

Colorectal Cancer Awareness Month Free Colonoscopy Application Process

Treatment is based upon our scheduling availability and qualified applicants who:

1. Are 50 years of age or older
2. Do not have medical insurance
3. Are unemployed and/or have income that falls within the U.S. Department of Health & Human Services Poverty Income Guidelines as follows:

**2012 Poverty Guidelines for the
48 Contiguous States and the District of
Columbia**

Persons in family/household	Poverty guideline
1	\$11,170
2	15,130
3	19,090
4	23,050
5	27,010
6	30,970
7	34,930
8	38,890
For families/households with more than 8 persons, add \$3,960 for each additional person.	

If you meet the above minimum requirements, you may apply by providing your:

- Completed and signed application (see attached)
- Most recent pay stub
- Most recent tax return (if unemployed)
- Proof of governmental assistance (if receiving benefits)
- Most recent bank statement

Please return all of your required documents as soon as possible to:

**Stephanie Idzior
Southgate Surgery Center
14050 Dix Toledo Rd., Southgate, MI 48195
(734) 281-0100
(734) 283-4839 fax**



Complete Application

Patient ID# _____

Please print clearly

Last Name		First Name		Middle Initial	Birthdate	
Residence Address			City	State	Zip	Yrs There
Phone Number		Social Security Number		Number of Dependents		Marital Status

Current Employer <i>(Please provide pay stub with application*)</i>		Start Date	Position	Monthly Gross Income \$		
Additional Employer (Yes / No) If yes, please provide monthly income				Additional Employer monthly gross income \$		

Un-Employment per month (Yes /No) \$		Other income type and amount \$		Other income type and amount \$		
Health Insurance (Yes / No)	Insurer's Name & Address		City	State	Zip	Phone Number
Other Assets		Cash on hand or savings \$		Investments \$		
Financial Institution Name: _____ <i>(Please provide a bank statement with application*)</i>						
<p>I certify that the above information is complete and accurate to the best of my knowledge. I have no other financial resources other than the income and assets recorded on this application. Further, I understand that eligibility for this program is contingent upon my good-faith effort to obtain any assistance or insurance coverage for which I may be eligible (i.e., Medicaid, Medicare, private insurance, etc.) If any information I have given proves to be untrue, I understand that the surgery center may re-evaluate my eligibility status and take appropriate action. I further understand that the information I provided here may be sent to a credit reporting agency for a thorough review of my ability to pay for services rendered and the request for verification will show up on my credit report.</p>						
_____ Applicant's Signature				_____ Date		

***Note: You will need to provide your most recent pay stub and bank statement.**

Colorectal Cancer & Colonoscopy FAQs

Colorectal cancer is the second leading cause of death due to cancer in the United States and someone dies from it every 9.3 minutes. If everyone aged 50 years or older had regular screening tests, at least 60% of deaths from colorectal cancer could be avoided.

What is colorectal cancer?

Colorectal cancer is cancer of the colon or rectum. The colon is the large intestine and the rectum is the passageway connecting the colon and the anus, which are both part of the digestive system. In most cases, colon and rectal cancers grow slowly over a period of several years. Most cases begin with a polyp (growth) and over time it can become cancerous. Removing the polyp early is important and may keep it from maturing into cancer.

What are the symptoms of colorectal cancer?

In the beginning stages, most people experience no symptoms, but may still have polyps or colorectal cancer and not know it. Symptoms you may experience are:

- Blood in the stool
- Stomach aches, pains, or cramps that don't go away
- Losing weight and you don't know why
- Iron-deficiency anemia
- Change in bowel habits

Who is at risk for colorectal cancer?

- Adults 50 years of age and older
- People with family history of bowel disease, polyps, colorectal cancer
- African Americans
- People with a poor diet and/or low physical activity
- People who smoke and/or drink alcohol excessively

How is colorectal cancer detected?

A colonoscopy is an excellent way to find polyps or colorectal cancer. The doctor uses a short, thin, flexible, lighted tube to search the entire colon and rectum for polyps or cancer. If the doctor sees any polyps or growths, he/she can remove the polyps or take a piece of the growth and test it for cancer. A colonoscopy is an outpatient procedure and the patient is given a mild sedation so there is no discomfort during the procedure.

The American College of Gastroenterology recommends a colonoscopy screening beginning at age 50. African Americans and those with family history of colon cancer should begin screening at age 45 or earlier.

Is a colonoscopy covered by insurance?

Yes, the Affordable Care Act requires new private insurers to cover preventive services with no co-payments and with preventive services being exempt from deductibles. In January 2011, Medicare will have no co-payments as well. Check with your plan to learn more. Southgate Surgery Center accepts most insurance and is dedicated to early detection and prevention.

Why is bowel prep important before a colonoscopy?

It is extremely important that your colon be thoroughly cleaned before your colonoscopy so your doctor can see any abnormalities during the procedure. Cleansing the colon before a colonoscopy is called bowel preparation, or "prep." It involves taking medication that causes diarrhea for the purpose of emptying the colon. The medication is taken orally and comes in liquid or tablet form. You will also need to change your diet for a day or two before the colonoscopy. Many patients feel that the bowel prep is the most difficult part of a colonoscopy.

What are the types of bowel prep and how is my prep determined?

Several types of bowel prep medications are available. Your doctor will prescribe the type that is best for you. Your medical condition is the most important factor in deciding which type of bowel prep is prescribed. Tell your doctor if you:

- Are pregnant or breast feeding
- Have a history of bowel obstruction
- Have high blood pressure
- Have any heart, kidney or liver disease now or in the past
- Have allergies to medicines
- Have had difficulty with a bowel prep in the past

Other factors in determining the type of prep are: the time of the colonoscopy appointment; whether the prep is covered by your medical insurance; individual preferences such taste and amount of medication. If taste is important, our patients tell us that the Miralax/Gatorade prep is flavorless and most tolerable. Be sure to discuss the options available to you with your doctor.

What bowel preparation steps are involved before the colonoscopy?

You will need to carefully follow your doctor's instructions about the exact dose and timing of your prep. In general, here is what you can expect:

- Changing your diet two days before your colonoscopy
- Limiting your diet to clear broths, beverages and gelatin desserts
- Not consuming dairy products or non-dairy creamers
- Not consuming red or purple beverages, gelatins and popsicles
- Drinking more fluids than you usually do to avoid dehydration
- To follow carefully all the steps your doctor prescribes
- To tell your doctor what medications you are taking

What medications interfere with bowel prep and/or colonoscopy?

Be sure to talk with your doctor about what you can and cannot take. Most medications can be continued, but these medications may interfere:

- Aspirin products
- Arthritis medications
- Anticoagulants (blood thinners such as warfarin or heparin)
- Clopidogrel
- Insulin
- Iron products

What are the common side effects of bowel prep?

The type and severity of side effects differ among patients. They also vary with the product used. Some patients have nausea, vomiting, bloating (swelling in the abdomen) or abdominal pain. A prep can cause kidney failure, heart failure or seizures, but this is rare. Your doctor will explain the possible side effects of the prep selected for you.

What if I forget to take the medication, when is it too late to finish the prep?

Call us and ask what to do if you are not able to complete the bowel prep as advised.

IMPORTANT REMINDER: This information is intended only to provide general guidance. It does not provide definitive medical advice. It is very important that you consult your doctor about your specific condition.

Source: [American Society for Gastrointestinal Endoscopy](#)