polyethylene glycol/electrolyte
(po-lee-eth-e-len glye koh-lek e-lek-tro-lite)
Colyte, GoLYTELY, Klean-Prep, MoviPrep, NuLytely, Suclear, TriLyte

Indications

Action
Polyethylene glycol (PEG) in solution acts as an osmotic agent, drawing water into the lumen of the GI tract. Therapeutic Effects: Evacuation of the GI tract without water or electrolyte imbalance.

Pharmacokinetics

TIME/ACTION PROFILE
ROUTE ONSET PEAK DURATION
PO 1 hr unknown 4 hr

Contraindications/Precautions
Contraindicated in: GI obstruction; Bowel perforation; Gastric retention; Toxic colitis; Toxic megacolon. Use Cautiously in: Patients with absent or diminished gag reflex; History of ulcerative colitis (risk of hypoglycemia, dehydration, and hypokalemia); Barium enema using double-contrast technique (may not allow proper barium coating of mucosa). Severe diverticular disease; Diverticular pain of uncertain cause; Particularly if accompanied by fever; Geri: May be more sensitive to effects; Pedi: Children (safety not established; children <2 yr more prone to hypoglycemia, dehydration, and hypokalemia).

Adverse Reactions/Side Effects

Interactions
Drug-Drug: Interference with the absorption of orally administered medications by decreasing transit time (do not administer within 1 hr of start of therapy).

Route/Dosage
PO (Adults): 240 mL q 10 min (up to 4 L) until fecal discharge appears clear and has no solid material; may be given through NG tube at 20–30 mL/min (up to 4 L). GoLYTELY—On evening before colonoscopy, give 240 mL q 15 min for 1 hr followed by 480 mL of clear liquid before going to bed; on morning of colonoscopy, give 240 mL q 15 min for 1 hr followed by 480 mL of clear liquid at least 2 hr before test (alternative regimen: 240 mL q 15 min for 1 hr at least 3 hr before colonoscopy, then 1.5 hr later, give 240 mL q 15 min for 1 hr, may drink clear fluids up to 1 hr before test); alternate—On evening before colonoscopy, dilute 8–oz oral solution by pouring entire contents into 16–oz mixing container and then filling container with cool water to fill line. Drink entire container within 20 min. Refill container with 480 mL of water and drink every 20 min. Refill container with 480 mL of water and drink over next 2 hr. Refill container with 480 mL of water and drink at least 3 hr before test; on morning of colonoscopy, dissolve powder of Dose 2 by adding water to fill line. Drink 480 mL every 20 min completing the dose ≥2 hr before test. Suclear—On evening before colonoscopy, dilute 6–oz oral solution by pouring entire contents into 16–oz mixing container and then filling container with cool water to fill line. Drink entire container within 20 min. Refill container with 480 mL of water and drink every 20 min, completing the dose ≥2 hr before test. PO (Children ≥6 mo): 25 mL/kg/hr until fecal discharge is clear and has no solid material; may also be given through NG tube (unlabeled).

NURSING IMPLICATIONS
Assessment
• Assess order, consistency, and amount of stool produced.
• Monitor semiconscious or unconscious patients closely for regurgitation when administering via NG tube.

Potential Nursing Diagnoses
Diverticulitis (Side Effects)

Nursing Considerations
Double-contrast technique (may not allow proper barium coating of mucosa). Severe diverticular disease; Diverticular pain of uncertain cause; Particularly if accompanied by fever; Geri: May be more sensitive to effects; Pedi: Children (safety not established; children <2 yr more prone to hypoglycemia, dehydration, and hypokalemia).
Implementation

● Do not add extra flavorings or additional ingredients to solution prior to administra-

    tion.

● Avoid solid food and milk within 1–2 hr of administration, but should be ade-

    quately hydrated prior to, during, and after administration.

● Patient should be allowed only clear liquids after administration.

● May be administered with the meaning of the examination as long as time is allotted
to drink solution (5 hr) and evacuate bowel (1 additional hr). For barium enema,
    administration should occur during the morning (6 AM) prior to exam to allow proper mucosal
    coating by barium.

● PO: Solution may be reconstituted with tap water. Shake vigorously to prevent clumps

    dissolving.

● Follow 2 dose regimen for Suclear.

● May be administered via NG tube at a rate of 20–30 mL/min.

Patient/Family Teaching

● Instruct patient to drink 240 mL every 10 min until 4 L have been consumed or
    fecal discharge is clear and free of solid matter. Rapidly drinking each 240 mL is
    preferred over drinking small amounts continuously.

● Advise patient to avoid alcohol during prep.

Evaluation/Desired Outcomes

● Diarrhea, which cleanses the bowel within 4 hr. The first bowel movement usually
    occurs within 1 hr of administration.

Why was this drug prescribed for your patient?