

Procedure Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Your procedure is scheduled at: **Conway Medical Center Endoscopy Department- North Tower Entrance**

You will be notified of your arrival time by 3:00pm the day before your procedure. For procedures scheduled on a Monday, you will receive your time on the Friday before. If you have not received a call by 3:30pm, please contact the Endoscopy Department at 843-234-6665.

**General Instructions:**

-Please ensure we have the correct contact number, so we can contact you with any information regarding your procedure.

-Expect to be at the hospital approximately **2.5 hours**

-Bring a list of your medications with you

-Remove all jewelry, body piercings, contacts before arriving to your procedure.

-Regulations require a **licensed, adult driver (18+)** **to accompany you and wait at the hospital** for the duration of your procedure.

-**Do not** plan to work, drive, operate machinery, or sign any legal documents until the following day after your procedure

**Prep Instructions:**

-**Please follow our instructions!** Instructions on the packaging should only be used as guidance for mixing the solution

-Prepare and consume your first dose (½ of total prep) at 8:00PM the evening before your procedure. The first dose should be completed by 10:00pm.

-Prepare and consume the second dose ( 2nd ½ of total prep) the morning of your procedure. Consume 4 hours before your arrival time and make sure full dose is completed by 3 hours before your arrival time.

**Medications:**  Please adjust or stop the following medications

-**Stop** all iron supplements, herbal supplements, and multivitamins 7 days prior to procedure

-**Coumadin, Warfarin, Effient, Plavix, Pradaxa, Xarelto or Ticlid**

 Stop days prior Do not stop your medication

-**Heart/Blood Pressure medication** taken every morning- Take at 6am the morning of your procedure with a sip of water.

-**Insulin injections:** Take ½ of your afternoon or nighttime dose the day before your procedure AND take ½ of your morning dose the day of your procedure

-**Weight Loss Injections (including Ozempic/Mounjaro, etc):** For weekly injections, withhold at least **7 full days**

**\*\*STOOL SHOULD BE LIGHT YELLOW/ORANGE/TO CLEAR WITHOUT ANY SOLID PARTICLES. IF NOT CLEAR, PLEASE CALL AND LET THE NURSING STAFF KNOW PRIOR TO YOUR ARRIVAL. A POOR PREP MAY CAUSE CANCELLATION OF THE PROCEDURE. \*\***

**Overview of Preparation**

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| **7 days before your colonoscopy** | 1. Read all prep instructions- contact our office with any questions (Office # 843-347-6038)
2. Pick-up bowel prep from pharmacy
3. Pick up everything needed for clear liquid diet
4. Stop herbal, vitamins, and oral iron supplements
5. Stop diabetic/weight loss injections (such as Ozempic, Trulicity, Mounjaro, Wegovy)
6. Follow instructions for stopping or dosing changes for blood thinner and diabetes medications, and weight loss injections
7. Avoid salads or high fiber foods including wheat bread, nuts, seeds, corn, peas, beans, popcorn, and fiber supplements
8. Arrange for a licensed driver, at least 18 years old, to remain with you during the procedure and drive you home. This can be a family member or friend.
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| **The day before your colonoscopy** | 1. NO SOLID FOODS
2. Clear liquid diet all day (No red or purple liquids)
3. Drink 8oz of clear liquid every hour while awake (this is equal to half a bottle of water)
4. Make a list of your medications to bring with you to your procedure
5. At **8:00PM** start to consume the first dose of your prep, complete by 10:00PM
6. You can drink clear liquids up until your second dose of prep
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| **The day of your colonoscopy** | 1. NO SOLID FOOD
2. NO tobacco, candy, gum, mints, etc
3. You may begin your second dose of the prep **4 HOURS** before your arrival time. It **MUST BE COMPLETED BY 3 HOURS BEFORE YOUR ARRIVAL TIME.** (For example: Arrival time of 9:00am, start second dose at 5:00am and it must be completed by 6:00am)
4. Once second dose of prep is complete, clear liquids must be stopped as well.
5. You may take your approved prescribed medications with a clear liquid 4 hours before your arrival time.
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**Clear Liquid Diet**

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| **These items are allowed:**WaterClear Broth: Beef or ChickenJuices -Apple Juice -White grape juice  -White cranberry juiceSodas Tea (**WITHOUT** cream/milk)Coffee (**WITHOUT** cream/milk)Clear gelatin (**WITHOUT** fruit)Popsicles (**WITHOUT** fruit or cream)Italian ice | **These items are NOT allowed:**MilkCreamMilkshakesTomato juiceOrange juiceCream soupsAny soup other than the listed brothOatmealCream of wheatGrapefruit juiceAnything with red or blue dyesAnything orange or purpleAlcohol |