

NAME:

We perform procedures at the following locations:

GIEA
15005 Shady Grove Road. Ste 200
Rockville, MD. 20850
(301) 340-8099

Shady Grove Adventist Hospital
Out- Patient Surgery Center
9901 Medical Center Drive
Rockville, MD 20850

Please ARRIVE at: ____

TIME

DATE

COLONOSCOPY PREP KIT INSTRUCTIONS (CDC PREP)

on

YOU MUST PURCHASE: Two (2) Bisacodyl/Dulcolax 5mg laxative tablets, one (1) bottle of Magnesium Citrate 10oz., one (1) 8.3oz bottle of Miralax and EITHER A 64 OZ BOTTLE OR TWO 32 OZ BOTTLES OF GATORADE (NOT G2).

7 DAYS BEFORE YOUR PROCEDURE:

• Discontinue medications containing iron; follow your providers instructions regarding aspirin, Plavix or anticoagulation medicines (e.g. Coumadin, Pradaxa, Xeloda)

THE ENTIRE DAY PRIOR TO YOUR PROCEDURE YOU MUST BE ON A CLEAR LIQUID DIET - NO

 <u>SOLID FOODS.</u> Drink 6-8 glasses of clear liquids and half <u>MUST</u> contain sugar and salt: Coffee or Tea (no milk), Clear broth or bouillon – <u>MUST</u> drink 16 oz of either broth or boillon, Carbonated or non-carbonated soft drinks (Coke, Pepsi, Sprite, etc), Clear fruit juices (i.e. Apple Juice, Cranberry, White grape juice, Gatorade (NOT G2), and Jell-O, popsicles, hard candy. <u>NOTE:</u> DARK COLOR CLEAR LIQUIDS SUCH AS RED OR PURPLE ARE OK TO HAVE JUST BE SURE TO DRINK LOTS OF WATER AS WELL.

AT 12 NOON: Take the 2 Dulcolax/bisacodyl tablets with an 8 oz glass of a clear liquid

START ANYTIME BETWEEN 4 AND 6PM:

• Mix the 1 bottle of Miralax(or generic) with your 64 oz of Gatorade. **MUST BE GATORADE.** Then begin to drink 1 8 oz glass of the solution every 20-30 mins until the solution is gone. Continue to drink clear liquids until going to bed.

5 HOURS BEFORE YOUR PROCEDURE TIME:

• Drink the 10 oz bottle of Magnesium Citrate.

<u>4 HOURS PRIOR TO YOUR EXAM YOU MUST HAVE NOTHING TO EAT, DRINK, SMOKE OR</u> <u>CHEW.</u>

DAY OF YOUR EXAM: Take all of your morning medications with small sips of water **ONLY UP UNTIL 4 HOURS PRIOR TO YOUR PROCEDURE TIME.**

<u>PLEASE NOTE:</u> IF YOU FIND IT NECESSARY TO CANCEL YOUR PROCEDURE WITHIN 48 HOURS PRIOR TO THE SCHEDULED APPOINTMENT A \$150 CANCELLATION FEE <u>WILL</u> BE CHARGED.

Capital Digestive Care

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