

Gastroenterology Specialists

22 Westfield Avenue Ansonia, CT 06401 (203) 736-9919

> Jeffrey Dreznick MD Sarah Olivier MD Harold Schwartz MD Jonathan Simon MD

SUTAB COLONOSCOPY PREP

This procedure will be performed at Griffin Hospital, 130 Division St., Derby, CT

PLEASE BRING A CURRENT LIST OF MEDICATIONS

Patient Name	
Report to the Outpatient Registration Desk on:	
Date	Time

- You must maintain a clear liquid diet all day starting the day before the procedure.
- Non-steroidal agents (Advil-Motrin-Ibuprofen) must be stopped 1 day prior to procedure.
- You are not allowed to drive. You are not allowed to go home via taxi by yourself.
- You must be accompanied by a friend or relative to assist you home.
- You may take your regular blood pressure/ heart/ thyroid/ seizure medication with a small sip of water at least 2 hours prior to your procedure unless instructed otherwise.
- Nothing to eat or drink three (3) hours before your procedure.
- If on blood thinners (Coumadin, Plavix, etc.) stop on .

Please bring these instructions to the G.I. Endoscopy Suite on the day of the procedure, along with a list of all your medications.

Please be aware that cancellation of this procedure will cause a delay in rescheduling.

If you have any questions, please do not hesitate to call our office at (203) 736-9919

THE DAY BEFORE THE PROCEDURE:

- Non-steroidal agents (Advil-Motrin-Ibuprofen) must be stopped 1 day prior to procedure. It is safe to take Tylenol (acetaminophen) as a pain reliever. Consult with a physician on all other medications.
- Remain on a clear liquid diet. Solid foods, alcohol, milk or milk products are **not** allowed. Nothing red or purple in color. **It is very important to stay hydrated!**

CLEAR LIQUIDS YOU MAY HAVE INCLUDE:

Black coffee (no milk or cream)
Tea (no milk or cream)
Chicken/beef/veggie broth
Gatorade/Powerade
Crystal Light
Water
Clear fru

r Clear fruit juices only – no orange juice

Any type of soda

Snapple

Popsicles

Italian Ice

Jell-O

THE NIGHT BEFORE THE PROCEDURE:

- At _____ take one bottle of 12 tablets followed by 16 ounces of water. All tablets must be taken within 30 minutes.
- Continue to drink clear fluids until bedtime.
- If you have severe discomfort or distention (bloating), stop drinking the solution for a while or wait longer between drinking until the discomfort goes away.
- **Stay hydrated!** It's important that you drink clear liquids before, during and after your prep.

THE DAY OF THE PROCEDURE:

- At ______- take the remaining bottle of 12 tablets followed by 16 ounces of water. All tablets must be taken within 60 minutes.
- Do not drink or eat anything after taking the tablets.
- You may take your regular blood pressure/heart/thyroid/seizure medication with a small sip of water at least 3 hours prior to your procedure unless instructed otherwise.
- You **must** be accompanied by a friend or relative to drive and/or assist you home.

TO RESCHEDULE:

As our patient we are committed to your health, and have reserved this procedure time exclusively for you. Please give us 48-hours notice if you wish to change this appointment. If you have any questions regarding the above instructions, please do not hesitate to contact our office at (203) 736-9919.