



Preparing for your Colonoscopy

Inside this packet:

- Endoscopy Boarding Pass
- Endoscopy Driving/Arrival Directions
- Preparation Tips and Tricks
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A low-fiber diet in preparation of your colonoscopy:

It is very important to begin a low-fiber diet three (3) days before your colonoscopy. Fiber is indigestible and stays inside the colon, making the colonoscopy less accurate.

FOOD GROUP	OK TO EAT:	DO NOT EAT:
Milk/Dairy	Milk, cream, chocolate milk, hot chocolate, milk-based drinks, cottage cheese, sour cream, custard and pudding, yogurt, ice cream, cream sauces, broths, soups without seeds or beans.	Yogurt with granola, seeds, nuts or fruit with skin.
Bread/Grains	Breads and grains made from refined flour, including: rolls, bagels, muffins without bran, crackers, pasta, Cheerios, Rice Krispies, Corn Flakes or Cream of Wheat.	Whole wheat or grains with seeds including: rolls, bagels, All-Bran, Wheaties, granola, popcorn.
Meat/Fish Poultry/Protein	Tender beef, ground beef, chicken, pork, eggs, fish/shellfish, lamb, creamy peanut butter, tofu.	Tough meat with gristle, chunky peanut butter, all beans, nuts, peas, lentils, legumes.
Fruit	Soft canned/cooked fruit without seeds or skin, soft melon, fruit juice without pulp, fruit jelly without pulp.	All other raw fruit, all dried fruit including prunes, fruit juice with pulp, prune juice, bananas.
Vegetables/ Potatoes	Canned vegetables without seeds, stems or skins (except those listed in the DO NOT EAT column), potatoes without the skin, vegetable juice without pulp.	All raw or steamed vegetables, beans, peas, potatoes with skin, Brussels sprouts, corn, broccoli, cauliflower, cabbage, onion, sauerkraut, greens or lettuce.
Fats/Oils	Butter, margarine, oils, mayonnaise, salad dressing without seeds or nuts.	Nuts, seeds, coconut, salad dressing with seeds or nuts.
Miscellaneous	Sugar, salt, jelly, honey, syrup, lemon juice.	Jam marmalade, relishes, pickles, olives.

CLEAR LIQUID DIET

A clear liquid diet in preparation of your colonoscopy:

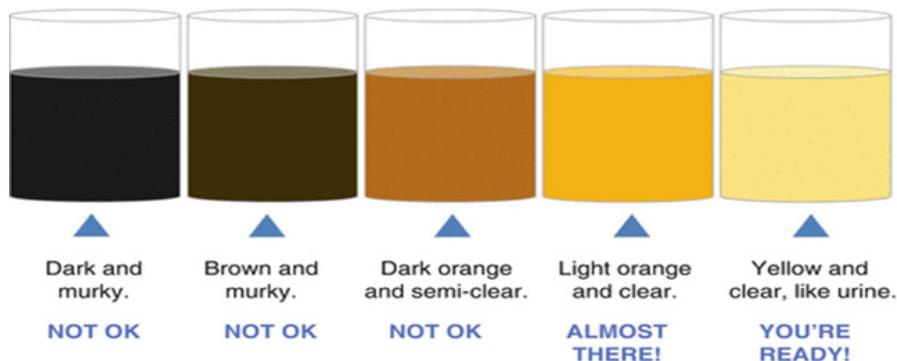
A clear liquid diet is necessary during colonoscopy preparation to provide accurate results. Clear liquids are easy to digest and leave little or no residue in the digestive tract. Clear liquids are liquids you can see through. For example, coffee is a clear liquid but not with milk or cream. You will be starting your clear liquid diet the day before your exam after breakfast. **It is especially important to avoid clear liquids with red or purple dyes.**

OK TO DRINK:	DO <u>NOT</u> DRINK:
<ul style="list-style-type: none"> • Water • Coconut water • Soda • Italian Ice <i>(without red or purple dye)</i> • Flavored water <i>(without red or purple dye - read the label)</i> • Clear broths - Chicken, beef or vegetable • Tea or coffee - sugar OK, no cream or milk • Juices with no pulp such as apple juice, white grape juice, or regular lemonade <i>(without red or purple dye)</i> • Gatorade, Kool-Aid, Tang, Crystal Light <i>(without red or purple dye)</i> • Yellow or green gelatin such as Jell-O <i>(without fruit)</i> 	<ul style="list-style-type: none"> • Milk - do not drink cow's milk or almond, rice, hemp or soy milks. • Cream • Milkshakes • Ice cream • Smoothies • Orange juice, grapefruit juice, tomato juice • Soup other than clear broth • Red or purple juice or gelatin (Jell-O)

Tips and Tricks for a successful bowel preparation

- Stock up on clear liquids other than water. Examples are fat free chicken or vegetable broths, sports drinks, Jell-O and popsicles.
- Drink the bowel preparation solution cold.
- Use a straw when drinking the solution.
- Have a sip of Sprite or Ginger Ale after each glass of bowel preparation fluid.
- Stay active as tolerated. Walk around your home (still near a bathroom) to provoke bowel movements. This can help to avoid nausea.
- If you become nauseated or feel like you are going to vomit, stop drinking the preparation. Start drinking the solution again (usually in 30 minutes) when the nausea goes away.
- Use an over the counter diaper rash cream or petroleum jelly to avoid irritation to your anus when wiping. Remove creams before arrival to procedure.
- Use alcohol free wet wipes.
- We are here to help! Please call us with any questions or concerns.

Stool Color Indicator



PREPARATION QUESTIONS:

Please call us
Monday-Friday, 8 a.m. - 5 p.m.:

Gastroenterology:
360-814-6113

General Surgery:
360-428-2586

Arlington General Surgery:
360-435-6097



Colonoscopy: What you need to know

The Affordable Care Act passed in March 2010 allowing for several preventative services such as colonoscopies to be covered at no cost to the patient. However, there are strict guidelines on when colonoscopies are defined as a preventative/screening service. Patients may also be required to pay co-payments, deductibles and co-insurance.

COLONOSCOPY CATEGORIES	
Preventative/Screening Colonoscopy CPT CODE: 45378	Diagnostic Colonoscopy CPT CODE: 45380
<ul style="list-style-type: none"> Over the age of 45 No personal or family history of gastrointestinal disease, colon polyps or colon cancer No present gastrointestinal symptoms (diarrhea, constipation, irregular bowel habits) Has not undergone a colonoscopy within the last 10 years. 	<ul style="list-style-type: none"> Patient is older than the age of 45 Personal or family history of colon polyps or colon cancer Has one or more gastrointestinal symptom (diarrhea, constipation, irregular bowel habits) Personal history of gastrointestinal disease that requires more frequent colonoscopies Has undergone a colonoscopy within the last 10 years
<p>*If your primary care provider refers you for a <u>screening</u> colonoscopy, you must meet all guidelines above.</p>	<p>*If you fall under the <u>diagnostic</u> category, you may need to pay a co-payment, deductible or co-insurance.</p>

How to determine your out-of-pocket expense

Call your insurance company. The phone number is typically on the back of your insurance card. They will ask for the CPT code. Give them the code that pertains to the category you fall in – see codes listed above.

Ask the following questions:

1. What are my full benefits for a screening colonoscopy?

2. Are there any limits regarding age?

3. What will be my financial responsibility?



Frequently Asked Questions

Why was my colonoscopy billed as a diagnostic if I fall under the screening category?

During a screening colonoscopy, if the provider locates a polyp, the provider will remove and send the polyp to pathology to determine if it is benign or cancerous. Many insurance companies will not deem this as a screening colonoscopy and they will apply it to your co-pay, deductible and/or co-insurance because of the removal and diagnostic testing of the polyp.

Can a physician change or delete a diagnosis so that it can be billed as a screening colonoscopy?

The answer is NO. The patient encounter is documented as a medical record from information you have provided as well as an evaluation and assessment from the physician. It is a binding legal document that cannot be changed to facilitate insurance coverage. There are strict government and insurance company documentation and coding guidelines that prevent a physician from altering a chart or bill for the sole purpose of coverage determination. This is considered insurance fraud and is punishable by law.

What if my insurance company tells me that the physician can change, add or delete a CPT or diagnosis code?

This is actually a common occurrence. Member service representatives may tell a patient if your provider uses/or changes the diagnosis code to “screening” colonoscopy it will be 100% covered. This is incorrect. It would be considered insurance fraud and cannot be changed. Diagnosis can only be amended if it applies to the patient.

What if my primary care provider referred me for a screening colonoscopy under 50?

Guidelines from the American Cancer Society recommend a screening colonoscopy to be at age 45 for people of average risk. Contact your insurance company to see if they have coverage limitations.

Contact us

You may also contact Skagit Regional Health Patient Financial Services by calling 360-814-7575 with any questions or concerns. They are a great resource and are happy to help you understand your financial obligations. However, it is necessary you contact your insurance company first and ask the above questions.

You may receive more than one bill associated with your procedure, such as the physician, facility, anesthesiologist, pathologist and/or laboratory. If you have a high deductible or have concerns on paying your bill, contact the Skagit Regional Health Patient Financial Services financial department and they can help you apply for financial assistance or set up payment arrangements.

