

**Procedure Location**  
**Manhattan Endoscopy Center**  
 535 5<sup>th</sup> Avenue  
 5<sup>th</sup> Floor  
 New York, NY 10017

**Watch Instruction Video**



**Prep Questions?**

Contact NYGA:  
 Call: 212-996-6633  
 Text: 646-419-4947

## Colonoscopy Instructions

### Medication Alert

- **If you take any of these medications, please contact the NYGA office immediately.**  
 Heparin, Lovenox, Warfarin (Coumadin), Rivaroxaban (Xarelto), Apixaban (Eliquis), Edoxaban (Lixiana, Savaysa), Betrixaban (Bevyxxa), Clopidigrel (Plavix), Prasugrel (Effient), Dabigatran Pradaxa), Bivalirudin (Angiomax), Argatroban (Argatra, Novastan, Arganova, Exembol), Brilinta (Ticagrelor) and Desirudin (Iprivask, Revasc)
- **If you take diabetes medications, contact your primary care doctor right away for instructions.**
- **If you take any of these or other novel diabetes or weight loss medications, please inform your NYGA doctor since these medications will need to be adjusted or the procedure will be cancelled.**  
 Semaglutide, Wegovy, Ozempic, Rybelsus, Liraglutide, Saxenda, Victoza, Dulaglutide, Trulicity, Tirzepatide, Mounjaro, Zepbound, Exenatide, Byetta, Bydureon, Lixisenatide, Adlyxin
- **DO NOT skip your blood pressure medications including the days before and the day of your procedure. If taking blood pressure medication within 3 hours of the procedure, drink no more than a few sips of water.**

### Beginning 7 Days Before Your Procedure

|                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                          |
|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>7 Days Before</b>   | <ul style="list-style-type: none"> <li>• Stop all fiber supplements and medications containing iron, including multivitamins</li> <li>• Drink 6-8 cups (8oz) of water each day leading up to your procedure</li> <li>• Arrange for someone to pick you up after your procedure</li> <li>• Obtain your preparation medication (Plenvu)</li> <li>• Purchase a 10oz bottle of Magnesium Citrate from your local pharmacy</li> </ul>                                                                              |                                                                                                                                                                                                                                                                          |
| <b>3 Days Before</b>   | <b>Avoid High Fiber Foods including:</b> <ul style="list-style-type: none"> <li>• Raw fruits and vegetables</li> <li>• Whole wheat bread or crackers</li> <li>• Seeds</li> <li>• Nuts</li> <li>• Popcorn, Bran</li> <li>• Quinoa</li> <li>• Corn</li> </ul>                                                                                                                                                                                                                                                   | <b>Begin a Low Fiber Diet such as:</b> <ul style="list-style-type: none"> <li>• White bread and rice</li> <li>• Eggs</li> <li>• White meat (turkey, chicken)</li> <li>• Fish</li> <li>• Cheese</li> <li>• Yogurt</li> <li>• Milk</li> <li>• Cooked vegetables</li> </ul> |
| <b>24 Hours Before</b> | <b>NO solid foods. Only clear liquids including:</b> <ul style="list-style-type: none"> <li>• Water</li> <li>• Apple, white grape, and white cranberry juices without pulp</li> <li>• Clear soup broth</li> <li>• Tea or coffee (<b>NO</b> milk, cream)</li> <li>• Gatorade / Powerade (<b>NO</b> red, orange, or purple colors)</li> <li>• Jell-O (<b>NO</b> red, orange, or purple colors)</li> <li>• Popsicles or sorbet (<b>NO</b> red, orange, or purple colors)</li> <li>• <b>NO</b> alcohol</li> </ul> |                                                                                                                                                                                                                                                                          |

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## Instructions for Plenvu & Magnesium Citrate

| DOSE 1                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|----------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>At 6 pm the evening before procedure</b>  | <ul style="list-style-type: none"><li>• Prepare and drink 32 ounces as follows:<ul style="list-style-type: none"><li>- Empty “Dose 1” into the mixing container that came in the package</li><li>- Add 16 ounces of water to the container (fill to line)</li><li>- Mix until dissolved</li><li>- Drink the mix</li></ul></li><li>• If you experience nausea, bloating, or vomiting, drink the mixture slower or with ice.</li><li>• Refill the container with 16 ounces of water (fill to line) and then drink</li></ul> |
| <b>At 10 pm the evening before procedure</b> | <ul style="list-style-type: none"><li>• Drink the 10 oz bottle of Magnesium Citrate. Finish drinking within 1 hour.</li></ul>                                                                                                                                                                                                                                                                                                                                                                                             |

| DOSE 2                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|---------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>6 hours before your procedure</b><br><b>(unless instructed otherwise by your doctor)</b> | <ul style="list-style-type: none"><li>• Empty Pouch “A” and Pouch “B” into the mixing container</li><li>• Add 16 ounces of water to the container (fill to line)</li><li>• Mix until dissolved</li><li>• Drink the mix</li><li>• Refill the container with 16 ounces of water (fill to line) and then drink</li><li>• Up until 3 hours before your procedure:<ul style="list-style-type: none"><li>- Casually drink clear liquids</li><li>- Take your medications, as approved by your NYGA physician</li></ul></li></ul> <p><b>NO FOOD OR DRINK (INCLUDING WATER) WITHIN 3 HOURS OF PROCEDURE</b></p> |

| Additional Information                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <ul style="list-style-type: none"><li>• This prep often works within 30 minutes but may take 4-6 hours. This prep will cause multiple bowel movements. The goal is for your colon to be empty when you come for your procedure.</li><li>• <b>Arrive 30 minutes early.</b> Arriving late could lead to your procedure being delayed or canceled.</li><li>• Upon arrival, females of childbearing age are legally required to provide a <b>urine sample for a pregnancy test.</b></li><li>• After your procedure, someone must escort you home, and you must not drive for the rest of the day.</li><li>• <b>Need to cancel your procedure? Please notify our office as soon as possible. You will be charged a cancellation fee of \$250 if the procedure is not cancelled at least 2 business days before your scheduled procedure time.</b></li></ul> |  |



## Procedure Billing Information

### Appointment Details

You are scheduled for a procedure, such as a colonoscopy, upper endoscopy (EGD), or HemWell™, at one of our affiliated ambulatory endoscopy centers. Please check your NYGA patient portal to confirm the specific location, date, and time of your appointment.

### Billing Details

A procedure typically involves several fees that are payable to various parties, including the endoscopy center, New York Gastroenterology Associates (NYGA), and the pathology lab. These fees include:

| Fee                           | Charged By                        |
|-------------------------------|-----------------------------------|
| Facility fee                  | Endoscopy center                  |
| Anesthesia fee                | Endoscopy center                  |
| Professional fee              | NYGA                              |
| Pathology fee (if applicable) | Pathology lab (which may be NYGA) |

### Out-of-Pocket Costs

Depending on your insurance, you may be responsible for out-of-pocket costs (e.g., copay, deductible, co-insurance) related to the above fees, as follows:

- **Estimated out-of-pocket facility and anesthesia fees** payable to the endoscopy center are due on the day of your appointment. You will receive the estimate via call or text a few days before your procedure to ensure it reflects your remaining deductible and current policy details. If you do not receive this message, the estimate will be provided at check-in. The endoscopy center accepts cash, checks, and credit cards.
- **Out-of-pocket costs related to professional and pathology fees** will be determined after the facility and anesthesia fees have been applied to your deductible and communicated to you separately.

*Important note on screening colonoscopies: While many insurers cover screening colonoscopies, you may have additional out-of-pocket costs if your procedure is reclassified as surveillance or diagnostic based on the findings.*