



Allegheny Regional Endoscopy
810 Valley View Blvd. Altoona, PA 16602
Front desk: 814-946-5469 Fax: 814-946-4970

Your colonoscopy is scheduled on:

Miralax Prep Instructions

Items to Purchase

One bottle of Miralax (238 grams)
Two 28 ounce bottles of Gatorade (no red or purple)
Four Dulcolax tablets (5 mg. each, total 20 mg.)

Stage 1:

- **Consume *clear liquids only* throughout the day before your procedure.**
- At 3:00pm, take 4 Dulcolax tablets (5mg each). Next, put 14 day supply of Miralax (238 grams) in one-half gallon container and fill with both 28 ounce bottles of Gatorade. No red or purple liquids. Cap the container, shake vigorously and refrigerate.
- At 5:00pm, start to drink half of the Miralax prep solution at your own pace, throughout the evening. You may also continue to drink clear liquids.

Stage 2:

- **3 hours before your scheduled procedure time, drink the second half of the Miralax prep solution. This second half of the prep should be consumed within 1 hour.**

Notes

- It may take a couple hours for the prep to start working.
- It is normal to feel very full or bloated during your prep. **If you experience nausea and/or vomiting, wait 30 minutes before resuming prep/liquids. If vomiting does not disappear once you begin to move your bowels, please call us immediately for further instructions.**

ACCEPTABLE CLEAR LIQUIDS

Water Gatorade Jell-O Kool-Aid Broth Popsicles
Lemonade **Fruit juice (NO orange juice)** Soda (all)
Black coffee (no added cream or sugar) Iced tea Hot tea (no added sugar, honey)

Do not consume any liquids which are red or purple in color as they may mimic bleeding in the colon

Colonoscopy and Anesthesia

It is especially important that you read this information in its entirety and call to speak with us if you are unsure of any instructions.

Failure to comply with the below guidelines could result in the delay and/or cancellation of your procedure without question.

- Avoid iron supplements for 5 days prior to your procedure.
- Avoid eating whole-grain bread & cereals with nuts/seeds as well as corn for 5 days prior to your procedure.
- No alcoholic beverages are permitted during colon prep or after midnight on the night before procedures.
- **CHEWING TOBACCO PRODUCTS, NICOTINE POUCHES, SMOKING, VAPING AND INHALATION OF MARIJUANA** (medical and recreational) **ARE PROHIBITED** after midnight on the night before your procedures. You should also avoid hard candy and chewing gum after midnight.
- Please refer to the personalized medication instructions given to you at your office visit. **It is especially important to take medications for blood pressure and heart function on the day of your procedure.**
- You **MUST** have a driver to sign you out of recovery after anesthesia. You **CANNOT** use UBER, LYFT, Healthride or MediVan unless a responsible party is riding as a passenger with you.
- You may have CLEAR LIQUIDS up to 2 hours before your designated arrival time at our facility.
- **All stimulators** (bladder, spinal, etc.) should be turned "off" or placed in "surgery mode".
- If you experience any of the following between now and the day of your procedure, **please notify us immediately.**
 1. A change in health status.
 2. An ER visit/hospital admission.
 3. Testing or office visit for your heart, lungs, brain.

Please call 814-946-5469 Option 7 to report these changes, or if you have any additional questions pertaining to your procedure.

HOLD MEDICATION DAY OF PROCEDURE:

Carafate (Sucralfate)

HOLD MEDICATIONS FOR 1 DAY PRIOR TO PROCEDURE:

Byetta (Exenatide)

Soliqua (Lixisenatide + Insulin)

Victoza/Saxenda (Liraglutide)

HOLD MEDICATIONS FOR 3 DAYS PRIOR TO PROCEDURE:

Brenzavvy (Bexagliflozin)

Farxiga (Dapagliflozin)

Glyxambi (Empagliflozin/Linagliptin)

Inpefa (Sotagliflozin)

Invokana (Canagliflozin)

Invokamet (Canagliflozin/Metformin)

Invokamet XR (Canagliflozin/Metformin XR)

Jardiance (Empagliflozin)

Qtern (Dapagliflozin/Saxagliptin)

Qternmet XR (Dapagliflozin/Saxagliptin/Metformin XR)

Synjardy (Empagliflozin/Metformin)

Synjardy XR (Empagliflozin/Metformin XR)

Steglatro (Ertugliflozin)

Steglujan (Ertugliflozin/Sitagliptin)

Segluromet (Ertugliflozin/Metformin)

Trijardy XR (Empagliflozin/Linagliptin/Metformin XR)

Xigduo (Dapagliflozin/Metformin)

Xigduo XR (Dapagliflozin/Metformin XR)

HOLD MEDICATIONS FOR 7 DAYS PRIOR TO PROCEDURE:

Adipex-P/Lomaira (Phentermine)

Adlyxin (Lixisenatide)

Bydureon (Exenatide)

Mounjaro/Zepbound (Tirzepatide)

Ozempic (Semaglutide)

Qysmia (Phentermine and Topiramate)

Rybelsus

Trulicity (Dulaglutide)

Wegovy