

Today's Date: _____

Dear Patient,

You have been scheduled for a procedure at Centrastate Medical Center, 901 West Main Street, Freehold, NJ 07728, on _____ with Dr. _____.

Attached you will find:

Procedure preparation instructions.

A prescription for your preparation (if you are having a colonoscopy); this can be obtained at your local pharmacy.

An order sheet for pre-admission testing (if required). If you have been advised pre-admission testing is necessary, please call **732-294-2778** to schedule your *pre-admission testing* as well as to *pre-register* for your procedure.

If you do not need to schedule any pre-admission testing, **pre-registration** will still be required. Please call Centrastate Medical Center's Admitting office at **732-294-2654** to *pre-register* for your procedure.

The evening before your procedure, a hospital representative will call you to advise you of your procedure time and when you should arrive at the hospital. When arriving at the hospital, please go through the main entrance and follow signs to "Admitting".

****If you find it necessary to cancel your appointment, please kindly give us 72 hours notice; this will allow us to use this appointment for other patients as well as help you avoid a \$100.00 cancellation fee.****

If you have any questions, please feel to call the office at 732-370-2220.

Thank you,

Advanced Gastroenterology Associates

MIRALAX COLONOSCOPY PREP

WHAT YOU NEED TO BUY:

- Miralax - 238 gram bottle (available over-the-counter at any pharmacy).
- If not diabetic: Gatorade 64 ounces (any color but red/purple).
Alternatives: Any clear drink, such as water, Crystal Light, etc.
- If diabetic: Crystal Light (to be mixed with 64 ounces of water).
Alternative: water (64 ounces) or any other sugar free drink.
- Dulcolax Tablets (not suppositories), 4 tablets (5mg each), purchase over-the-counter.
- You may want to purchase a supply of "clear liquids" for your preparation.

INSTRUCTIONS:

5-7 Days Prior to Procedure:

- Stop using Aspirin, Plavix or Coumadin (discuss with prescribing physician).
- No Advil, Aleve, Ibuprofen, Motrin, etc. (Tylenol is okay for pain).
- Stop iron and fiber supplements.
- Continue taking all other approved medications.

1 Day Before Your Procedure:

- Okay to take approved daily medications.
- Clear liquid diet all day long. For example, water, juice with no pulp (apple, etc.), popsicles, soda, jello, (any color but red or purple) clear broth, black coffee (no milk), ice, etc.
- NO food or dairy products all day long.

At approximately 12 noon:

- Take 4 tablets of Dulcolax.
- Mix 238 grams of Miralax with Gatorade or substitute and refrigerate.

At 5PM:

- Start drinking the Miralax and Gatorade or Miralax and substitute mix.
- Try to drink one 8-ounce cup every 15-20 minutes. If nauseated, slow down.
- Aim to finish up by 10PM at the latest.

10PM-Midnight:

- Continue drinking only clear liquids.
- Stay close to the bathroom!!

Day of the Procedure:

- Nothing to eat or drink prior to the procedure (no water, coffee, candy, gum). No breakfast.
- Take only your approved daily medications with a few sips of water.
- Arrive at procedure site as instructed. Expect some down time prior to your procedure.
- Make sure to have someone drive you home from the procedure.
- Colonoscopy typically takes about 30 minutes. Expect to leave 30 minutes after procedure is completed.
- Enjoy your post-procedure meal!

KNOW YOUR BENEFITS!!!

You must call your insurance company prior to your procedure to KNOW YOUR BENEFITS.

You will be responsible for any **DEDUCTIBLES** and **CO-INSURANCE** associated with your particular insurance plan. DO NOT assume “in-network” means you will be 100% covered.

COLONOSCOPY: SCREENING, SURVEILLANCE OR DIAGNOSTIC?

Your insurance policy may be written with different levels of benefits for preventative versus diagnostic or therapeutic colonoscopy services. This means there are instances in which you may think your colonoscopy will be billed as a "screening" when it actually has to be billed as therapeutic. How can you determine what category your colonoscopy falls into?

COLONOSCOPY CATEGORIES:

Diagnostic/Therapeutic Colonoscopy: Patient has past and/or present gastrointestinal symptoms, polyps, GI disease, iron deficiency anemia and/or any other abnormal tests.

Surveillance/High Risk Screening Colonoscopy: Patient is asymptomatic (no gastrointestinal symptoms either past or present), has a personal history of GI disease, colon polyps, and/or cancer. Patients in this category are required to undergo colonoscopy surveillance at shortened intervals (every 2-5 years, for instance).

Preventative Colonoscopy with Screening Diagnosis: Patient is asymptomatic (no gastrointestinal symptoms either past or present), over the age of 50, has no personal or family history of GI disease, colon polyps, and/or cancer. The patient has not undergone a colonoscopy within the last 10 years.

Your primary care physician may refer you for a "screening" colonoscopy, but there may be a misunderstanding of the word screening. You must have no symptoms at all for your colonoscopy to be billed as a screening service.

Before your procedure, you should know your colonoscopy category. After establishing which one applies to you, please call your insurance company to find out your coverage for this service as well as and what your out-of-pocket responsibility, if any, will be.

Can the physician change, add, or delete my diagnosis so that it can be considered eligible for a screening colonoscopy? No. The patient encounter is documented in your medical record from information you have provided as well as what is obtained during your procedure history and assessment. It is a binding legal document that cannot be changed to facilitate better insurance coverage. Patients need to understand strict government and insurance company documentation and coding guidelines prevent a physician from altering a chart or to bill for the sole purpose of coverage determination. This is considered insurance fraud and punishable by law with fines and/or jail time.

What if my insurance company tells me the doctor can change, add, or delete a diagnosis or procedure code? Sadly, this happens a lot. Often, the representative will tell the patient "if the doctor had coded this as a screening, it would have been covered differently". However, further questioning of the representative will reveal the "screening" diagnosis can only be amended if it truly applies to the patient. Remember, many insurance carriers only consider a patient over 50 with no personal or family history, as well as no past or present gastrointestinal symptoms as a "screening." If you are given this information, please document the date of the call as well as the name and phone number of the insurance representative you spoke with. Next, contact our billing department. We will investigate the information given.

**YOU MUST TAKE YOUR
MORNING PREP!**

**IF YOU SKIP THIS STEP,
YOUR COLON WILL NOT BE
CLEAN AND IT WILL
COMPROMISE THE
ACCURACY OF YOUR
PROCEDURE.**

**PLEASE, DO NOT
FOLLOW DIRECTIONS
ON PACKAGING OF
PREP!**

**FOLLOW ONLY THE
DIRECTIONS SUPPLIED
BY ADVANCED
GASTROENTEROLOGY**