

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 - Low volume

- Avoid iron supplements for 5 days prior to your procedure.
- Avoid eating whole-grain bread/cereals with nuts/seeds and corn for 5 days prior to your procedure.

Stage 1:

- Continue clear liquids only throughout the day before your procedure.
- At 3:00pm, take 2 Dulcolax tablets (5mg each). Next, put 14 day supply of Miralax (238 grams) in one-half gallon container and fill with clear liquid of choice. (Clear juice, Lemonade, Gatorade, Kool Aid, Water). 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:

• 8 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 3 hours. You may then continue to drink clear liquids until 2 hours before your schedule procedure time.

Notes

- It may take a few 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 Apple juice White grape juice White cranberry 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

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

- 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 beside you.
- You may have CLEAR LIQUIDS up to 2 hours before your designated arrival time at our facility and no later.
 - Please refer to the prep instructions on the front of this sheet. <u>DO NOT follow pharmacy</u> instructions.
- No alcoholic beverages are permitted during colon prep OR after midnight on the night before procedures.

<u>CHEWING TOBACCO PRODUCTS (INCLUDING ALL POUCHES), SMOKING, VAPING AND INHALATION OF</u>

<u>MARIJUANA</u> (medical and recreational) <u>ARE PROHIBITED</u> after midnight, on the night before your procedures. You should also avoid hard candy and chewing gum after midnight.

- <u>All oral piercings</u> must be removed before all procedures as well as any other jewelry. <u>NO</u>
 <u>EXCEPTIONS!</u>
- <u>All stimulators</u> (bladder, spinal etc.) should be turned "off" or placed in "surgery mode" if you are having a colonoscopy.
 - Please refer to the personalized medication instructions provided to you. It is especially
 important to take medications for blood pressure and heart function the day of your
 procedures.
- 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.

!! PLEASE SEE THE CHART BELOW FOR A LIST OF MEDICATIONS THAT REQUIRE A MANDATORY HOLD PRIOR TO PROCEDURES (see next page)!!

HOLD MEDICATION DAY OF PROCEDURE:

Carafate (Sulcrafate)

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 (Depagliflozin) 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) Tijardy 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