

Colonoscopy Procedure Prep Instructions

UMass Memorial Endoscopy Center
28 Newton Street
Southborough, MA 01772

Marlboro Hospital
157 Union Street
Marlborough, MA 01752

Procedure Date: _____ **Arrival Time:** _____ **Procedure Time:** _____

Please note:

- You **MUST have a ride** to and from the procedure
- Bring a list of your current medications and dose
- Expect to be at the facility for approximately **TWO hours** _____
- Please arrive at the facility 45 minutes prior to your procedure time

STARTING One week before the procedure: _____

- If you are on a blood thinner, please stop taking per your doctor's instructions. (**2-5** days before)
- Start a **LOW FIBER** diet. (See insert for a list) (**5** days before)
- Discontinue fiber supplements (e.g., Metamucil, Citrucel), NSAIDs (e.g., Motrin/Ibuprofen), oral iron. (Excluding daily low-dose aspirin for heart health). (**7** days before)
- Hold injectable diabetes/weight-loss medications (e.g., Trulicity, Ozempic, Wegovy, Bydureon, Byetta, Saxenda, Victoza, Adlyxin, Mounjaro) (**7** days before)
- Hold Rybelsus (**1** day before)

Day before your procedure: _____

- You may have a light low fiber breakfast and lunch (**see attached Diet Guidelines**).
- **After 12:00 noon, you must be on a clear liquid diet for the rest of the afternoon and evening. (see below for examples).**
- Clear liquids are anything you can see through. **No red, blue, or purple liquids.**
- **NO alcohol, beer, or wine.**
- **At 5:00 pm take the first dose of the prep medication. Please see back for more instructions.**
 Golytely/Gavilyte Plenvu Clenpiq Sutab
- Your prescription has been sent to _____

Day of procedure: _____

*Please continue to take your medication as usual. *Diabetics, please consult your physician**

- At _____ take the second dose of the prescribed prep. (7 hours prior to the procedure)
- If you wear contacts, please wear glasses
- **Nothing to drink 3 hours before your procedure** _____
- If you are a diabetic do not take your diabetes medications. – Check with your PCP or endocrinologist for further information.

AFTER your procedure

- **You must have a ride to and from the procedure.** A taxi, Uber, bus, or limo is not acceptable. You will need to have someone get you settled once you get home. A medical taxi is accepted – please call our office if you need information about medical taxis.
- Plan to rest for the remaining part of the day.
- You can expect to resume normal activities the day after your procedure.

***PLEASE NOTE THAT THE PROCEDURE WILL BE COMPLETED WITH SEDATION (MODERATE OR DEEP). THE TYPE OF SEDATION WILL BE DETERMINED ON THE DAY OF THE PROCEDURE BASED ON AVAILABILITY AND/OR INSURANCE.**

Clear Liquid Diet Include the following:

<ul style="list-style-type: none">● Plain Water● Clear, fat-free broth such as bouillon or consommé● Sports drink like Gatorade● Fruit juices without pulp such as apple juice, white grape juice or white cranberry juice	<ul style="list-style-type: none">● Clear sodas (ginger ale, sprite, 7Up)● Ice pop without the bits of fruit or fruit pulp● Ice chips● Honey● Plain gelatin● Coffee or Tea without cream
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□ **SUTAB** – The day before the procedure at 1:00 PM, please take 2 Dulcolax tablets with a large glass of water. Then proceed to take the first 12 pills (slowly, 1 pill every 2-3 minutes) at 5:00 PM. Please take second dose of 12 pills (slowly, 1 pill every 2-3 minutes) at _____ (7 hours prior to the procedure). Please drink plenty of water during and after taking the pills. Nothing by mouth 3 hours (_____) prior to the procedure

□ **Clenpiq** – Please take the first bottle/dose the night before the procedure at 5:00PM. The second bottle/dose should be taken at _____ (7 hours prior to the procedure). **Do not dilute the solution.** Drink at least 16 oz of clear liquids after each dose. Nothing by mouth for 3 hours (_____) prior to the procedure.

□ **Plenvu** – Please take first dose at 5:00 PM the night before the procedure by mixing dose 1 packet with 16 oz of water. Mix second dose (pouch A and B) packets with 16 oz of water and take 7 hours prior to procedure at _____. Drink at least 12 oz of water after each dose. Nothing by mouth for 3 hours (_____) prior to the procedure

□ **Golytely/Gavilyte** – Please take the first dose (half the gallon jug/64 oz) starting at 5:00 PM the night before the procedure. Drink 8 oz every 10 minutes until half of the gallon is gone. The second dose (the other half of gallon) should be taken 7 hours prior to the procedure at _____. Take the same way, 8oz glasses every 10 minutes until the rest of the gallon is finished. Nothing by mouth 3 hours (_____) prior to the procedure.

Please call your pharmacy for your prescription, especially if it has been more than 2 weeks since you booked your appointment. Your pharmacy has the prescription. Please give the pharmacy at least 1 week notice so they can order the product if they need to.

To obtain a coupon for specialty prep please go online. The cost should be between \$40-\$60 with this coupon. You may change which prep you use from the above list, but please call us no less than 1 week before. Prescriptions cannot be returned to pharmacies.

www.MyPlenvu.com (There is an option for Medicare Part D patients)

www.Sutab.com (There is an option for Medicare Part D patients)

www.Clenpiq.com (This coupon DOES NOT work if you have Medicare)