dose.	
Insulin Pump	Stay on usual basal. Take breakfast bolus according to the amount of carbohydrates you eat. Skip lunch bolus*.	Take your usual dinner bolus.	

^{*}If you have high blood glucose and have a correction factor/scale to follow from your diabetes doctor, take your usual correction dose.

Treat low blood glucose (< 4 mmol/L) with 15g rapid-acting carbohydrates, such as 3 - 4 glucose tablets, 3 - 4 chewable sweets, even during the time when you are not supposed to take any food. Re-check your blood glucose 15 minutes after treating and repeat treatment until your blood glucose is above 4 mmol/L.



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Sengkang General Hospital







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