



Getting Ready for Your Colonoscopy

Clenpiq Prep

Physician's Name: _____

Procedure Date: _____

The time of your colonoscopy will be given to you three days before your appointment.

David H. Koch Center

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170 William Street, 2nd Floor
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Why a Clean Colon Matters

Food and liquid can stay in your body for many hours. If your colon is not completely empty during your colonoscopy, your doctor may not be able to see **polyps or other findings**, and the exam may need to be rescheduled. Following these instructions carefully helps make sure your colon is empty when you arrive.

How to Contact Us

- **Questions about your colonoscopy or preparation:** Call **646-962-4000**, Monday–Friday (excluding holidays), 9:00 AM – 5:00 PM.
- **After 5:00 PM, weekends, or holidays:** An on-call physician will return your call. Non-urgent calls are returned the next business day.
- **To reschedule:** Call **646-962-4000**.
- **Medical emergency:** Call **911** or go to the nearest Emergency Room.

Cancellation Policy

Scheduling your colonoscopy requires careful planning between staff, doctors, and the hospital. To help avoid delays, please follow this guide and the schedule.

If you must reschedule or cancel:

Contact us **at least 3 days before** your colonoscopy.

Phone: 646-962-4000 **Email:** endoscopyquestions@med.cornell.edu

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Getting Ready for Your Colonoscopy

As soon as your colonoscopy is scheduled:

- Obtain cardiac clearance, if applicable (see page 6).
- Review medication information for medicines you may need to stop (see pages 6 and 7).
- Buy the products you need to clean your colon (see page 8).

7 days before your colonoscopy (see page 7):

- Stop iron supplements.
- Stop weekly GLP-1 receptor agonists.
- If you take a GLP-1 medication, have had a previous incomplete prep, or have constipation: take MiraLAX every day starting today.

3 days before your colonoscopy (see pages 7 and 9):

- Stop SGLT2 inhibitors.
- If you take a GLP-1 medication, have had a previous incomplete prep, or have constipation: begin a low-fiber diet.

1 day before your colonoscopy (see pages 9 and 12):

- Low-fiber breakfast and lunch before 2:00 PM, then clear liquids only — OR clear liquids all day if you take a GLP-1 medication, have had a previous incomplete prep, or have constipation.
- 12:00 PM — Take 2 Dulcolax tablets if recommended by your doctor.
- 5:00 PM — Drink 1 bottle of Clenpiq, then drink at least 5 cups (8 oz each) of clear liquids over the next 4 hours.

Day of your colonoscopy (see page 13):

5 hours before your arrival:

- Take one 250 mg or two 125 mg Gas-X tablet(s).
- Drink the second bottle of Clenpiq, then drink at least 4 cups (8 oz each) of clear liquids. Finish within 2 hours.
- Finishing the prep 5 hours before your exam helps your doctor see polyps.

3 hours before your arrival:

- Do not drink or eat anything — including water, any remaining preparation, mints, candies, or gum.

Arrival Time Reference

Use the row that matches your scheduled arrival time. Your final procedure time will be confirmed three days in advance.

Arrival Time	Start drinking your remaining prep	Finish drinking the entire prep by
6 AM	1 AM	3 AM
7 AM	2 AM	4 AM
8 AM	3 AM	5 AM
9 AM	4 AM	6 AM
10 AM	5 AM	7 AM
11 AM	6 AM	8 AM
12 PM	7 AM	9 AM
1 PM	8 AM	10 AM
2 PM	9 AM	11 AM

Cardiac Clearance

If you have a cardiac defibrillator (AICD), permanent pacemaker (PPM), or any current cardiac problems, we need a letter from your cardiologist **at least 1 week before your colonoscopy**.

Cardiac problems include any history of heart attack, chest pain, difficulty breathing, or fainting episodes.

If you have...	We need...
Permanent Pacemaker (PPM)	An interrogation report within 12 months
Cardiac Defibrillator (AICD)	An interrogation report within 6 months

Medication Information

Anticoagulants (Blood Thinners)

If you take a blood thinner, **ask the doctor who prescribed it** whether you should stop it before your colonoscopy. If your prescribing doctor does not want you to stop the medication, please call our office.

Commonly prescribed medications:

Apixaban (Eliquis®)	Edoxaban (Savaysa®)	Ticagrelor (Brilinta®)
Cilostazol (Pletal®)	Enoxaparin (Lovenox®)	Tinzaparin (Innohep®)
Clopidogrel (Plavix®)	Heparin	Warfarin (Coumadin®)
Dabigatran (Pradaxa®)	Prasugrel (Effient®)	Fondaparinux (Arixtra®)
Dalteparin (Fragmin®)	Rivaroxaban (Xarelto®)	Ticlopidine (Ticlid®)

DO NOT STOP YOUR ASPIRIN unless your doctor specifically tells you to do so.

Diabetes & Weight-Loss Medications

If you take...	Do this
Insulin or oral hypoglycemic pills	Check with the doctor who prescribed these for you, as soon as possible, for instructions on how to manage them around your colonoscopy.
SGLT2 inhibitors Canagliflozin (Invokana, Invokamet); Dapagliflozin (Farxiga, Xigduo XR, Qtern); Empagliflozin (Jardiance, Synjardy, Glyxambi, Trijardy XR); Ertugliflozin (Steglatro, Segluromet, Steglujan); Sotagliflozin (Inpefa); Bexagliflozin (Brenzavvy)	Stop 3 days before your colonoscopy.
Daily GLP-1 receptor agonists Liraglutide (Victoza, Saxenda); Exenatide (Byetta); Semaglutide oral tablet (Rybelsus)	Do not take your dose on the day of your colonoscopy. You will also need to take MiraLAX every day for 1 week before your colonoscopy (see page 12).
Weekly GLP-1 receptor agonists Dulaglutide (Trulicity); Exenatide ER (Bydureon BCise); Semaglutide injection (Ozempic, Wegovy); Tirzepatide (Mounjaro, Zepbound)	Stop 1 week before your colonoscopy. You will also need to take MiraLAX every day for 1 week before your colonoscopy (see page 12).

Blood Pressure Medications

Take your blood pressure medications as usual on the day of your colonoscopy with a small sip of water — **except diuretics** (water pills). **Do not take diuretics** on the morning of your colonoscopy.

Iron Supplements

Stop oral iron supplements **7 days before your exam**. You may resume them after your colonoscopy.

What to Buy to Clean Your Colon

All items below are available over the counter — no prescription needed.

Product	Quantity	Where to Buy	What it looks like
Clenpiq	1 box (2 bottles)	Pharmacy	
Dulcolax (bisacodyl) <i>or generic bisacodyl — NOT the stool softener</i>	2 tablets	Pharmacy	
Gas-X (simethicone) <i>or generic simethicone</i>	Two 125 mg or one 250 mg tablet	Pharmacy	
MiraLAX <i>or generic polyethylene glycol 3350 — only if instructed by your physician</i>	1 bottle (238 g)	Pharmacy	

Eating Before Your Colonoscopy

Three Days Before Your Exam

Begin a low-fiber diet only if your physician has instructed you to (for example, if you take a GLP-1 medication, have constipation, or have had a previous incomplete prep). Otherwise, eat normally.

The Day Before Your Exam

Before 2:00 PM — choose ONE:

Low-fiber breakfast and lunch — foods such as eggs, white bread, plain bagel with cream cheese or butter, ham, turkey, chicken, white pasta.

OR

Clear liquids all day — if you take a GLP-1 medication, have had a previous incomplete prep, or have constipation. No solid food.

After 2:00 PM: clear liquids only. No solid food until after your colonoscopy.

What is a Low-Fiber Diet?



Acceptable foods:

Chicken, fish, beef, pork, tofu, eggs; white rice, white bread, plain bagel, white pasta or noodles; cooked potatoes (no skin); bananas, avocado.

Foods to avoid:

Nuts, seeds, corn, beans, quinoa, raw fruits and vegetables, whole-grain or whole-wheat products. These foods are hard to digest, do not easily clear the colon, and make it difficult for your doctor to see your colon clearly during the procedure. Dairy products, including ice cream, yogurt, milk, and cheese, are generally limited.

What is a Clear-Liquid Diet?

Chicken Broth or Bouillon



Jell-O or Popsicles



Ginger Ale or Clear Juice



Acceptable clear liquids:

Water; black coffee or tea (no milk or creamer); ginger ale or other clear sodas; sports drinks; clear broth or bouillon (no noodles or solids); clear juices (apple, white grape); plain Jell-O; frozen juice popsicles.

Avoid:

Any red or purple liquids; alcohol; juice with pulp; milk, cream, or non-dairy/soy creamer; soup with solids; smoothies; or any liquid you cannot see through.

Clenpiq Prep Instructions

One Week Before Your Exam

If you take a GLP-1 medication, have had a previous incomplete prep, or have constipation:

- Mix 1 capful (17 g) of MiraLAX in an 8-oz beverage and drink once daily, every day, for the week before your colonoscopy.

One Day Before Your Exam, 12:00 PM

- Take 2 Dulcolax tablets with an 8-oz glass of water or other clear liquid (if recommended by your doctor).

One Day Before Your Exam, 5:00 PM

- Drink 1 bottle of Clenpiq.
- Over the next 4 hours, drink at least 5 cups (8 oz each) of clear liquids at your own pace.
- You may continue to drink clear liquids after that.

What to expect:

You will have loose, frequent stools — they may not start until after the next step. Use soft toilet paper, and apply petroleum jelly to the perianal area at the start of the diarrhea to reduce irritation.

Continue drinking even if you have diarrhea. If you feel nauseated, take a 60-minute break, then resume.

5 Hours Before Your Exam

- Take one 250 mg or two 125 mg Gas-X tablet(s).
- Drink the second bottle of Clenpiq.
- Then drink at least 4 cups (8 oz each) of clear liquids. Finish within 2 hours.

It is important to finish the entire prep so the colon is fully cleansed. If you feel nauseated, pause until it resolves and then continue.

3 Hours Before Your Exam

- **STOP** any remaining preparation.
- Do not drink or eat anything — including water, mints, candies, or gum.
- **If you eat or drink anything during this window, your colonoscopy must be cancelled.**

You may take your usual medications — unless instructed otherwise — with a small sip of water.

What to Expect

Day of Your Colonoscopy

A colonoscopy is a medical procedure in which your doctor examines the colon and parts of the small intestine using a flexible scope with a camera. During the procedure, your doctor will look at the colon walls to check for any findings that may need treatment, including polyps.

IMPORTANT — Escort Required

Per hospital policy, an adult age 18 or older must pick you up and escort you home after your procedure.

- The procedure cannot begin until this plan is confirmed. If unconfirmed, your appointment will be cancelled.
- Plan for pickup approximately 1.5 to 2 hours after your scheduled procedure time.
- If you don't have an escort, please let us know — we can provide information on service agencies that will accompany you (at cost).

Before Your Colonoscopy

When you arrive, you will register and sign forms. You may also check in online through Connect, the patient portal for NewYork-Presbyterian, Columbia, and Weill Cornell Medicine. You will be asked to state and spell your name and date of birth to verify your identification.

After changing into a gown, a nurse will place an intravenous (IV) catheter in your arm. An anesthesiologist will review your medical history. Your doctor will give you more information about the procedure, including any risks, and answer your questions.

In the procedure room, you will be connected to monitors for your heart, breathing, and blood pressure, and given oxygen through your nose. Anesthesia is administered through your IV. Your doctor will use an endoscope to examine your colon. If polyps are found, the doctor will remove them and send them to the laboratory. A colonoscopy is generally not painful.

In the Recovery Room

You will wake up in the recovery room. Some bloating or stomach cramping is normal and resolves with passing gas.

Once you are fully awake, your nurse will remove the IV. Your doctor will then review your colonoscopy results with you. Your nurse will go over discharge instructions before you leave. Your escort will take you home.

At Home, After Your Colonoscopy

If you had a biopsy, you may notice a few drops of blood from the rectum. This is normal after a biopsy. Avoid alcohol for 24 hours. Avoid carbonated drinks, raw fruit, and salads at your first meal. You may resume your normal diet and activities the next day.

Call your doctor's office if you have:

- A temperature of 101°F (38.3°C) or higher
- Severe abdominal pain, or increasing abdominal size or firmness
- Heavy bleeding from the rectum lasting more than 24 hours
- Weakness, faintness, or persistent nausea or vomiting