COLONOSCOPY PREPARATION INSTRUCTIONS - Miralax PM Prep

| Patient Name: | | Doctor: |
|--------------------------|-----------------------------|---|
| Procedure Date: | Check-in at | a.m./p.m. with procedure to follow one hour later |
| Facility where procedure | e is to be performed: South | east Valley Endoscopy Center |

- PURCHASE FROM THE DRUG STORE (OTC/NO PRESCRIPTION NEEDED)
 - Ducolax (Bisacodyl) 5mg tablets
 - MiraLAX Powder 8.3 oz (238 gm) bottle
 - 64 oz of Gatorade or water. (may also use sugar free Crystal Light)
 - If Gatorade is used please choose a light colored or clear flavor no red, purple or blue.
- FOR THE ENTIRE DAY BEFORE YOUR TEST, FOLLOW A CLEAR LIQUID DIET.

 NO SOLID FOODS MAY BE EATEN! We recommend that you drink at least 32 ounces of clear fluids before beginning the prep. Clear liquids include water, pulp-free juice, tea, coffee, soda, clear broth, Jell-O (no red or purple), popsicles (no red or purple) and Gatorade (no red or purple). Please do not consume milk, milk products, non-dairy creamer, red or purple products or alcoholic beverages.
- NOTHING BY MOUTH 4 HOURS PRIOR TO YOUR CHECK-IN TIME THIS INCLUDES
 WATER, MEDICATIONS, GUM AND MINTS. You may continue to drink clear liquids up to four hours prior to your check-in time.
- WHEN TO TAKE THE LAXATIVE SOLUTION:
 - At 1:00p.m. the day before your colonoscopy, swallow the 4 Ducolax tablets.
 - At 3:00 p.m. the day before your colonoscopy, mix the bottle of MiraLAX powder into the 64 oz of Gatorade, water or Crystal Light. Shake until the powder is dissolved. Drink the 64 oz of solution leisurely over approximately 4 hours. You may drink the solution a little slower if you become nauseated.
 - After finishing the prep solution continue to drink plenty of approved fluids <u>up</u> <u>until 4 hours</u> prior to your schedule appointment to keep hydrated.

REMINDER: Nothing by mouth 4 hours prior to your check-in time.

• Failure to follow these instructions could result in your procedure being postponed or cancelled. This is for your safety and to prevent an increased risk of pulmonary aspiration due insufficient time to allow stomach contents to be empty.

* PLEASE READ BACK AND FRONT OF THIS INSTRUCTION SHEET ONE WEEK PRIOR TO YOUR PROCEDURE *

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MEDICATION INSTRUCTIONS:

- Stop taking the following medications FIVE (5) DAYS before your procedure, unless directed otherwise by your healthcare provider:
 - o Supplements such as iron and vitamin E. Multivitamins may be continued.
 - Anti-inflammatory medications such as ibuprofen (Advil, Motrin), naproxen (Aleve, Anaprox, Naprosyn), diclofenac (Arthrotec, Voltaren, Cataflam), oxaprozin (Daypro), piroxicam (Feldene), indomethacin (Indocin), ketoprofen, ketorolac, etodolac (Lodine), meloxicam (Mobic), nabumetone (Relafen), salsalate, sulindac. Tylenol is fine to take if you have discomfort.
 - Medications to thin the blood such as warfarin (Coumadin, Jantoven), clopidogrel (Plavix), ticlopidine (Ticlid), dipyridamole (Persantine, Aggrenox), anagrelide (Agrylin), cilostazol (Pletal), Effient (prasugrel), Xarelto (rivaroxaban) unless specified otherwise.
 - O <u>Pradaxa</u> is generally stopped 1-5 days prior to a procedure, depending on kidney function. Please discuss with the prescribing physician when this medication should be held prior to your procedure.

• DIABETIC MEDICATIONS:

- o On the MORNING OF YOUR PREP DAY, take half of your usual diabetic medications.
- o On the EVENING OF YOUR PREP DAY, do not take any diabetic medications.
- o On the MORNING OF YOUR PROCEDURE DAY, do not take any diabetic medications.
- OTHER HEART MEDICATIONS (such as blood pressure medications) should be taken on the day of your procedure with a <u>small sip</u> of water. Medications must be taken <u>at least two hours prior to your check-in time</u> to allow the stomach to empty prior to your procedure.
- Please bring any **INHALERS** that you use with you to your procedure.
- **ASPIRIN THERAPY:** It is okay to continue aspirin 81mg or 325mg daily the week prior to your colonoscopy.

If you have questions regarding a medication not listed above, please contact our office at least one week prior to the colonoscopy.

REMINDER: Nothing by mouth 4 hours before your check-in time