

DRS. KANE, MISAWA & NGUYEN, LLC

GASTROENTEROLOGY
www.mygastrodocs.com

Mary G. Kane, M.D.
Kyoko Misawa, M.D.
Phithao J. Nguyen, D.O.

Please complete the attached forms and send back prior to your appointment. Also include a copy of the front and back of your insurance cards.

- Mail: 33 W. Higgins Rd. Suite 820 South Barrington, IL 60010
- Fax: 847-426-0047
- Email

Medication List

Date: / / Patient Name: _____ DOB: / /

This list should include all prescribed medications, aspirin, over the counter medications, herbs and health supplements.

Name	Strength	Frequency	Reason

Phone: 847-426-4355 Fax: 847-426-0047

33. W. Higgins Road
Suite 820
S. Barrington, IL 60010

800 W. Biesterfield Road
Wimmer Plaza, Suite 101
Elk Grove Village, IL 60007

880 W. Central Road
Busse Center, Suite 8100
Arlington Heights, IL 60005

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PREPARATION FOR COLONOSCOPY WITH SUPREP

You will need someone to drive you home. A responsible adult friend or relative must be present to escort you home and accept responsibility for your safety. **You may NOT take public transportation (cab, bus, limo, etc.)** You will need someone to look in on you the night of the test, **preferably to stay with you, and be responsible for your safety** after the sedation. The medicine you will receive will make you too sleepy to drive or work after the test the entire day of your examination. You will be at the hospital about 3-3 ½ hours.

You are scheduled on _____ . Arrive at _____ AM/PM for your procedure at:
ALEXIAN BROTHERS HOSPITAL – WEST TOWER ENTRANCE 7- REGISTRATION
GOOD SHEPHERD – WEST PAVILION (Pre registration 847/842-4130)
NORTHWEST COMMUNITY HOSPITAL – BUSSE CENTER FOR SPECIALTY MEDICINE - 2ND FLOOR
ST. ALEXIUS – BETTENDORF PAVILLION

PLEASE CONTACT YOUR INSURANCE COMPANY AND/OR PRIMARY CARE DOCTOR TO OBTAIN PRE-CERTIFICATION OR AN AUTHORIZATION NUMBER.

- * If you take **Coumadin, Warfarin, Pradaxa, Xarelto, Arixtra, or Eliquis** you usually need to stop it 5 days **before** the test. **Check with your cardiologist before you stop any medications.**
- * If you are taking iron pills, stop those 3 days before the test.
- * **If you have any HEART ISSUES or a DEFIBRILLATOR please call the office.**
- * If you have sleep apnea, or use oxygen, call the office to review.
- * **NO aspirin, Plavix, or Lovenox** on the morning of the test.

THE PREP IS NOT TO BE ALTERED IN ANY WAY WITHOUT CONTACTING OUR OFFICE!

1. Obtain the Suprep bowel prep kit from your pharmacy.
YOU MUST DRINK THE FIRST BOTTLE THE NIGHT BEFORE COLONOSCOPY, AND THE SECOND BOTTLE THE MORNING OF THE TEST.
2. **Day before colonoscopy (drink plenty of water and fluids that are listed below throughout the day):**
 - a) For breakfast, lunch, and dinner, drink & eat only clear liquids. These are some items that are allowed: broth, coffee or tea, apple juice, Popsicles, carbonated beverages, Jell-O, Kool-aid, Tang, bouillon, and Gatorade. **NO RED LIQUIDS.**
 - b) At 6 PM, pour one 6 ounce bottle of Suprep liquid into the mixing container. Add cool drinking water to the 16 ounce line on the container and mix. Drink **ALL** the liquid in the container.
 - c) Drink 2 more 16 ounce containers of water over the next 1 hour.
 - d) If your bowels do not move at all by 9 pm, call 847-758-2921.
You will start to have watery brown stools, then watery yellow or green stools. Finally, you will pass only clear yellow water with a few flecks of material. It is common to have cramps and bloating until your bowel movements start. If you feel sick or vomit, or your bowel movements are not clear yellow, please call the office at (847) 426-4355 or after hours at (847) 758-2921.
3. **Day of colonoscopy:**
 - a) 5 hours before you need to leave the house repeat steps 2b and 2c (see above).
 - b) 5 hours before you need to leave the house, stop all oral intake and liquids by mouth except the preparation. No gum chewing, hard candy or mints. You may take your usual medications with a sip of water up until 5 hours before leaving for the test.

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Patient Name _____ **Date of Birth** _____

Address _____ **City** _____ **State** _____ **Zip** _____

Home Phone _____ **Cell Phone** _____ **Email** _____

Sex ___ **Social Security#** _____ **Marital Status** _____ **Pharmacy name/ph#** _____

Employer _____ **Drivers License#** _____ **Language** _____

Race(please circle) African American Asian Caucasian Hispanic/Latino Other Refused

PLEASE BRING ALL INSURANCE CARDS & PHOTO ID

Primary Insurance _____ **Group#** _____ **I.D.#** _____

Address _____ **City** _____ **State** _____ **Zip** _____

Responsible Party _____ **Relation to you** _____ **Date of Birth** _____

Responsible Party Social Security# _____ **Responsible Party Employer** _____

Secondary Insurance _____ **Group#** _____ **I.D.#** _____

Address _____ **City** _____ **State** _____ **Zip** _____

Responsible Party _____ **Relation to you** _____ **Date of Birth** _____

Responsible Party Social Security# _____ **Responsible Party Employer** _____

Doctor Who Referred You/ Primary M.D. _____ **Purpose of Visit** _____

ASSIGNMENT OF BENEFITS: I hereby assign all medical and/or surgical benefits to include major medical benefits to which I am entitled, including Medicare, private insurance, and any other health plans to: Drs. Kane, Misawa & Nguyen, LLC. This assignment will remain in effect until revoked by me in writing. A photocopy of this assignment is to be considered as valid as an original. I understand that I am financially responsible for all charges whether or not paid by said insurance. I hereby authorize said assignee to release all information necessary to secure payment. I am responsible for following my insurance policy protocol and will accept any penalties incurred.

Signed _____ **Date** _____

Phone: 847-426-4355 Fax: 847-426-0047

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NOTICE OF PRIVACY PRACTICES ACKNOWLEDGEMENT

I understand that, under the Health Insurance Portability & Accountability Act of 1996 (HIPAA), I have certain rights to privacy regarding my protected health information. I understand that this information can and will be used to:

- Conduct, plan and direct my treatment and follow-up among the multiple healthcare providers who may be involved in that treatment directly and indirectly.
- Obtain payment from third-party payers.
- Conduct normal healthcare operations such as quality assessments and physician certifications.

I have read and understand your Notice of Privacy Practices containing a more complete description of the uses and disclosures of my health information. I understand that this organization has the right to change its Notice of Privacy Practices from time to time and that I may contact Drs. Kane, Misawa & Nguyen, LLC to obtain a current copy of the Notice of Private Practices.

I understand that I may request in writing that you restrict how my private information is used or disclosed to carry out treatment, payment or health care operations. I also understand you are not required to agree to my requested restrictions, but you are bound to abide by such restrictions.

Do we have your permission to leave medical information on your answering machine at Home? _____ Work? _____

Do we have your permission to discuss personal medical care/information with other individuals?

Name/Names	Relationship	Phone
_____	_____	_____

Our Regular Business Hours are:	Monday thru Thursday	8:30 am to 5:00 pm
	Friday	9:00 am to 12:00 pm

Call during these hours for appointments, medication renewals, and routine symptoms or medical questions. For any medical emergencies after business hours, please call 847-758-2921. The service will take your message and give it to the doctor on call.

- * After you have any tests done that the doctor ordered, please contact the office staff so we can get the results. Do not assume "no news is good news." Sometimes we do not receive the result; we need your call so we can be certain that we see all test results.
- * If you decide to decline the recommendations of the doctors, or choose not to have tests or take prescribed medicines, please call the office and inform the office staff so that we can note this in your record.

I have read and received a copy of the above:

Patient Name: _____

Signature: _____ Date: _____

Phone: 847-426-4355 Fax: 847-426-0047

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Consent – Colonoscopy

You are scheduled to have a colonoscopy, which is a scope test on your colon. It is done as an outpatient under sedation so you will need a ride home. The night before you will take a laxative to clean your bowels out so the doctor can see where she is going. When you come into the hospital the nurses will give you medication to make you sleepy and relaxed. That is usually the last thing that you know until we are done.

While you are asleep, we take a long skinny tube with a light at the end of it and thread it up around the entire length of your colon. If we see growths or polyps, we can usually remove them in the same sitting. Generally speaking we have a good idea of the results as soon as we are done, which we will tell you and write down for you before you go. The final biopsies take a week to come back.

Generally speaking the test is quite safe, but like any test there are some theoretical risks involved. The first thing that we worry about would be an unexpected allergy or oversensitivity to the medicine. That is rare, but we hook you up to monitors during the tests and we put you in a recovery area afterward. Second, if we remove a growth or polyp we can cauterize it, but we cannot put a bandaid on it or a stitch in it, so every once in a while there can be some bleeding up to a month later. Usually that stops by itself, but about one in a thousand patients have to come back in to be hospitalized, cauterized, or transfused. Rarely, an injury can occur to the spleen, or other organs that could result in hospitalization, blood transfusion or surgery.

The most serious potential problem is that any time that we remove a growth or polyp, it is theoretically possible that the bowel could tear instead of cutting, or if you had a very weak spot in the bowel it could be like a balloon with a pinhole in it, where you do not even know that there is a pinhole until you blow the balloon up. That would be a big deal if it happened, because it would require urgent colon surgery and usually a temporary colostomy or bag; then obviously we would be worried about infections or even death. However, to keep these things in perspective, they are very rare occurrences happening in the one in several thousand range. Most of the time you just come in, go to sleep, and the next thing you know you are going home.

Although colonoscopy is the current gold standard test, no test can guarantee 100% that cancer will not develop in the future.

Please sign and date.

Please call the office if you have questions at 847-426-4355.

I _____ have received an explanation of the risks of the procedure, and have no further questions.

Signature _____

Date _____

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If a bleeding site is identified, treatment can be administered to stop the bleeding. Other treatments can be given through the endoscope when necessary.

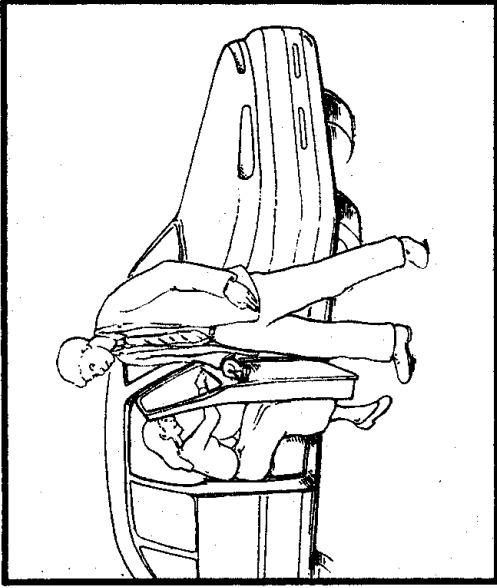
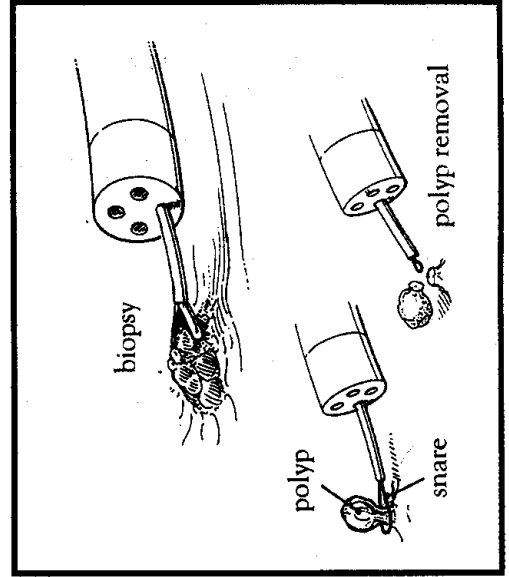
Alternative Testing

Alternative tests to colonoscopy include a barium enema or other types of x-ray exams that outline the colon and allow a diagnosis to be made. Study of the stools and blood can provide indirect information about a colon condition. These exams, however, do not allow direct viewing of the colon, removal of polyps, or the completion of biopsies.

Side Effects and Risks

Bloating and distension typically occur for about an hour after the exam until the air is expelled. Serious risks with colonoscopy, however, are very uncommon. One such risk is excessive bleeding, especially with the removal of a large polyp. In rare instances, a tear in the lining of the colon can occur. These complications may require hospitalization and, rarely, surgery. Quite uncommonly a diagnostic error or oversight may occur.

Due to the mild sedation, the patient should not drive or operate machinery following the exam. For this reason, someone should be available to drive the patient home.



Summary

Colonoscopy is an outpatient exam that is performed with the patient lightly sedated. The procedure provides significant information used to determine which specific treatment will be given. In certain cases, therapy can be administered directly through the endoscope. Serious complications rarely occur from colonoscopy. The physician can answer any questions the patient has.

SPECIAL INSTRUCTIONS:

This material does not cover all information and is not intended as a substitute for professional medical care.

Colonoscopy

Colonoscopy is the visual examination of the large intestine (colon) using a lighted, flexible fiberoptic or video endoscope. The colon begins in the right-lower abdomen and looks like a big question mark as it moves up and around the abdomen, ending in the rectum. It is 5 to 6 feet long. The colon has a number of functions including withdrawing water from the liquid stool that enters it so that a formed stool is produced.

Equipment

The flexible colonoscope is a remarkable piece of equipment that can be directed and moved around the many bends in the colon. These colonoscopes now come in two types. The original purely fiberoptic instrument has a flexible bundle of glass fibers that collects the lighted image at one end and transfers the image to the eye piece. The newer video endoscopes use a tiny, optically sensitive computer chip at the end. Electronic signals are then transmitted up the scope to a computer which displays the image on a large video screen. An open channel in these scopes allows other instruments to be passed through in order to perform biopsies, remove polyps or inject solutions.

Reasons For The Exam

There are many types of problems that can occur in the colon. The medical history, physical exam, laboratory tests and x-rays can provide information useful in making a diagnosis. Directly viewing the inside of the colon by colonoscopy is usually the best exam. Colonoscopy is used for:

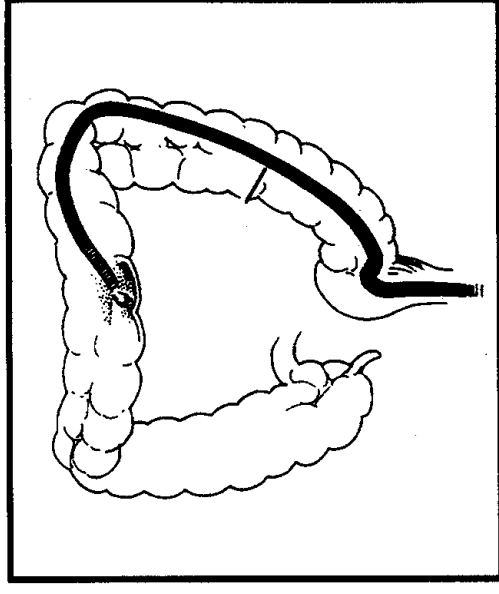
- Colon cancer—a serious but highly curable malignancy
- Polyps—fleshy tumors which usually are the forerunners of colon cancer
- Colitis (Ulcerative or Crohn's)—chronic, recurrent inflammation of the colon
- Diverticulosis and Diverticulitis—pockets along the intestinal wall that develop over time and can become infected
- Bleeding lesions—bleeding may occur from different points in the colon
- Abdominal symptoms, such as pain or discomfort, particularly if associated with weight loss or anemia
- Abnormal barium x-ray exam
- Chronic diarrhea, constipation, or a change in bowel habits
- Anemia

Preparation

To obtain the full benefits of the exam, the colon must be clean and free of stool. The patient receives instructions on how to do this. It involves drinking a solution which flushes the colon clean or taking laxatives and enemas. Usually the patient drinks only clear liquids and eats no food for the day before the exam. The physician advises the patient regarding the use of regular medications during that time.

The Procedure

Colonoscopy is usually performed on an outpatient basis. The patient is mildly sedated, the endoscope is inserted through the anus and moved gently around the bends of the colon. If a polyp is encountered, a thin wire snare is used



to lasso it. Electrocautery (electrical heat) is applied to painlessly remove it. Other tests can be performed during colonoscopy, including biopsy to obtain a small tissue specimen for microscopic analysis.

The procedure takes 15 to 30 minutes and is seldom remembered by the sedated patient. A recovery area is available to monitor vital signs until the patient is fully awake. It is normal to experience mild cramping or abdominal pressure following the exam. This usually subsides in an hour or so.

Results

After the exam, the physician explains the findings to the patient and family. If the effects of the sedatives are prolonged, the physician may suggest an appointment at a later date. If a biopsy has been performed or a polyp removed, the results of these are not available for three to seven days.

Benefits

A colonoscopy is performed to identify and/or correct a problem in the colon. The test enables a diagnosis to be made and specific treatment can be given. If a polyp is found during the exam, it can be removed at that time, eliminating the need for a major operation later.

PREPARATION

