

COLONOSCOPY PREPARTION WITH SUTAB

Date:

Patient Name:

You are scheduled for a colonoscopy at North Coast Endoscopy Suite 380 in the Lake Ambulatory Care Center on _____. Please arrive at the office at _____ AM / PM

You must have a driver to take you home after your procedure. Please plan to be here for up to three (3) hours. Public transportation may drop you off, but you must have a reliable driver (family member, friend, neighbor, etc.) to sign you out and drive you home. You are not allowed to drive after your procedure.

You will need to obtain:

- 1 prescription of SUTAB (2 bottles of 12 tablets each)
- 1 small bottle of polyethylene glycol (MiraLAX®) -over the counter

1 WEEK BEFORE YOUR PROCEDURE

STOP USING: fiber supplements, herbal products, vitamin E and fish oil. Please let us know if you are regularly taking aspirin, blood thinners such as Coumadin, Plavix as these will need to be stopped prior to the procedure under the guidance of the doctor giving you this medication.

If you have diabetes, ask your diabetic doctor what you should do the day before and the morning of your procedure. Do not take metformin (if you take this) the day you are on a clear liquid diet.

5 DAYS BEFORE YOUR PROCEDURE

STOP USING: aspirin higher than 81mg, Motrin®, ibuprofen, Advil®, Naprosyn, Aleve®, Meloxicam, Excedrin or most arthritis medications. You may continue aspirin 81mg dose. You may take Tylenol if needed. **Stop taking** iron supplements.

THREE DAYS BEFORE YOUR PROCEDURE:

Take one capful of Miralax mixed with clear liquid in the morning, and another capful in the evening.

Follow a **LOW RESIDUE** diet; **STOP EATING** whole kernel corn, peas, nuts, seeds (poppy, sesame), dried fruit, whole grains (such as oatmeal, brown rice, quinoa, wheat bread, bran), popcorn, beans, most fruits and vegetables.

OK TO EAT: tender meats, eggs, tofu, creamy peanut butter, yogurt (without pieces of fruit), protein shakes, blended soups, ice cream, smoothies (without seeds), refined carbohydrates (white bread, pasta, pancakes), bananas, melon, applesauce, canned peaches (without skin), canned or well cooked potatoes, carrots. Vegetable and fruit juices.

Be sure to thoroughly cook all foods so they are tender and soft.

TWO DAYS BEFORE YOUR PROCEDURE

Continue following the **LOW RESIDUE** diet.

Take one capful of Miralax mixed with clear liquid in the morning, and another capful in the evening.

THE DAY BEFORE YOUR PROCEDURE

- Follow a clear liquid diet all day. **No solid food!** Drink plenty of liquids in addition to the bowel preparation mixture.

CLEAR LIQUID DIET: clear broth, bouillon, gelatin such as Jell-O®, flavored ice, hard candies, clear fruit juices (apple, white cranberry, lemonade, white grape), soda (7-Up®, Sprite®, ginger ale, seltzer), Gatorade®, Powerade®, black coffee, tea, water.

-**Do not drink:** red, purple or orange colored drinks, alcohol, nectars, milk or cream.

The DAY BEFORE your procedure: DOSE 1	DOSE 2
If your procedure is before 12 noon: take dose 1 at 3pm If your procedure is after 12 noon: take dose 1 at 6pm	If your procedure is before 12 noon: take dose 2 at 6pm the evening before If your procedure is after 12 noon: take dose 2 at 6am the morning of
1. Open first bottle of Sutab (dose 1). 2. Fill the empty water container with 16 ounces of water, up to the line. 3. Swallow one tablet every 1-2 minutes. You will finish 12 tablets and the 16 ounces of water within 20 minutes. 4. 1 hour later drink another 16 ounces of water over 30 minutes. 5. 30 minutes later drink another 16 ounces over 30 minutes.	1. Open second bottle of Sutab (dose 2). 2. Repeat steps 2-5 from dose 1. You may continue to have clear liquids up until 4 hours prior to your arrival time. Do NOT drink or eat anything within 4 hours of your arrival time. This includes candies, mints, gum and smoking (cigarettes and/or marijuana). DO NOT take any medications the morning of your procedure.
If you experience preparation-related symptoms (for example, nausea, bloating, or cramping), pause or slow the rate of drinking the additional water until your symptoms diminish.	If you use an inhaler, bring it the day of the procedure.

Consider petroleum jelly (Vaseline®) or A&D ointment to the skin around your anus after bowel movements to help prevent skin irritation.

IMPORTANT, PLEASE READ

It is very important for you to keep your appointment on the scheduled date. **Please cancel for true emergencies only.** Thank you for your cooperation. Please call us between the hours of 9AM-4PM if you have any questions.

Cancellation within 3 business days will incur a bill of \$250 that you will be responsible for, and is not covered by your insurance. (This is not a penalty- it is to cover a portion of the loss due to the short notice.)

The below professionals will be on standby to perform your procedure:

Physician service- Dr. Ahmad Ascha or Dr. Emily Carey

Anesthesia service –This is a separate service provided by Heritage Anesthesia, LLC. It is the patient's responsibility to check with their insurance carrier for coverage of these services. If you have any questions please call our office and ask for the billing department.

Facility Service- North Coast Endoscopy

Specimen service (pathology)

For immediate assistance please call 440-352-9400. Thank you!