
COLONOSCOPY PREP INSTRUCTION FOR ALL 3 PREPS

*** TWO DAYS PRIOR TO THE PROCEDURE DATE YOU WILL TAKE 2 DULCOLAX TABLETS AT 8 AM, THESE CAN BE FOUND OVER THE COUNTER, If you cannot tolerate Dulcolax please use a 10oz bottle of mag citrate in its place***

THE DAY BEFORE THE PROCEDURE YOU WILL BE ON A CLEAR LIQUID DIET, YOU MAY HAVE BROTHS, GELATIN, CLEAR FRUIT JUICE, ICE POPS, CARBONATED BEVERAGES, SPORT DRINKS, TEA AND COFFEE WITH OUT CREAMER, SUGAR CAN BE USED., NO DAIRY PRODUCTS, NO ALCOHOL. ***NO PURPLE OR REDS***

SU-PREP (NOT FOR RENAL FAILURE)

WILL COME WITH (2) 6 OZ BOTTLES OF MEDICATION AND A MIXING CONTAINER. *OUR INSTRUCTIONS MAY BE DIFFERENT FROM THE BOX*

STEP 1- 5 PM – POUR ONE BOTTLE OF SOLUTION IN THE MIXING CONTAINER, ADD LIQUID, MIX AND DRINK ONCE FINISHED YOU MUST DRINK 32 OZ OF WATER, YOU HAVE 2 HOURS TO COMPLETE

STEP 2- **SIX HOURS HOURS** PRIOR TO THE TIME GIVEN FOR THE PROCEDURE YOU WILL OPEN THE SECOND BOTTLE AND REPEAT, STEP 1. **NOTHING ELSE BY MOUTH ONCE COMPLETED**

MAG CITRATE (NOT FOR RENAL FAILURE)

PURCHASE THREE 10 oz BOTTLE OF MAG CITRATE THIS IS FOUND OVER THE COUNTER

*AT 12 PM THE DAY BEFORE DRINK ONE 10oz BOTTLE OF MAG CITRATE, FOLLOWED BY 12oz OF WATER OVER A COURSE OF 2 HOURS

*2 PM TAKE 2 DUCLOLAX TABLETS. (THE DAY BEFORE)

*6 PM DRINK THE SECOND BOTTLE OF MAG CITRATE, FOLLOWED BY 12oz OF WATER OVER A COURSE OF TWO HOURS

*SIX HOURS PRIOR TO THE PROCEDURE TIME DRINK THE LAST BOTTLE OF MAG CITRATE FOLLOWED BY 12 oz OF WATER OVER A COURSE OF 2 HOURS **NOTHING ELSE BY MOUTH ONCE COMPLETED**

MIRA-LAX

PURCHASE 510 GRAMS/ 17.9oz OF MIRA-LAX THIS IS FOUND OVER THE COUNTER

* 5:30 PM TAKE TWO MORE DULCOLAX TABLETS, MIX THE 510 GRAMS OF MIRA-LAX INTO 96 oz OF CLEAR LIQUID, MIX UNTIL FULLY DISSOLVED, SPLIT THE MIXTURE IN HALF REFRIGERATE HALF

* 6 PM SLOWLY DRINK THE FIRST HALF OF THE SOLUTION YOU HAVE 2 HOURS TO COMPLETE THE REGIMEN. SIX HOURS PRIOR TO THE PROCEDURE TIME YOU WILL BEGIN THE SECOND HALF OF SOLUTION. ONCE COMPLETED NOTHING ELSE BY MOUTH.

**** THINGS TO KNOW BEFORE THE COLONOSCOPY****

SOME SIDE EFFECTS MAY INCLUDE BLOATING, STOMACH CRAMPS, NAUSEA, VOMITING, CHILLS, HEADACHE AND IRRITATION

* YOU MAY HAVE YOUR FIRST BOWEL MOVEMENT ABOUT AN HOUR AFTER YOU START THE REGIMEN , YOU MAY ALSO CONTINUE TO HAVE LOOSE STOOLS UP TO 2 HOURS AFTER YOU HAVE COMPLETED THE REGIMEN.*

***DIABETICS:** TAKE ORAL MEDICATIONS IN THE MORNING THE DAY BEFORE THE PROCEDURE AS YOU NORMALLY WOULD, THE EVENING OF THE PROCEDURE YOU WILL SKIP THE EVENING DOSE*

* **INSULIN DEPENDENT** - ONLY TAKE HALF OF THE INSULIN DOSE THAT YOU NORMALLY TAKE THE DAY BEFORE NO INSULIN THE MORNING OF*

* **SLEEP APNEA** - YOU MUST BRING YOUR SLEEP APNEA MACHINE WITH YOU THE DAY OF THE PROCEDURE*

* YOU WILL BE CALLED THE DAY BEFORE FOR THE TIME OF THE PROCEDURE IF SCHEDULED ON A MONDAY YOU WILL BE CALLED FRIDAY*

***NO** ASPIRIN, MOTRIN, ALEVE OR IBUPROFEN 5 DAYS PRIOR TO PROCEDURE* (TYLENOL IS OKAY)

***NO** BLOOD THINNERS 5-7 DAYS PRIOR TO PROCEDURE* (COUMADIN, WARARIN, PLAVIX, PLETAL, AGGRENOL)

* 5 DAYS PRIOR TO THE PROCEDURE **NO** NUTS,SEEDS, CORN, POPCORN, OR PEANUTS*

* YOU ARE REQUIRED TO HAVE SOMEONE DRIVE AND PICK YOU UP, YOU MAY NOT DRIVE YOUR SELF DRINKING THROUGH A STRAW, MAY BE EASIER

PURCHASE SMALL CONTAINER OF ALCOHOL FREE BABY WIPES TO KEEP THE RECTAL AREA CLEAN AND DRY AFTER EACH BOWEL MOVEMENT

YOU MAY USE OVER THE COUNTER HYDROCORTISONE CREAMS AND HEMORRHOID TREATMENTS AS NECESSARY.

SITZ BATH MAY BE NECESSARY IF HEMORRHOIDS BECOME IRRITATED

NOTHING ELSE BY MOUTH ONCE COMPLETED