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Frequently Asked Questions About GI Procedures

Here are the most commonly asked questions from our patients about gastrointestinal procedures such as upper endoscopy and colonoscopy. Feel free to ask your physician if you have a question that's not answered below.

Before Your Procedure

What kind of food can I eat the day before my colonoscopy procedure?

Try to have a mostly clear liquid diet (see form on website)

When should I start taking my bowel prep on the day before my procedure?

Generally in the early evening. The entire prep may take four to eight hours to run through your system, and so starting too late in the evening may interrupt sleep. (See the instruction forms for your specific prep)

If I don't completely finish my bowel prep (if I throw up), can I still come in for my colonoscopy procedure?

Yes. As long as you get enough down to start having frequent clear watery non-solid bowel movements, the prep should be adequate.

I didn't read the instructions until two days before my procedure and I am taking aspirin/NSAIDs. Can I still come in for my procedure?

Yes. Generally this will not be a problem, and if we remove a polyp then we will ask you not to take aspirin or NSAIDs for one week.

I didn't read the instructions until two days before my procedure and I am taking multivitamins with iron. Can I still come in for my procedure?

Yes, but don't take the vitamins the day before. If you find your stool is generally very black when taking iron, it might be better to reschedule the colonoscopy for when you have stopped the iron for a week and your stools are brown.

I didn't read the instructions until two days before my procedure and I am taking Coumadin. Can I still come in for my procedure?

You should check with your doctor who prescribed the Coumadin about how far in advance you should stop it. For most procedures you can still come in, but should realize that under certain circumstances you might be at increased risk for bleeding and the doctor might want to postpone certain therapeutic procedures (for example, removing a large polyp).

I have diabetes. When do I stop taking my medication? When is the last meal that I can eat?

You must discuss these questions with your primary care physician since every patient's case is different.

Day of Procedure

Should I take my high blood pressure and/or heart medicines the morning of the procedure?

Yes. You should take all hypertension and cardiac medications at your usual times with a small amount of water.

Can I eat or drink the day of my procedure?

You should not eat for eight hours prior to the procedure. This may result in the postponement of your procedure.

How long will it take to do the procedure?

In general, for colonoscopy or upper endoscopy you should expect to be three hours door to door. This includes check-in, procedure, and recovery.

If I had a biopsy done during my procedure, how long should I expect to wait for my results?

This depends on your doctor and your case. Depending on the physician, it is possible that you will be contacted only if you had an unexpected result. Or, you may be notified by phone or mail in a few weeks, or the results may be sent to your referring doctor. When you are discharged after your procedure, ask how you will be notified.

What kind of complications should I expect during and after my procedure?

This will be discussed with you before the procedure by the physician performing the procedure. In general, the risks of any endoscopic procedure include, but are not limited to, the following: making a hole or perforation which requires surgery to close; bleeding; infection; complications of sedation.

Is there any risk to my teeth or dentures during upper endoscopy?

Yes. You will be asked to remove your dentures. There will be a plastic bite block to protect your teeth and gums. Occasionally this can cause damage to teeth or gums. If you have poor dentition it is possible that a tooth could become loose or damaged.

I am taking a lot of pain medication. Will I be able to be sedated enough during my procedure?

Generally you will be adequately sedated with the moderate sedation medications used for routine colonoscopy and upper endoscopy. Occasionally stronger sedation will be needed, and the procedure may be rescheduled for another time using deep sedation by the Anesthesiology department. If you take a lot of pain medication please talk to Dr. Desai or nursing staff during your office visit so we can plan appropriately.

After Your Procedure

When can I eat after my procedure?

You can generally eat immediately afterwards. Occasionally there is mild nausea from the sedative medications, and so you may not have a full appetite until the following day.

Why do I feel bloated after my procedure?

Your colon and small intestine are filled with air during the procedure. Walking around or changing your bed position will help you expel the air.

Can I drive myself home after receiving sedation?

Absolutely not. You MUST have a family member or friend drive you home, or accompany you home if taking the bus or a taxi.

How long until I can drive again?

If you receive sedation, you cannot drive a motor vehicle or operate heavy machinery until the next day.

Can I work out or go to work right after my procedure? If not, how long do I need to wait?

If you receive sedation for your procedure, you should plan to rest for the remainder of the day. You should be able to resume all of your usual activities the next day.

How long after the procedure does it take to get my pathology reports back?

It can take up to 7 business days to have your pathology reports back from the pathologists. The doctor or medical assistant may call you with the results soon after.

I am experiencing a lot of pain and discomfort from my procedure. Whom should I speak with?

You can call the GI endoscopy unit to speak with one of the GI endoscopy nurses. However, if you are having severe pain, you should go to the emergency room.

I am having some rectal bleeding after my large polyp was removed. Whom should I speak with?

Although rare, bleeding can occur after a large polyp has been removed. If you notice bleeding a few days after your procedure, please contact your gastroenterologist's office immediately and go to the emergency room.