

Lower Endoscopic Ultrasound (EUS) Prep Instructions

Please read these instructions carefully at least 2 weeks prior to your procedure

****Important: These instructions are time-sensitive****

- **Blood thinners** such as Coumadin (warfarin), Lovenox (enoxaparin), Eliquis (apixaban), Pradaxa (dabigatran), Xarelto (rivaroxaban), Plavix (clopidogrel), Brilinta (ticagrelor), Effient (prasugrel) may need to be held prior to your procedure. We will work with the provider who manages your blood thinner to create a plan for you. If you do not receive a plan 1 week prior to your procedure, please call the office.
- Do not stop **Aspirin** prior to your procedure unless instructed.
- **Diabetic Medications:** Contact your primary care doctor regarding the adjustment of your diabetic medications prior to your procedure.
- **SGLT-2 inhibitors** including Jardiance (empagliflozin), Farxiga (dapagliflozin), Invokana (canagliflozin), Brenzavvy (bexagliflozin) should be stopped **3 days** prior to your procedure. Any medications containing Ertrugliflozin (Steglatro, Segluromet, Steglujan) should be stopped **4 days** prior to your procedure.
- **GLP-1 Medications** (for weight loss or diabetes) should be stopped **7 days** prior to your procedure: These include Ozempic, Wegovy, Rybelsus (semaglutide), Mounjaro, Zepbound (tirzepatide), Trulicity (dapaglutide), Victoza, Saxenda (liraglutide).
- **Blood pressure, non-NSAID pain, anti-anxiety, and/or thyroid medications:** Please take your morning dose with a sip of water on the morning of your procedure AT LEAST 4 HOURS prior to your procedure.
- **Anti-inflammatory Medications (Advil, Motrin, Aleve, Ibuprofen):** Stop taking **5 days** prior to procedure
- **Birth control pills:** Take in the morning before you begin preparation as the colonoscopy prep may interfere with absorption of the pill. Resume your pill as usual after your procedure.
- **No alcohol, marijuana, tobacco, vaping products or other recreational drug use** on the day before or day of your procedure to avoid complications with anesthesia.
- Please contact the endoscopy unit if you have had any **recent infections, cardiac/lung problems, or other major change to your health** as any of these issues may require rescheduling of your procedure
- Please **do not wear perfumes or body lotions** on the day of your procedure.
- Arrange to have an **adult age 18+ drive you** to your test and be there to drive and/or accompany you home after you are done. Uber/Lyft/ Taxi are allowed **ONLY** if you have a responsible family member or friend (other than the driver) to accompany you.
- You should plan to spend at least **2 hours** at the facility.
- **Day of procedure you will need to bring the following:**
 - 1) Insurance card
 - 2) Photo ID
 - 3) List of current medications and dosages
 - 4) Someone you trust to accompany you home

Important Phone Numbers:

Brown Health Gastroenterology Offices: 401-606-4260

Brown Medicine Endoscopy Center: 401-649-4970

Rhode Island Hospital Endoscopy Unit: 401-444-5038

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What You Will Need To Buy:

- **Two (2) adult fleet enemas**
- You can find these at a pharmacy or market. You do not need a prescription.
- Please carefully read the instructions on the package and call our office if you have any questions.

1-Day Before Your Lower EUS

- The night before your procedure, have a **clear liquid dinner and do not eat solid food again until after your procedure.**
- **Clear liquids are those you can see through** – examples include apple juice, white cranberry juice, clear broth, popsicles, Jello, ginger ale, coffee/tea WITHOUT milk or cream. **Avoid liquids that are red, blue, or purple (including popsicles).**

Day of Your Lower EUS

- **3 hours before your procedure, do 1 (one) Fleet enema.** Follow the instructions on the package, try to hold the enema in for at least a few minutes.
- **2 hours prior to your procedure, repeat the process with a second Fleet enema**
- You may take your regular medications (unless otherwise instructed) and clear liquids up to 4 hours before your procedure time.
- **Stop all oral intake 4 hours before your procedure:** this includes liquids, meds, chewing gum, mints, hard candy.

Learn More About Your EUS

What is Endoscopic Ultrasound (EUS)?

Ultrasound is a type of imaging test that uses sound waves to create images of the inside of your body. An endoscopic ultrasound is performed inside the digestive system (GI tract). An echoendoscope (EUS scope) is a thin, flexible tube with a built-in camera and miniature ultrasound probe. Inserted through either the mouth or rectum, the scope passes through either the upper or lower GI tracts and examine surrounding parts of the body.

Why is EUS done?

EUS provides more detailed images than a regular ultrasound because the ultrasound probe rests inside the body, closer to your body organs.

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EUS can be used to help diagnose the following conditions:

- Abdominal pain or weight loss
- Problems within your gallbladder or bile ducts, including gallstones
- Pancreatitis (inflammation of the pancreas)
- Growths, tumors or cysts in the esophagus (food-pipe), stomach, pancreas, intestines, lungs or rectum.
- Cancer of the esophagus, stomach, pancreas, rectum or lungs

In patients with a diagnosis of cancer, EUS can be used to assess the cancer's depth and whether or not it has spread to lymph nodes, blood vessels or other structures. Biopsies (tissue samples) can also be done during EUS to help your doctors determine the proper treatment. Often, EUS is used to further investigate abnormalities seen on previous endoscopies, colonoscopies or x-ray tests (such as CT scans or MRI).

What can I expect during EUS?

- During the procedure, you will be given sedative medications through an IV to become sleepy and relaxed.
- Most likely, you will be lying on your left side.
- After you become sleepy, the doctor will pass the scope down your food-pipe to examine your esophagus, stomach, small intestine and surrounding organs such as the gallbladder, liver, and pancreas.
- The instrument will NOT interfere with your ability to breathe.
- Most procedures take 60-90 minutes and many people do not remember the procedure when they wake up.
- EUS of the lower GI tract and rectum will require you to lie on your left side with your back to the doctor. You will also receive sedating medication through the IV. The scope will be inserted into the rectum and the bottom length of the colon will be examined.
- Sometimes EUS takes longer if a biopsy of a concerning area or drainage of a cyst is performed (1 ½ to 2 hours).
- After your procedure, you will recover and wake up from the IV sedation medications in our recovery room. You will not be alert enough to drive home and will need a ride. Plan on resting for the rest of the day. You should be able to return to your usual activities the day after the procedure.

What are possible complications of EUS?

- Although complications may occur during any endoscopy procedure, they are rare.
- There is a small risk of bleeding if a biopsy or tissue sample is taken during the procedure, but it is usually minimal and rarely requires follow-up.
- You might have a sore throat the day after a procedure. Over the counter throat lozenges may help sooth this discomfort.
- One major, but rare, complication from an endoscopic ultrasound is a perforation (an accidental hole or tear in the GI tract that might require surgery to repair).
- If a needle biopsy is performed of the pancreas there is a small increased possibility of inflammation (swelling) of the pancreas (pancreatitis) or infection.
- Your doctor will review and discuss these risks as well as benefits of the planned EUS procedure for you before your procedure and on the day of your procedure.

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