

COLONOSCOPY (For Patients With Severe Constipation) **PREP PACKET**

Procedure Date: _____

Procedure Location:

Arrival Time: _____ am/pm

Dr. Ranvir Singh

Dr. Stephen Rashbaum

Emory Johns Creek Outpatient

Procedure Time: _____ am/pm

Northside Forsyth Outpatient

You will be charged \$250 if you no show, cancel/reschedule within 48 hours. 770-227-2222

Johns Creek Endoscopy Suite

BOWEL PREP:

1. We have forwarded a prescription for **Suprep Bowel Prep** to your pharmacy. In addition, purchase Dulcolax Tablets and 1 Bottle of Magnesium Citrate..
2. You will need to be on a strict **CLEAR LIQUID DIET ONLY**, the entire day *prior* to your scheduled procedure.
3. At **4:00 pm**, on the day *prior* to your scheduled procedure, you will take 2 Dulcolax Tablets as directed.
4. At **6:00 pm** on the day *prior* to your scheduled procedure, you will initiate mixing and drinking your first round of the **Suprep**.

Pour one 6 oz bottle of **Suprep** into the mixing container supplied by the pharmacy.
Add cool water to the 16 oz fill line on the mixing container. Drink all of the fluid mixture. Next, drink two additional 16 oz containers of clear liquid over the next 1 hour
5. At **7:00 pm**, you will then consume the full bottle of Magnesium Citrate.

6. 5 1/2 hours *prior* to your scheduled procedure at _____ am, you will repeat step 4.
7. You may continue a clear liquid diet until you initiate step 4. **YOU MAY HAVE NOTHING BY MOUTH** for 4 hours prior to your procedure.
8. **NOTE: YOU MAY HAVE NOTHING TO EAT, SMOKE or CHEW** after midnight. You may only have your clear liquids with your second dose of Suprep.

DRIVING INSTRUCTIONS:

Please arrange for a responsible adult to drive you to and from the facility. They must plan on staying at the facility during the procedure. Your procedure may be cancelled should you arrive without a driver.

It is best if you can have a responsible adult with you for at least 8-hours following your procedure.

You will not be permitted to drive for 24-hours after the procedure due to anesthesia. You should also refrain from making any important and financial decisions during this time.

MEDICATIONS:

-Take your **Heart & Blood Pressure** medications as instructed unless your doctor instructs you otherwise.

-If you have **Diabetes**, please follow the instructions below:

*Do not take your diabetes **pills** the morning of the procedure. Feel free to bring them with you to take following the procedure.

*If you take **Regular Insulin**, do not take it the morning of your scheduled procedure. Please bring it with you to take following your procedure.

*If you take NPH, or Lantus-type Insulin, take ½ of your regular dose the morning of your scheduled procedure.

-Do NOT take any of the following Medications:

*Coumadin-**Stop 3 Days Prior**

*Plavix, Aspirin, Ibuprofen, Iron and Multivitamins-**Stop 7 Days Prior**

Please remove all jewelry prior to your procedure.