



LEO TREYZON MD

Gastroenterology & Nutrition

Cedars Sinai Medical Office Towers
8631 W. Third Street, Suite 1015-E
Los Angeles, CA 90048

P 310.652.4472
F 310.358.2266
E info@treylonmed.com
W treylonmed.com

CAPSULE INSTRUCTION GUIDE FOR PATIENTS

It is VERY important to let Dr. Treyzon or his assistant know if you have difficulty SWALLOWING pills BEFORE you schedule your capsule procedure

THE DAY PRIOR TO THE CAPSULE PROCEDURE:

1. In the morning, eat a light breakfast.
2. At 12:00 PM, eat lunch.
3. After 12:00 PM, consume clear liquids only (please refer to the page titled “Clear Liquid Diet Choices”).
4. At 6:00 PM, eat soup for dinner (no heavy meals). Examples are broths and purees (no vegetables).
5. At 7:00 PM, mix 1 serving of Miralax with an 8 oz. glass of water. Repeat at 7:30 PM and 8:00 PM for a total of 3 doses of Miralax. You might not have bowel movements, and this is OK.
6. At 9:00 PM, take any evening medications you require.

THE DAY OF THE CAPSULE PROCEDURE:

1. At 7:00 AM, mix another 2 servings of Miralax with 2 glasses of water, and drink it all before you come into the office at 8:30 AM. Do not eat or drink anything else on the morning of your capsule test.
2. Wear loose fitting clothing (sweats, t-shirts, workout suit jacket, etc.) Do not wear a dress.
3. Take your morning medications at 7:00 AM.
4. Arrive at our office at 8:30 AM to be connected, and we will give you the capsule to swallow.
5. You may resume regular activity (i.e. go to work, run errands, etc). The capsule belt recorder will be concealed under a light jacket you can wear. Please avoid strenuous activity.
6. At 10:30 AM, you can start drinking clear liquids and take your usual morning medications.
7. At 12:30 PM, you can have a light lunch and eat throughout the day.
- 8. At 4:30 PM, you must be back at our office to have the recorder removed.**
9. You can resume usual activities when you leave the office. The capsule will be expelled in your stool over the course of a few days. Most people do not feel or see it when it passes. You do not need to recover it from the stool.
10. The doctor will review the 50,000+ pictures over the next 7 days.

It is important that you DO NOT get an MRI scan for the next 10 days without first calling Dr. Treyzon. The capsule pill cannot be inside your body if you have an MRI.

Thank You!

CLEAR LIQUID DIET CHOICES

NO ALCOHOLIC BEVERAGES

Clear liquid allowed:

- Water
- Tea
- Apple juice, white grape juice, lemonade (no pulp)
- Powder juices, such as Kool-Aid, Crystal Light
- Carbonated juices, water or sodas (no dark colors)
- Sports drinks, such as Gatorade, All-Sport, Powerade, etc.
- Chicken broth, bouillon, consommé
- Plain/flavored Jello
- Popsicles
- Hard candies

Clear liquid drink recipes:

- Fruit Fizz – 1 cup clear fruit juice (from list) + ½ cup sparkling water + ½ cup ice. Blend ice and juice until slushy, add sparkling water.
- Frozen Fruit Slush – 1-6 oz can of frozen clear juice concentrate + 4 tbsp sugar + 3 cups crushed ice. Mix all ingredients and blend until smooth.
- Lemon Lime Slushie – juice from two limes and one lemon + 1 cup sparkling water + 1 cup ice + 4 tsp sugar. Blend ice and juice until slushy. Pour into a glass and add sparkling water.
- Homemade IcePops – add juice of your choice (from list) to an ice cube tray, allow to freeze for about 40 minutes, add toothpick or popsicle sticks and freeze completely.

If you experience nausea or vomiting during the prep, try the following:

- Chilling the mixture before consumption
- Sucking on lemon or lime slices
- Adding a flavored powder such as Crystal Light
- Drinking with a straw
- Taking a 15-30 minute break then start drinking again

Consent Form for Capsule Endoscopy

I consent to having capsule endoscopy.

I understand that capsule endoscopy is an endoscopic exam of the small intestine. It is not intended to examine the esophagus, stomach, or colon. It does not replace upper endoscopy or colonoscopy.

I understand that there are risks associated with any endoscopic examination, including the possibility of aspiration, capsule retention (potentially requiring retrieval via endoscopic or surgical removal), bowel obstruction (such an obstruction may require immediate surgery), spontaneous perforation, missed abnormalities (lesions), and misinterpretations of abnormalities (lesions).

I understand that, due to variations in patients' intestinal motility, the capsule may only image part of the small intestine. It is also possible that some images may be lost due to interference, and this may result in the need to repeat the capsule procedure.

I am aware that I should avoid MRI machines during the procedure and until the capsule passes after the exam.

I understand that, in the event that I damage the equipment, I will be responsible for the expense of replacing the damaged equipment.

I understand that images and data obtained from my capsule endoscopy may be used, under confidentiality, for educational purposes in future medical studies. Also the findings might be shared with other expert capsule endoscopists in order to learn from, or help interpret the findings.

I understand that Dr. Treyzon is not managing my medical condition, but merely performing a diagnostic test and making interpretations and suggestions based on the findings. My doctor who referred me for the procedure will be responsible for making treatment decisions.

Dr. Leo Treyzon and/or his assistants **Amie Kim** and **Natalie Bransky** have explained the procedure and its risks to me, along with the alternatives of diagnosis and treatment. I have been allowed to ask questions concerning the planned examination, and my questions have been answered to my satisfaction.

I hereby authorize **Dr. Leo Treyzon** to perform capsule endoscopy.

Patient's Name (please print)

Patient's Signature

Date

In presence of:

Spouse

Companion

Parent

Patient Alone

About Capsule Endoscopy

What is capsule endoscopy?

Capsule endoscopy is a technology that uses a swallowed video capsule to take photographs of the inside of the esophagus, stomach, and small intestine. For capsule endoscopy, the intestines are first cleared of residual food and bacterial debris with the use of laxatives and/or purges very similar to those used before colonoscopy. A large capsule—larger than the largest pill—is swallowed by the patient. The capsule contains one or two video chips (cameras), a light bulb, a battery, and a radio transmitter. As the capsule travels through the esophagus, stomach, and small intestine, it takes photographs rapidly. The photographs are transmitted to a small receiver that is worn on the waist of the patient who is undergoing the capsule endoscopy. At the end of the procedure, the photographs are downloaded from the receiver into a computer, and Dr. Treyzon reviews the images. The capsule is passed by the patient into the toilet and flushed away.

What are the limitations of capsule endoscopy?

While the capsule provides the best means of viewing the inside of the small intestine, there are many inherent limitations and problems with its use. The most important limitation is that the capsule does not allow for therapy. Other problems include:

1. Abnormalities in some areas of the intestine can be missed because of rapid transit of the capsule and blurred, un-interpretable photographs.
2. At times, transit is so slow that the capsule only examines part of the small intestine before the battery runs out.
3. If abnormalities are discovered that require surgical resection or further investigation, it may be difficult to determine where in the small intestine the abnormality is and thereby help direct therapy.
4. If there are narrow areas due to scarring (strictures) or tumors in the small intestine, the capsule can get stuck in the narrow area and cause an obstruction that requires surgical removal of the capsule. (In patients who are suspected of having a stricture, a self-dissolving, dummy capsule is swallowed first. If the dummy capsule sticks, it can be seen on an x-ray of the abdomen and the location of the stricture determined. Because it dissolves with time, however, the obstruction will resolve without surgery, and the real capsule will not be swallowed.)
5. Finally, reviewing the tens of thousands of photographs is very time consuming for the conscientious physician.

What types of diseases can be diagnosed with capsule endoscopy?

Capsule endoscopy continues to improve technically. It has revolutionized diagnosis by providing a sensitive (able to identify subtle abnormalities) and simple (non-invasive) means of examining the inside of the small intestine. Some common examples of small intestine diseases diagnosed by capsule endoscopy include:

1. Angiodysplasias (collections of small blood vessels located just beneath the inner intestinal lining that can bleed intermittently and cause anemia)
2. Small intestinal tumors such as lymphoma, carcinoid tumor, and small intestinal cancer
3. Crohn's Disease of the small intestine