

FLEX SIGMOIDOSCOPE ORDER & PREP PACKET

Procedure Date: _____

Arrival Time: _____ am/pm

Estimated 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. **Prior to the procedure, you will need to purchase :**
1 Bottle Of Mag Citrate(Any Flavor)
2 Fleet Enemas
2. You will need to be on a **CLEAR LIQUID DIET**, the entire day **prior** to your scheduled procedure.
(An example of a CLEAR DIET is enclosed)
3. At **5:00 pm** on _____ to your scheduled procedure, you will need to drink your bottle of the **Mag Citrate(1 Full Bottle)**
4. At **8:00 pm** on _____ to your scheduled procedure, you will use 1 Fleet Enema(As Directed)
5. At **6:00 am** _____, you will use 1 Fleet Enema(As Directed)
6. You may have nothing by mouth 4 hours before your procedure. Stop @ _____

7. You can continue Clear Liquids until midnight. But can have **NOTHING TO EAT, DRINK, SMOKE or CHEW** after midnight!

INSTRUCTIONS:

Please plan to be with us for a maximum of 2-hours.

As long as you are **NOT** having anesthesia, you can drive yourself to and from the exam.

But, if you are choosing to have this procedure done with anesthesia, you will be **required** to have an adult with you during the exam and they will be responsible for driving you home. Should you show up without a driver, it is the policy of the hospital to cancel your exam.

- Remember to bring your insurance card and driver's license to the facility for billing purposes.

****Make sure to bring warm socks due to the procedure area being cool.**

****Please do not wear contacts or jewelry.**

MEDICATIONS:

1. Take your **Heart & Blood Pressure** medications as instructed, unless your doctor instructs you otherwise.
2. If you have **Diabetes**, please follow the below instructions:

*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:

- *Xarelto, Eliquis, Pradaxa- Stop 2 Days Prior
- *Warfarin- Stop 3 Days Prior
- *Clopidogrel, Effient, Brilinta, Aspirin 325mg,
- *Ibuprofen – Stop 5 Days prior
- *Iron, Multivitamins Fish Oil -Stop 7 Days Prior