

## Instructions for Colonoscopy – 2 Day Prep

On the day of your procedure please bring photo ID and a list of ALL your medications and dosages.

Due to unexpected emergencies, your procedure time cannot be guaranteed. Please contact your insurance company prior to your procedure to understand your responsibility for any co-payment and/or deductible. Note: This is a hospital-based Endoscopy Unit.

|   | · · · · · · · · · · · · · · · · · · ·   | al, 593 Eddy St., Providence - Main Building, 9 <sup>th</sup> Floor, 9B Endoscopy Unit Miriam Hospital, 164 Summit Ave., Providence - 1 <sup>st</sup> Floor, Endoscopy Unit |
|---|---|---|
| Date:   | Appointment Tim   | ne: <b>Arrival Time:</b>  |
|   |   |   |
| <u>Important</u>  |   |   |
| <ul> <li>Do not store you should preparation</li> <li>A responsion the day accompan</li> <li>Please do Important: Notify</li> </ul> | d take the pill in the morning with your<br>on may interfere with absorption of the<br>ible adult must be available to come in<br>y of your procedure. You must have so<br>lied by a responsible adult.<br>not wear perfumes or body lotions on | tions for diabetes (oral or injectable) and/or anticoagulants ("blood thinners")  |
|   | <mark>'harmacy</mark> (1) 10 ounce bottle of Magn<br>ounce bottle of Gatorade. <b>(DO NOT ge</b>  | esium Citrate (Lemon or Lime only), (4) Dulcolax tablets, (1) 238 gram bottle of t Red, Blue or Purple Gatorade.)   |
| Two Days Before   | Colonoscopy On  | (date)  |
| Eat normally, but A   | <b>VOID</b> all popcorn, nuts, and seeds such   | as quinoa, sesame seeds, and whole flax seeds.  |
| In the Evening, drin  | nk one bottle of Magnesium Citrate (10  | ounces) and immediately after that drink 2 to 3 eight ounce glasses of clear  |
| liquid. Clear liquids   | are those you can "see through". Exam   | nples of clear liquids include:   |
|   | ✓ Water   |   |
|   | ✓ Strained fruit juice without the  | pulp  |
|   | ✓ Plain coffee and tea (without m   |   |
|   | ✓ Clear broth or bouillon   | ink of creatily   |
|   | ✓ 7 UP, Sprite and Ginger Ale   |   |
|   | · · · · · · · · · · · · · · · · · · ·   | and Draval Matery (Assaid and Johnson discounts)  |
|   | ·   | and Propel Water) (Avoid red, blue and purple)  |
|   | ✓ Kool-Aid or other fruit flavored  |   |
|   | <ul> <li>✓ Plain Jell-O without added fruit</li> <li>✓ Popsicles (Avoid red, blue and p</li> </ul>  | or toppings (Avoid red, blue and purple)  |
|   |   |   |
| Day Before Colon  |   | (date)  |
|   |   | plain or vanilla yogurt, 2 slices of dry or buttered toast, coffee or tea (with a little  |
| cream or milk) and  |   |   |
|   | rt on a clear liquid diet. Clear liquids ar   |   |
| N   | IOTE: CLEAR LIQUIDS ONLY. No DAIR'  | Y. No LIQUIDS that are red, blue or purple.   |
| At 3:00 p.m. Take   | 4 Dulcolax tablets.   |   |
| At 4:00 p.m. Mix th   | he 238 gram bottle of Miralax in 64 oun   | ces of Gatorade. Shake well until all of the Miralax powder is dissolved.   |
| At 5:00 p.m. Drink  | an 8 ounce glass of the Gatorade and N  | Airalax mixture every 20-30 minutes until it is all gone.   |
|   | inue drinking clear fluids until bedtime.   |   |
|   | are allowed to have clear liquids up until  | 4 hours prior to your procedure.  |
| Day of Colonosco  | onv On  | (date)  |
|   |   | (date)<br>prior to your arrival time, then nothing by mouth until after the procedure, unless   |
|   |   | Medications may be taken with sips of water on your regular schedule until 4  |

hours before your arrival time. Diabetic patients: please check your blood sugar level before your procedure.