



DATE:

# GASTROINTESTINAL DIAGNOSTIC CENTER 4660 WILKENS AVENUE, SUITE 302 BALTIMORE, MARYLAND 21229 410-242-3636 www.gibaltimore.com

410-247-7500 x207 Julia

## **COLONOSCOPY**

	APPOINTMENT TIME:
(GIDC), 4 30 minute	AL INSTRUCTIONS: his procedure will be performed at the GastroIntestinal Diagnostic Center 4660 Wilkens Avenue, Suite 302. A colonoscopy takes approximately 20- es. You will then be taken to the recovery room, where you will remain ately 1 hour.
Y	ou will be sedated for this procedure and will not be allowed to drive home or
Return to	work after the procedure. Please arrange for a responsible adult to
transpor	tyou to and from the Center. YOUR PROCEDURE WILL BE
CANCE	LLED IF YOU DO NOT HAVE A RESPONSIBLE ADULT WITH YOU.
MEDICA	TIONS
1.	If you are taking iron medications discontinue 10 days prior to preparation.
2.	If you are taking aspirin, or aspirin containing medications, discontinue 7 days
	prior to preparation.
3.	Arthritic medications should be discontinued 4 days prior to preparation.
4.	If you are taking Metamucil, Citrucel, Colace, Pericolace, or a similar product,
	discontinue 2 days prior to preparation.
5.	If you are <b>Diabetic</b> , please discuss your medication with your physician.  Take ½ dose of the day before procedure, none the morning of procedure.
	procedure, none the morning of procedure.
6.	If you are taking antibiotics, you may continue as instructed.
7.	Coumadin or other blood thinners may be stopped for several days prior to the procedure. Please discuss this with your physician.
8.	Do not take any tranquilizers on the morning of the procedure, because you will have sedation.
9.	If you are taking medication for your heart, you may take your medication with 4 oz. of water the morning of your procedure.
10.	If you are taking medication for high blood pressure, please discuss this with
	your physician.
11.	Please notify your physician if you are unable to complete your preparation
	for this procedure.
STOP:	prior to procedure.

#### SUPREP BOWEL PREP

### Fill your prescription for Suprep

	hydrated before any bowl prep. Please drink extra water a few	
days prior to your prep day.		
Refrigerate both of the Suprep bottles	•	
The first day of your prep isyou may have a light breakfast success: Cereal, Oatmeal, Cream of Wheat or a Scrambled Egg. YOU WILL THEN STAY ON A CLEAR LIQUID DIET.		
	CLEAR LIQUIDS	
Water	Apple Juice	
Clear Broth or Bouillon	Powdered Lemonade	
Coffee or Tea(Sweetened, Black)	Jello(Lemon or Lime)	
White Grape Juice	Gatorade	
Clear soft Drinks	Lemon Italian Ice	
Ice Popsicles	₩	
DO NOT DRINK ANYTHING THAT IS RED.	ORANGE OR PURPLE!!!	
FIRST DOSE: Beginning at <u>6:00PM:</u>		
Pour one 6-ounce bottle of Suprep liquid line on the container and mix.	into the mixing container. Add cool drinking water to the fill	
Drink all the liquid in the container over	the next half hour. (You can use a straw. Do not chug the liquid	
After finishing the Suprep, you will drin	nk two(2) 16-ounce containers of water over the next hour.	
SECOND DOSE: Begin at:		
Pour one 6-ounce bottle of Suprep liquid line on the container and mix.	d into the mixing container. Add cook drinking water to the fill	
Drink all the liquid in the container over	the next half hour.	
After finishing the Suprep, you will drin	k two(2) 16-ounce containers of water over the next hour.	
You may continue to drink clear liquids	s until	

# FILL YOU OSMOPREP PRESCRIPTION AND PURCHASE 4 DULCOLAX TABLETS (LAXATIVE)

#### Stay on clear liquids all day.

The day before your procedure is you will be on a clear liquid diet the entire day. NO SOLID FOOD

BEGIN YOUR PREP AT:			
6:00pm	Take 4 Osmoprep Tablets with 8oz of any clear liquid.		
6:15pm	Take 4 Osmoprep Tablets with 8oz of any clear liquid.		
6:30pm	Take 4 Osmoprep Tablets with 8oz of any clear liquid.		
6:45pm	Take 4 Osmoprep Tablets with 8oz of any clear liquid.		
7:00pm	Take 4 Osmoprep Tablets with 8oz of any clear liquid.		
10:00pm	Take 4 Osmoprep Tablets with 8oz of any clear liquid.		
10:15pm	Take 4 Osmoprep Tablets with 8oz of any clear liquid.		
10:30pm	Take 4 Dulcolax Tablets with 80z of any clear liquid.		

You may continue to drink clear liquids until <u>midnight</u>. Nothing by mouth after midnight.

#### **CLEAR LIQUIDS**

Water
Clear Broth or Bouillon
Coffee or Tea(Sweetened, Black)

Powdered Lemonade Jello(Lemon or Lime)

White Grape Juice

Gatorade

Apple Juice

Clear Soft Drinks

Lemon Italian Ice

**Ice Popsicles** 

DO NOT DRINK ANYTHING THAT IS RED, ORANGE OR PURPLE!!