



BOWEL PREP INSTRUCTIONS-**PM PROCEDURE**

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Procedure Date: _____ Arrival/Check-in Time: _____

PLEASE BE AWARE THAT THIS TIME IS SUBJECT TO CHANGE

- | | | | | | |
|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Mansfield Endoscopy Center
647 N Miller Rd
Suite 100
Mansfield, TX 76063
Phone: 817-415-9670 | <input type="checkbox"/> North Richland Hills Endoscopy Center
7640 NE Loop 820
North Richland Hills, TX 76180
Phone: 469-713-3740 | <input type="checkbox"/> Mansfield Methodist Medical Center
2700 E Broad St
Mansfield, TX 76063
Phone: 682-242-2000 | <input type="checkbox"/> Baylor Surgicare at Mansfield
280 Regency Parkway
Mansfield, TX 76063
Phone: 817-453-2744 | <input type="checkbox"/> Medical City Arlington
3301 Matlock Road
Arlington, TX 76105
Phone: 682-509-6200 | <input type="checkbox"/> THR Hospital
2300 Lone Star Rd
Mansfield, TX 76063
Phone: 682-341-5000 |
|------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|

Purchase these items ahead of time:

1. **Bowel Prep Kit-GI Alliance pharmacy will ship your prep to your home. Please expect a call to schedule this delivery. GIA Pharmacy phone # (682)-707-3760. If you are picking up from a local pharmacy, please make sure you do this ASAP.**
2. **Magnesium Citrate 10 oz bottle (can be purchased at any retailer)**

Colonoscopy Preparation Timeline

IF you are on a blood thinner or anticoagulant such as Pradaxa (dabigatran), Eliquis (apixaban), Xarelto (rivaroxaban), Coumadin (warfarin), Plavix (clopidogrel), Effient (prasugrel), Brilinta (ticagrelor), **you will need to obtain guidance from your prescribing physician and will most likely need to hold prior to the exam.**

If you are taking medications for weight loss, please notify us as soon as possible. Semaglutide (Ozempic, Wegovy), Mounjaro (Tirzepetide), Dulaglutide (Trulicity), Liraglutide (Victoza, Saxenda), Semaglutide (Rybelsus)

FIVE DAYS PRIOR TO YOUR COLONOSCOPY: Date: _____

- Avoid popcorn, nuts, seeds, raw fruit, raw vegetables and salads as these foods are harder to digest.
- Discontinue fiber supplements: i.e. Metamucil, Citrucel, Fibercon etc...
- Discontinue all over the counter herbal products and Fish Oil.

THREE DAYS BEFORE YOUR COLONOSCOPY: Date: _____

- Review the dietary restrictions for the next two days.
- **CONFIRM YOUR RIDE!** Please remember, by law, you cannot drive the rest of the day after the procedure. **** If you do not have a ride, we will have to cancel the procedure****
- If you are currently taking Phentermine, please stop 3 days prior to your procedure.

ONE DAY BEFORE YOUR COLONOSCOPY: Date: _____

- **Stop taking all NSAIDs including Advil, Ibuprofen, Motrin, Aleve, or Naproxen 24 hours prior to procedure.**
- ***Start a Clear Liquid Diet when you wake up and continue all day. NO SOLID FOODS AND NO DAIRY PRODUCTS***

CLEAR LIQUID DIET RECOMMENDATIONS: No red- or purple-colored beverages

Soups: Clear bouillon, chicken broth, beef broth, vegetable broth or consommé	Beverages: Tea, coffee, Kool-Aid, carbonated beverages, ginger ale, sprite, Gatorade/Sports drinks. (You may add sugar to coffee or tea but not milk or creamer)
Juices: Apple, white grape, strained lemonade, limeade. Any juice you can see through and has no pulp is acceptable	Dessert: Italian ices, popsicles, Jell-O, and hard candy

- Throughout the day make sure to drink at least eight glasses or more of fluids such as Gatorade, or similar product, preferably not just plain water. Hydration is very important!
- **Diabetic patients - you may need to adjust your medications based off what your PCP recommends.** Monitor your blood sugar at your usual times. Do not take your diabetes pills the day of the procedure

THE EVENING BEFORE YOUR COLONOSCOPY: Start your bowel prep at the times listed below

(*You may find the instructions for the prep in which you receive on page 3-5***)**

*****PLEASE NOTE that the prescription for the specific prep could change based off of availability at the pharmacy or your insurance benefits. Please ensure you follow the correct prep instructions.**

1st dose:

- **6pm:** Use the instructions on page 3-5 for the prep in which you received starting at this time. Please follow the instructions on this form and NOT the instructions on the box!
- You may experience nausea, abdominal fullness, and bloating. If this occurs, stop drinking temporarily or drink each portion at longer intervals until the symptoms disappear. If you start to have severe abdominal pain and vomiting-stop drinking and call our office.
- Remember to remain close to the toilet facilities.
 - You may continue to have clear liquids until midnight. After midnight, do not eat or drink anything except the prep in the morning!!

**** If you do not have a bowel movement 2 hours after completing the first dose of prep, drink one bottle of magnesium citrate****

THE MORNING OF YOUR COLONOSCOPY:

2nd Dose: Please note that a nurse from the facility may call to alter the time you take your 2nd dose of prep.

- **6am:** Use the instructions on page 3-5 for the specific prep you received. Please follow the instructions on this form and NOT the instructions on the box! Please drink within 1 hour.
- **You must finish all of the prep to ensure the most effective cleansing.**
- Please make sure you take any regularly scheduled blood pressure, seizure, thyroid or heart medications the morning of the procedure with a **SMALL SIP OF WATER** (AFTER you finish the prep, not with the prep).

****NO WATER OR ANYTHING BY MOUTH AT LEAST 4 HOURS PRIOR TO YOUR PROCEDURE START TIME. DRINKING WILL CAUSE A DELAY IN YOUR PROCEDURE TIME, WHICH COULD BE UP TO 2 HOURS****

Colonoscopy prep tips:

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <ul style="list-style-type: none"> ○ Drink the colonoscopy prep cold – place in the refrigerator the morning of your prep day. ○ Stay hydrated – drink electrolytes, not just plain water. ○ Use wet wipes and soft toilet paper. ○ Drink the prep through a straw. | <ul style="list-style-type: none"> ○ Wear loose clothing and prepare to be in the bathroom. ○ Pay attention to your stool as you prep. The goal after completing the prep is for your stool to be clear to clear-yellow liquid that is see-through like urine or lemonade. |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

You will be in recovery for 30-45 minutes after the exam. Average total time at the facility is around 2-3 hours. **Someone must drive you home.** You may not use Uber, Taxi or Lyft. You will receive specific instructions about eating, activities, and medications before you leave. If you would like your driver to speak with the physician after the procedure, they will need to be in the waiting room during your exam so the doctor can talk with them after.

**Please call if you have any questions or if you have been unable to obtain your prep:
817-760-7969 opt. 2**

Scheduled by _____ Ext. _____

PLEASE FIND THE PREP YOU RECEIVED BELOW AND FOLLOW THE INSTRUCTIONS IN A SPLIT DOSE FORMAT AT 6PM THE EVENING BEFORE AND 6AM THE MORNING OF YOUR PROCEDURE!

PLENVU: □

Preparation of PLENVU®

Pack contents



One pack of PLENVU® contains 3 sachets: one sachet of Dose 1 and two sachets of Dose 2 (sachet A+B).

Preparation of Dose 1



Fill a container with the contents of Dose 1. Add 0.5 L water.



also add 0.5 L clear liquid

Mix the entire contents until the liquid is almost clear (this may take a few minutes).

Preparation of Dose 2



Fill a container with the contents of Dose 2 (sachets A+B). Add 0.5 L water.



also add 0.5 L clear liquid

Mix the entire contents until the liquid is almost clear (this may take a few minutes).

Taking PLENVU®

Dose 1



6pm time

+

Dose 2 (sachets A+B)



6am time

CLENPIQ: □

ON THE DAY BEFORE THE COLONOSCOPY, stop eating all solid food and dairy, and start hydrating by drinking clear liquids.



Evening before your colonoscopy

Drink one bottle of CLENPIQ
Drink CLENPIQ right from the bottle

Then, keep hydrating
Drink 5 cups (8 oz each) of clear liquid.
Check off the cups below as you go!



Start: 6pm : _____

Finish: 7pm : _____

Morning of your colonoscopy

Drink the other bottle of CLENPIQ
Drink CLENPIQ right from the bottle

Then, keep hydrating
Drink at least 3 cups (8 oz each) of clear liquid.
Check off the cups below as you go!



OR MORE

Start: 6am : _____

Finish: 7am : _____

SUTAB:□**DOSE 1—On the Day Prior to Colonoscopy 6pm****Take the tablets with water**

STEP 1 Open 1 bottle of 12 tablets.

STEP 2 Fill the provided container with 16 ounces of water (up to the fill line). Swallow each tablet with a sip of water, and drink the entire amount of water over 15 to 20 minutes.



Tablets not shown actual size.



IMPORTANT: 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.

Drink additional water

STEP 3 Approximately 1 hour after the last tablet is ingested, fill the provided container again with 16 ounces of water (up to the fill line), and drink the entire amount over 30 minutes.

STEP 4 Approximately 30 minutes after finishing the second container of water, fill the provided container with 16 ounces of water (up to the fill line), and drink the entire amount over 30 minutes.

Dose 2: Repeat steps for dose 1 at 6am

GALLON SOLUTION:□
(GAVILTYE, GOLYTELY, PEG)

At **6 p.m.** the day before your procedure
begin drinking the colon preparation as follows:

Drink one 8 oz glass every 15 minutes, until the first half is gone.

Refrigerate the remaining prep until the morning.

If you feel bloated, nausea or full, stop drinking for 15 minutes and walk around, this can help move the fluid through your colon.

The laxative will cause you to have very loose and watery stools, that's what we want!

At **6 a.m.** the morning of the procedure: drink one 8 oz glass every 15 minutes until completed.

Make sure you are done 4 hours prior to your procedure

SUFLAVE:

The Dosing Regimen

SUFLAVE is a split-dose (2-day) regimen. A total of 2 bottles are required for complete preparation for colonoscopy. You will take 2 bottles of liquid in two separate doses. One dose of SUFLAVE is equal to one bottle plus one flavor enhancing packet.



Day 1, Dose 1: Early in the Evening Before Your Colonoscopy

Start Dose 1 at 6:00 PM.

STEP 1

Open 1 flavor enhancing packet and pour the contents into 1 bottle.

STEP 2

Fill the provided bottle with lukewarm water up to the fill line. After capping the bottle, gently shake the bottle until all powder has mixed well (dissolved). For best taste, refrigerate the solution for an hour before drinking. Do not freeze. Use within 24 hours.

STEP 3

Drink 8 ounces of solution every 15 minutes until the bottle is empty.

STEP 4

Drink an additional 16 ounces of water during the evening.

IMPORTANT: If nausea, bloating, or abdominal cramping occurs, pause or slow the rate of drinking the solution and additional water until symptoms diminish.



Day 2, Dose 2: The Morning of the Colonoscopy (5 to 8 hours prior to the colonoscopy and no sooner than 4 hours from starting Dose 1)

Start Dose 2 at 6:00 AM.

STEP 1

Repeat Step 1 to Step 3 from Day 1, Dose 1.

STEP 2

Drink an additional 16 ounces of water during the morning.

