



COLONOSCOPY (For Patients With Constipation) MoviPrep PACKET

Procedure Date: _____

Arrival Time: _____ am/pm

Procedure Time: _____ am/pm

You will be charged \$250 if you no show, cancel/reschedule without 48 hours notice. (770) 227-2222

Ordering Physician

Dr. Ranvir Singh
Dr. Stephen Rashbaum
Dr. Long Nguyen
Dr. Nitin Parikh
Dr. Ruth Montalvo
Dr. Jae Kim

Procedure Location: (CIRCLE ONE)

Digestive Care Endoscopy (678) 208-2131
11315 Johns Creek Pkwy Ste 420, Johns Creek
Emory Johns Creek Outpatient (678) 474-8100
6325 Hospital Parkway, Johns Creek
Northside Forsyth Outpatient (770) 844-3200
1200 Northside Forsyth Drive, Cumming

BOWEL PREP:

1. We have forwarded a prescription for **MoviPrep** to your pharmacy. In addition, purchase Dulcolax Tablets and 1 Bottle of Magnesium Citrate.
2. Starting the morning of _____ you will need to be on a **STRICT CLEAR LIQUID DIET** the entire day.
3. At **4:00 pm**, on _____, you will take 2 Dulcolax Tablets as directed.
4. At **6:00 pm** _____, you will initiate mixing and drinking your first dose of Moviprep.
Take 1 packet of Powder A and 1 packet of Powder B and place them in the clear 32 oz container supplied by the pharmacy. Mix the powders with 32 oz of a sweet clear liquid. Continue drinking the mixture until gone.
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 _____, you will repeat step 4 as above.

7. You may continue **CLEAR LIQUIDS** with your second dose of MoviPrep. **YOU MAY HAVE NOTHING BY MOUTH 4 HOURS PRIOR TO YOUR PROCEDURE. STOP @ _____.**

8. **NOTE: YOU MAY HAVE NOTHING TO SMOKE or CHEW AFTER MIDNIGHT.**

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.

**** Make sure to wear warm socks, as the procedure area tends to be cool.**

****Do not wear any jewelry or contacts to the procedure.**

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:

*Xarelto, Eliquis, Pradaxa – **Stop 2 Days Prior**

*Warfarin -**Stop 3 Days prior**

*Clopidogrel, Effient, Brilinta, Aspirin 325mg, Ibuprofen – **Stop 5 days prior.**

*Iron, Multivitamins, and Fish Oil – **Stop 7 days prior**