

Patient: _____ Date of Procedure: _____

Procedure: Flexible Sigmoidoscopy _____ Arrival time: _____
(will call day before with exact time)

Place: The Center for Digestive Wellness, 10461 Wallace Alley St., Kingsport, TN 37663 (**Near Airport**)

IF YOU HAVE NOT HEARD FROM US

by 2:00 p.m. the day before your procedure, please call our office for your arrival time.

You will need to receive specific instructions:

1. Follow the attached ***Low Residue Diet*** (given as a separate sheet).
2. If you are a diabetic taking insulin or oral medications for diabetes, or
3. If you are taking a blood thinner (ie. Coumadin).
4. You may take all other medicines unless otherwise advised by Dr. Fenyves or Dr. Fry or our Nurse Practitioner.
5. Notify the office if you develop a severe cold, fever, or other severe illness.

2 HOURS BEFORE ARRIVING FOR YOUR PROCEDURE, you will need to drink a 10 oz. bottle of Magnesium Citrate (may be purchased over the counter at pharmacy).

Day of Procedure:

_____ Date

1. You may drink clear liquids up to 3 hours before your procedure. ***DO NOT EAT.***
2. If you are taking heart, seizure, or anxiety medications, please be sure to take them before your procedure. Bring all medicine bottles with you, including diabetic medications and inhalers.
3. Do not take oral diabetic medications or insulin on the morning of your procedure.
4. You will be administered IV sedation. Please come accompanied by a responsible driver who can drive you home. You will ***NOT*** be allowed to take public transportation or to drive your own car.
5. Please refrain from smoking, do not wear lipstick or jewelry, and bring a pair of footies or slippers for your comfort.
6. We anticipate your stay with us to be approximately 2 to 4 hours. If you are scheduled at the hospital, it could be significantly longer.

The hard part is over once you see us!

Providing you with the quality care we expect for our own family.