

## **Associates in Gastroenterology**

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## Patient Information Sheet For Bowel Preparation

With OsmoPrep Tablets\*

I have discussed with you the need for an endoscopic examination of your large intestine. In order for this examination to be completely successful, it is most important that all foreign material be removed from the bowel. By following these directions carefully, you can anticipate a successful bowel examination.

Recent studies show that splitting the dose of the preparation; that is, taking a portion the night before, and a portion the morning of the procedure, gives the best results. For early morning procedures, it may mean getting up during the night to take the second dose.

- 1. Fill the prescription for the OsmoPrep tablets at any pharmacy.
- 2. On the day before your exam you may have a can of Ensure (do not use EnsurePlus), one egg, or white toast for breakfast, before 9:00 am. Thereafter, have only clear liquids for lunch and dinner. This includes clear broth, sports drinks (such as Gatorade or Powerade), tea, coffee (without milk), plain jello, hard candy, clear fruit juices, Popsicles, ices, ginger ale and water. Try to avoid red or purple liquids. **You should not eat any solid foods, milk, or milk products.** Drinking sports drinks, such as Gatorade or Powerade, are encouraged as they help keep you well hydrated.
- 3. At 7 p.m., begin taking the OsmoPrep tablets. Take 4 OsmoPrep tablets with at least 8 ounces of any clear liquid every 15 minutes (for a total dose of 20 tablets over one hour and fifteen minutes).
- 4. Drink at least three 8 oz. portions of Gatorade or Powerade, ginger ale, or clear juice after finishing the OsmoPrep tablets, and again before going to sleep-more if desired.
- 5. On the morning of the exam, at 6 a.m. (or at least **five** hours before your scheduled examination), take 4 OsmoPrep tablets with 8 ounces of a clear liquid, and an additional 4 tablets each time at 15 and 30 minutes later, (total of 12 tablets taken in the morning). Follow this last dose with three 8 oz. portions of ginger ale. If your exam is scheduled at 8:00 am, you will need to begin this second dose at 3:00 am. If your exam is scheduled for 12 noon, or later, take the morning dose of OsmoPrep between 7:00 and 8:00am.
- 6. You may continue to have clear liquids up until **four** hours prior to your examination. **If you eat or drink** anything, even a sip of water, within 4 hours of your exam start time, your exam will be postponed or cancelled.
- 7. You may use desitin, anusol, tucks pads or other similar ointment/lotion around your rectal area to reduce irritation from the preparation.
- 8. Do not take any antacids for at least six hours prior to the examination.
- 9. All other medications (except those listed below) may be taken with small sips of clear liquids.
- 10. If you take blood pressure (except diuretic or water pills) or heart rhythm medications, please make sure to take the morning dose at least 4 hours prior to your examination start time. If you take a diuretic or water pill, do not take it on the day of your examination.
- 11. If you take insulin ask your primary physician or endocrinologist how they would like you to adjust your dose.



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- 12. If you use other diabetic medications, do not take them until after the examination, when you start eating.
- 13. Do not use any aspirin, aspirin containing products, or other anti-inflammatory drugs (such as ibuprofen, Naprosyn, or Aleve) for five days prior to the examination.
- 14. Do not take iron supplements or vitamins with iron for five days prior to your examination.
- 15. If you use Coumadin, do not take it for three nights prior to the examination.
- 16. Let us know if you take diuretics (water pills), as you may need additional potassium supplementation.
- 17. Let us know if you're allergic to any medications or if you've had any reactions to Demerol (meperidine), Valium (diazepam), or Versed (midazolam) or Diprivan (propofol).
- 18. Let us know if you've had a heart valve replacement or have a history of endocarditis. If these conditions are present, you may need to be given antibiotics prior to the procedure.
- 19. A companion must be able to escort you home from the examination as you will be given some medication which will make you drowsy and slow your reflexes for several hours. You will not be allowed to drive yourself home.
- 20. Report as instructed for the examination.

## The following points may also be helpful:

- 1. You may feel bloated after the procedure because of the air used during the examination. Burping, walking, lying on your left side, or passing flatus, should help.
- 2. The medication used for sedation, often causes amnesia for the period of the procedure and for a short time thereafter. You may, therefore, not remember the details of what happened or what the doctor explained to you afterwards. If this is the case, please contact our office to review the findings of your procedure. If a biopsy was taken, these results are usually ready in 10-14 days.
- 3. If you should have any other questions, please do not hesitate to contact the office at 301-251-9555.

\*There have been recent reports of kidney disease possibly associated with the use of oral sodium phosphate preparations (Fleets Phosphosoda, Visicol and OsmoPrep). These rare occurrences have been more often associated with patients over age 55, patients on blood pressure medication, and dehydration (patients who did not take in enough fluids during the preparation). In our practice, we have been using these preparations since 1991, and have been aware of only one patient who has developed kidney problems. Nevertheless, if you are on blood pressure medication (especially, an ACE inhibitor or angiotensin receptor blocker) or have known kidney disease, you should take an alternative preparation. Alternative preparations include MoviPrep, Golytely, Nulytely, HalfLytely or LoSoPrep. If you do proceed with the phosphate preparation, please be sure to take in adequate fluids to prevent dehydration. Please feel free to discuss this with Dr. Stern or Dr. Gantt or your primary physician.