

Optimizing Inpatient Colonoscopy Preparation

The Problem:

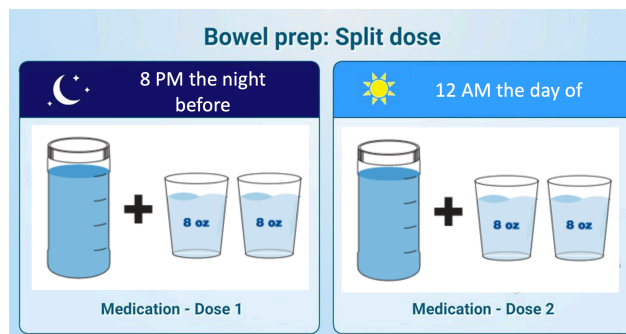
~1/3 of inpatient colonoscopies at MSH are delayed because of inadequate prep

Suboptimal bowel preparation:

- Missed lesions
- Increased length of stay
- Increased likelihood of complications
- Increased need for additional prep and procedures during the same admission

What to order?? The Standard Prep:

- At least 2L of Moviprep given as split dose prep, but **many will need an additional dose**
 - Someone from the primary team should check overnight with nursing regarding the quality of bowel prep and order an additional 1-2L as needed
 - Consider additional dosing for patients who are elderly, bedbound, or have chronic medical conditions like CHF or cirrhosis
- Diet: Clears until midnight prior to procedure. Strictly NPO two hours prior to procedure



How you can help:

- Please sign out explicitly to your night float:
 - E.g. Please check in with nursing by 3AM the quality of patient's prep; if not clear, please order another 1L of prep and check in again around 6AM
 - Write a nursing communication order:
 - "Notify front line provider if the patient develops nausea due to with the bowel prep"
 - Have your night float drop an event note by 6AM with the prep quality
- If patient has procedures scheduled in the morning (e.g. dialysis), please let GI fellow know

A standardized orderset is coming your way soon!

This information is being provided as part of a quality improvement project cosponsored by the departments of medicine and gastroenterology to improve inpatient colonoscopy prep.

For more information, or to get involved, please contact
Chip Bowman-Zamora at chip.bowman-zamora@mountsinai.org