FLEXIBLE SIGMOIDOSCOPY WITH ARGON PLASMA COAGULATION (APC)

A sigmoidoscopy (flex sig) is a procedure that enables your physician to examine the lining of the lower part of the colon (large bowel) for abnormalities by inserting a flexible tube (scope) into the anus and advancing it slowly through the rectum and lower part of the colon. Argon Plasma Coagulation (APC), is used primarily to control bleeding in the GI tract. APC involves the use of a jet of ionized Argon gas (plasma) that is directed through a probe in the scope.

ONE WEEK BEFORE your procedure:

Those on Diabetic Meds:
- Discuss with your diabetes physician the clear liquid diet required and see if you need to adjust your insulin.
- If you are taking canagliflozin (Inovoka), dapagliflozin (Farxiga), or empagliflozin (Jardiance), HOLD for 3 days prior to procedure.
- If you are taking ertugliflozin (Steglatro), HOLD for 4 days prior to procedure.

Those on Blood Thinners:
- Warfarin (Coumadin), Heparin, Plavix, and Pradaxa, must be stopped 5 days prior to procedure. Eliquis, and Xarelto must be stopped 2 days prior. Lovenox must be stopped 24 hours prior. Check with your prescribing physician that it is safe for you to do so.
- 5 Days prior: No nuts, seeds, popcorn, corn. No oral iron supplements.

Purchase the Bowel Prep from your Pharmacy:
- Pharmacy prescribed Bowel Prep RX (optional flavoring with Crystal Light – no red or purple color).

The DAY BEFORE Your Procedure:
- Drink plenty of CLEAR liquids ONLY for the ENTIRE day. ALLOWED clear liquids are water, bouillon, broths, black coffee, Jello, popsicles, sports drinks and soft drinks.
- NO SOLID FOODS
- Do NOT consume anything red or purple in color, anything with dairy, or alcoholic beverages
- Mix Bowel Prep with water according to package directions and chill in refrigerator.
- Late afternoon, begin drinking bowel prep, 8 ounces every 10-15 minutes, completing ¾ of the prep within 5 hours.

The DAY OF your procedure:
- In the morning, continue drinking the last ¼ of bowel prep at least 4 hours before procedure.
• STOP all clear liquids 3 hours before procedure
• Take all routine blood pressure, heart, and seizure medications with a sip of water.
• A RESPONSIBLE ADULT (18 years or older) MUST accompany you and remain with you to DRIVE YOU HOME from your procedure due to sedation effects.

Your procedure is scheduled with Dr._________________________________________

On _________________________ at ________________________________________

Please arrive one (1) hour prior to your procedure at ________________
(2) hours prior if procedure is at Hospital________________________

When you arrive for your procedure, you will be asked to show a government-issued driver’s license, passport, or identification card. Your procedure will be CANCELLED if you do not have your ID with you.

REMINDER: You must SELF-ISOLATE and not travel between COVID testing and scheduled procedure if COVID testing is required.

Report to Emory Clinic Endoscopy Center located at:

______1365 Clifton Road, Building B, 1st floor, Atlanta, GA 30322
______4555 North Shallowford Road, Dunwoody, GA 30338
______2665 North Decatur Road, Suite 740, Decatur, GA 30033
______Emory University Hospital, 1364 Clifton Road, 3rd floor (AB elevators),

Atlanta, GA 30322
______Emory St. Joseph’s Hospital, 5665 Peachtree Dunwoody Rd., 1st floor, Admissions desk,

Dunwoody, GA 30342
______Emory Johns Creek Hospital, 6325 Hospital Pkwy, 1st floor, Johns Creek, GA 30097
______Emory Decatur Hospital, 2701 N. Decatur Rd, ground floor- Diagnostic Treatment

Center, Decatur, GA 30033
______Spivey Station Surgery Center, 7813 Spivey Station Blvd, #100, Jonesboro, GA 30236

If you need to reschedule or cancel your appointment, please call at least 2 business days in advance to avoid a $100.00 charge. Call 404-778-3184 with any schedule changes (8/4/22)