

M.H.Razavi, M.D.,F.A.C.P.,F.A.C.G.,A.G.A.F.,F.A.S.G.E.

703-497-4222

SUPREP TABS

Please get your prescription filled at the pharmacy at least one week prior to your colonoscopy

2 DAYS PRIOR

Please avoid fruits with seeds and vegetables. For example: beans, corn, zucchini, squash, broccoli, celery.

DAY BEFORE TEST

Start a clear liquid diet after a light breakfast such as eggs and toast the day before your exam (DO NOT CONSUME ANY DAIRY PRODUCTS, SEEDS, NUTS OR GRANOLA).

CLEAR LIQUID DIET LIST

Soft drinks (orange, ginger ale, cola, sprite, 7-up, Gatorade, Kool Aid- avoid red and purple colors).

Strained fruit juices, NO PULP

Water, tea, coffee (no milk or non dairy creamer; you may use sugar or honey).

Low sodium chicken or beef bouillon or broth.

Hard candies, Jell-O Popsicles (avoid red or purple), lemon and coconut sorbet, Italian ice (lemon).

First Dose:

At 5pm the day before the test follow the steps below:

Step 1: Open 1 bottle of 12 tablets.

Step 2: Fill the provided container with 16 ounces of water (up to the fill line). Swallow each tablet with a sip of water, and drink the entire amount of water over 15 to 20 minutes.

Step 3: Approximately 1 hour after the last tablet is ingested, fill the provided container again with 16 ounces of water and drink the entire amount over 30 minutes.

Step 4: Approximately 30 minutes after finishing the second container of water, fill the provided container with another 16 ounces of water, and drink the entire amount over 30 minutes.

Second Dose:

At 11pm open the second bottle of 12 tablets and repeat Step 1 to Step 4 from first dose.

After finishing with the second dose DO NOT have any more liquids and continue not to eat.

DAY OF TEST

You may take your regular medications with a small sip of water as long as it is 6 hours prior to your colonoscopy time.

Appointment Date: _____

Location: _____

****NOTHING TO EAT OR DRINK 6 HOURS PRIOR TO YOUR PROCEDURE****

(THIS INCLUDES WATER)

YOU MUST HAVE SOMEONE DRIVE YOU HOME FROM YOUR PROCEDURE! NO TAXI/UBER!

****There is a \$250 fee if 3 business days are not provided when rescheduling or cancelling procedures****

(This is NOT payable by your insurance)

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Understanding Colonoscopy

What is a colonoscopy?

Colonoscopy enables Dr. Razavi to examine the lining of your colon (large intestine) for abnormalities by inserting a flexible tube as thick as your finger into your anus and slowly advancing it into the rectum and colon.

What preparation is required?

Attached you will find what dietary restrictions to follow and what cleansing routine to use. The colon must be completely clean for the procedure to be accurate and complete, so be sure to follow instructions carefully.

Can I take my current medications?

Most medications can be continued as usual, but some medications can interfere with the preparation or the examination. Inform us about medications you're taking such as anticoagulants (blood thinners – like Coumadin, Plavix, Pradaxa, Eliquis, Xarelto, Barilinta etc.) or insulin.

What happens during a colonoscopy?

Once you are changed into an examination gown, an intravenous (IV) line will be placed to give you anesthesia for the procedure so that you will experience no pain or discomfort. You will lie on your left side while Dr. Razavi advances a colonoscope through your large intestine to examine the lining. The procedure itself usually takes about 15-30 minutes, although you should plan on at least 60 minutes for waiting and recovery.

What if the colonoscopy shows something abnormal?

If Dr. Razavi thinks an area needs further evaluation, he might pass an instrument through the colonoscope to obtain a biopsy (a sample of the colon lining) to be analyzed. Biopsies are used to identify many conditions, and Dr. Razavi may order one even if he doesn't suspect cancer. If colonoscopy is being performed to identify sites of bleeding, Dr. Razavi may control the bleeding through the colonoscope by injecting medications or by coagulation (sealing off bleeding vessels with heat treatment). Dr. Razavi might also find polyps during the procedure, and he will remove them during the examination. These procedures do not cause any pain.

What are polyps and why are they removed?

Polyps are abnormal growths in the colon lining that are usually benign (noncancerous). They vary in size from a tiny dot to several inches. No one can tell a benign polyp from a malignant (cancerous) polyp by its outer appearance, so we will send removed polyps for analysis. Because cancer begins in polyps, removing them is an important means of preventing colorectal cancer.

What happens after a colonoscopy?

Dr. Razavi will explain the results of the examination to you, although you may have to wait for the results of any biopsies performed. Because you have received anesthesia for the procedure, someone must drive you home and stay with you. Even if you feel alert after the procedure, your judgment and reflexes could be impaired for the rest of the day. You may experience some cramping or bloating because of the air introduced into the colon during the examination. This should disappear quickly when you pass gas. You should be able to eat after the examination unless instructed otherwise.

What are the possible complications of colonoscopy?

Colonoscopy and polypectomy are generally safe when performed by doctors who have been specially trained and are experienced in these procedures. Dr. Razavi has performed more than 25,000 colonoscopies with no perforation. One possible complication is a perforation or tear, through the bowel wall that could require surgery. Bleeding might occur at the site of biopsy or polypectomy, but is usually minor. Bleeding can stop on its own or be controlled through the colonoscope; it rarely requires follow-up treatment. Some patients might have a reaction to the anesthesia or complications from heart or lung disease, also splenic tear and laceration has rarely been reported. Although complications after colonoscopy are uncommon, it's important to recognize the early signs of possible complications. Contact the office if you notice any severe abdominal pain, fever, chills, or rectal bleeding of more than one-half cup. Note that bleeding can occur several days after the procedure.

NOTHING TO EAT OR DRINK SIX (6) HOURS PRIOR. THIS INCLUDES WATER.
YOU WILL NEED TO HAVE SOMEONE DRIVE YOU HOME.

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CANCELLATION POLICY/
Anesthesia Services for Aetna

Dear Patient,

This is a reminder that we require a **3-business day** notice to cancel or reschedule any procedures scheduled. If you are scheduled as followed:

Monday you need to call by **Wednesday** the week before
Tuesday you need to call by **Thursday** the week before
Wednesday you need to call by **Friday** the week before
Thursday you need to call by **Monday**
Friday you need to call by **Tuesday**

If you fail to provide sufficient notification we will **charge a \$250 cancellation fee**. Your insurance will not pay for this charge. We do NOT waive it for family emergencies nor job related emergencies.

We appreciate your cooperation with this policy. This will help us provide a better service to our patients.

Our Anesthesia Group does NOT participate with **Aetna** as this insurance plan has a limited selection of participants.

We will submit the claim and an appeal on patients with this insurance for payment. In most instances the insurance will still pay the anesthesia portion of the bill, however if they do not cover the charges, we will have to collect \$200 from the patient to cover our anesthesia services.

M.H. Razavi, MD
Endoscopy & Digestive Center of Woodbridge
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Billing for Procedures

Per our office policy a patient is to pay for any co pay and/or deductible prior to having their procedure done.

Procedures are billed in four (4) parts, meaning you may receive bills from four (4) different places reflecting charges for:

- Facility Fee (Endoscopy Center) - **this is a different entity versus Dr. Razavi's office.**
- Physician Fee (Dr. Razavi)
- Anesthesia Fee (Woodbridge Anesthesia Group)
- Pathology Fee (either CBL Lab or Dianon Lab depending on insurance)

Dr. Razavi highly recommends that patients are familiar with their insurance coverage and benefits prior to having their procedure done.

For procedures that are done at either Sentara Hospital of Springfield Surgery Center, all billing except for the Physician Fee, will be handled by that location's billing department.

*****PLEASE READ THE FOLLOWING CAREFULLY*****

Our office will contact your insurance carrier to verify coverage and obtain prior authorization, if applicable, for your procedure. However this is **NOT** a guarantee of payment and the patient is responsible for any deductibles, co pays, co-insurance, and/or any other out of pocket expenses.

Depending on a patient's family history, personal history, prior GI diagnoses, or findings during a colonoscopy, a procedure may be considered preventative or diagnostic. This will be based upon the findings of the exam, so therefore this cannot be determined until after the procedure has been performed. This basically means that a preventative exam may turn into a diagnostic exam if for example polyps or any other issues are found by the physician during the procedure. The insurance will process the claim accordingly. In our experience, insurance companies cover preventative and diagnostic colonoscopies differently and as a result from that, a patient's out of pocket payment may also be different. If you have any questions regarding coverage, please contact your insurance carrier directly by calling the Member Services number on your card.