

COLONOSCOPY – DIET AND LAXATIVE BOWEL PREPARATION – SUTABS

US Digestive Health 215.402.0600

*** 7 DAYS PRIOR TO YOUR PROCEDURE:** Review Medication handout, obtain laxative preparation

*** 3 DAYS PRIOR TO YOUR PROCEDURE:** AVOID WHOLE GRAINS, NUTS, CORN, POPCORN & SEEDS

WHAT TO EXPECT AFTER TAKING PREPARATION.

- Most start having bowel movements within an hour or two of starting the laxative, but sometimes longer. Stay close to a bathroom. Most have multiple bowel movements which become watery like diarrhea.
- After the second dose and before you leave to come to the appointment the stools should become clear of solid material and **should look like urine in the toilet water, clear or yellowish, NOT brown.**

Bloating, chills and/or nausea and vomiting are not uncommon after the first few glasses. This is usually temporary and improves. If you develop persistent vomiting, severe discomfort or bloating, stop taking the prep for a while until the symptoms go away. If vomiting persists, stop the preparation and call our office 215-402-0600

FOLLOW THESE DIRECTIONS AND NOT ANY OTHERS FROM PREP KIT, INTERNET, ETC.

1 DAY BEFORE YOUR PROCEDURE: START PREP. NO SOLID FOOD AFTER NOON

BEFORE 12 NOON	NO FIBER DIET – only milk, yogurt, white bread, cheese, plain eggs, cottage cheese AND/OR CLEAR LIQUIDS (see below)
PREP / CLEAR LIQUIDS ONLY NO SOLID FOOD	BETWEEN 12 NOON AND 3 HOURS BEFORE ARRIVAL TIME
	5-7 PM to Bedtime FIRST DOSE OF PREP
	<p>CLEAR LIQUIDS ONLY- liquids you can see through. No pulp, No RED or PURPLE Water, Clear beverages / soda / sport drinks / fruit juices without pulp, Coffee or Tea (no milk, creamer or cream), Jell-O, Popsicles, Water ice, Clear hard candy, Clear broth</p> <ul style="list-style-type: none"> • ~5-7 PM: Open 1 bottle of 12 tablets. Fill the provided container with 16 ounces of water (up to the fill line). Swallow each tablet with a sip of water, finishing the 12 tablets and all the water in 15 to 20 minutes. • About 1 hour after the last tablet is swallowed, fill the provided container again with at least 16 ounces of water (up to the fill line), and drink the entire amount over 30 minutes. • About 30 minutes after finishing the second container of water, fill the provided container with at least 16 ounces of water (up to the fill line), and drink the entire amount over 30 minutes. • You may drink additional clear liquids

DAY OF YOUR PROCEDURE: NO SOLID FOOD. NO SMOKING. NOTHING IN MOUTH FOR 3 HOURS BEFORE

PREP / CLEAR LIQUIDS ONLY NO SOLID FOOD NO SMOKING	FIVE (5) hours _____AM/PM until 3 hours before arrival time SECOND DOSE OF PREP
	THREE (3) hours _____AM/PM before arrival time until after procedure
	<ul style="list-style-type: none"> • Open 2nd bottle of 12 tablets. Fill the provided container with 16 ounces of water (up to the fill line). Swallow each tablet with a sip of water, finishing the 12 tablets and all the water in 15 to 20 minutes. • Starting 30 minutes later, drink at least TWO additional 16 ounce servings of water over the next 75 minutes finishing no later than 3 hours prior to your arrival time, you may drink as much additional clear liquids as you want no later than 3 hours before arrival time. • Take any necessary morning medications no later than three hours prior to the arrival time <p>• PUT NOTHING IN YOUR MOUTH UNTIL AFTER PROCEDURE.</p> <ul style="list-style-type: none"> • No food, no drink, no medicine, no gum, no candy, nothing to smoke.

For questions about the preparation, medications or to reschedule your appointment, call 215-402-0600 between 8:30AM and 4:00PM