

*** NOTE: Not to be used for Heart/Kidney failure patients.**

Patient: _____ Date of Procedure: _____

Procedure: Colonoscopy _____ 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.

Five Days Before Procedure: _____
Date

1. Do not take Metamucil, Peridium, Citrucel, or any other bulk laxative.
2. Do not take iron pills or iron preparations (including multivitamins with iron).
3. Do not take aspirin, ibuprofen, Advil, Aleve, or arthritis medications.
4. You may use Tylenol and extra strength Tylenol.
5. Do not take any blood thinners, such as Coumadin, Warfarin, or aspirin, unless advised.
6. You may take all other medicines unless otherwise advised by Dr. Fenyves or Dr. Fry or our Nurse Practitioner.

PLEASE NOTE that during your prep, you may experience some rectal irritation which can be decreased by applying ***petroleum jelly (Vaseline)*** to your rectum before and after bowel movements, along with the use of adult wet wipes.

Two Days Before Procedure: _____
Date

After your evening meal, drink one (1) 10-oz. bottle of ***Magnesium Citrate***. (no prescription required—may purchase at pharmacy)

Day Before Procedure: _____

Date

1. You may have clear liquids all day. Examples: water, coffee (without milk), tea, carbonated beverages, apple juice, white grape juice, Jell-O, fruit flavored and powdered drinks, clear broth, bouillon, hard candy and Popsicles. **AVOID RED DYES.**

NOTE: Drink 8 oz. clear liquid every hour

2. If you are a **DIABETIC**, only take half of your normal insulin or oral diabetic medication

3. 10:00 a.m.—Take three (3) **Dulcolax** tablets with 10 oz. water. (No prescription required – may purchase at pharmacy.)

4. 11:00 a.m.—Mix a 1 ½ oz. bottle of **Fleet's Phosphosoda** oral laxative (no prescription required – may purchase at pharmacy) in 10 oz. of water, apple juice, ginger ale, or lemon lime drink. Drink slowly. Follow this by drinking 2 liters of water within 2 hours.

5. 4:00 p.m.—Mix a 1 ½ oz. bottle of **Fleet's Phosphosoda** oral laxative (no prescription required – may purchase at pharmacy) in 10 oz. of water, apple juice, ginger ale, or lemon lime drink. Drink slowly. Follow this by drinking 2 liters of water within 2 hours.

6. 7:00 p.m.—If you have not had at least 8 bowel movements, take a 10 oz. bottle of **Magnesium Citrate** (no prescription required – may purchase at pharmacy).

7. You may continue to have clear liquids up to three (3) hours prior to your procedure.

8. Notify the office if you develop a severe cold, fever, or other severe illness.

IF YOU ARE SEEING ANY STOOL OR ANY CLOUDY MATERIAL IN THE TOILET

you can use as many **Magnesium Citrate** bottles as needed. It is important that you are thoroughly cleaned out in order for your physician to get a good look at your colon.

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. You should not drive a car, operate machinery, or ingest alcohol for at least 8 hours.

5. Please refrain from smoking and do not wear lipstick or jewelry the day of your procedure.

6. You may bring slippers or footies for your comfort.

7. We anticipate your stay with us to be 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!