



Colonoscopy Prep Instructions – Sutab with Bisacodyl

621 Ridgley Ave, Suite 101 Annapolis, MD 21401 410-224-3636

F: 410-972-2698

YOUR BOWEL PREP IS VERY IMPORTANT - Please read immediately and review instructions carefully! Only follow these MDTEC instructions for your prep.

| If you do not follow these instructions and you are not prepped properly for your procedure, a cancellation fee will apply. | | | | | | | | |
|---|---|---|--|--|--|--|--|--|
| Prior to your procedure: | | 2 Days Prior | 1 Day Prior | <u>Procedure Da</u> y | | | | |
| Your prescription is sent to your pharmacy after your pre-op call or office visit has been completed. Please pick up your prescription within 72 hours. AND-Purchase Bisacodyl (Four 5mg tablets) from the pharmacy. You will need to arrange for a responsible | Avoid consuming all food with seeds, corn and nuts 5 days prior to your procedure. Stop taking all NSAIDS. Ibuprofen, Advil, Aleve, etc. 5 days prior to your | Drink at least four 8oz. glasses of water throughout the day. | Clear liquid diet all day today. Drink at least four 8oz. glasses of water throughout the day. | Clear liquid diet until 4 hours prior to your procedure. Morning Dose of Sutab : (Part 2) 6 hours prior to your procedure: Take the second 12 tablets with 16 ounces of water. You can take one pill every 2-5 | | | | |
| adult to drive you home. You cannot drive until the day after your procedure. A taxi, ride share, or shuttle is not an | procedure. You may take Tylenol as needed. | Eat a light dinner. | No alcohol the day before or day of your procedure. | minutes as you can tolerate, make sure to take all 12 pills within one | | | | |
| approved means of transportation <u>unless</u> you have a family member or friend with you. If you take Phentermine — stop taking this 10 days prior to your procedure. If you take weekly injections for weight loss or Diabetes: do NOT take this within 7 days of your procedure. If you take iron, dietary, herbal or fiber supplements, stop taking these 7 days prior to your procedure. If you take a blood thinner- | Inhalers and Nasal Spray- Continue as prescribed. Please bring with you on day of procedure. Blood Pressure and other essential medications: Continue as prescribed. Take these medications on the day of your procedure with a SMALL sip of water at least 2 hours before procedure. | NO Solid Foods after midnight! You will begin a clear liquid diet at midnight. Acceptable clear liquids include: water, clear broth, apple juice, white cranberry juice, | If you are taking diabetic medication, cut your dose in half this day and do not take any diabetic medication day of procedure. 5pm: SUTAB- Part 1 Take the first 12 tablets with 16 ounces of water. You can take one pill every 2-5 minutes as you can tolerate, make sure to take all 12 pills within one hour. 6pm: Drink 32 ounces of | hour. After completing this part of the prep take 10 mg of Bisacodyl 2 tablets –5mg each 5 hours prior to your procedure: Drink 32 ounces of water over one hour. You must finish all of the prep, including the water 4 hours prior to your procedure. Please call the office if your prep results are not clear like water or a transparent yellow at this time. | | | | |
| Please contact the prescribing doctor to obtain a blood thinner hold order. The office can fax this order to us at 410-972-2698. If you see a specialist: you can request that your most recent visit summary, labs, and test results from that office be faxed to us at 410-972-2698 If you develop any covid, flu, or cold like symptoms within 2 weeks of your procedure date, please call us at 410-224-3636. | If you wear contacts: please remove them at home or bring your contact lens supplies with you if you don't have glasses to wear. Please leave jewelry and other valuables at home. Contact our pre-operative department with any questions at 410 224-3636 Option 2. | white grape juice, soda, jello, popsicles, coffee, and tea. You may have any transparent liquid. Nothing with milk or creamer. Nothing red, blue or purple in color are allowed. | water over one hour. After completing this part of the prep take 10 mg of Bisacodyl 2 tablets –5mg each It should take you no more than 2 hours to complete these steps. If you are unable to tolerate the prep, please call 410-224-4887 to speak to the on call doctor. | You cannot have ANYTHING AT ALL by mouth for at least 4 hours prior to scheduled procedure time. This includes ice, water, gum, hard candy and mints. No smoking the day of procedure. Please remember to bring your: -Current Medication list with the last dose for each medication taken -Insurance Cards -Driver's License/Photo ID -Any co-insurance fees that are due. | | | | |



- This form must be <u>completed</u> prior to your procedure.
- Please list all prescriptions, over the counter medications, vitamins and supplements taken in the last month.
- Please remember to review medication instructions provided on page 1 of your procedure instructions.
- If you have questions regarding your medications prior to your procedure, please call 410-224-3636 and ask to speak with our procedure coordinator.

| Medication Name | Dose | Frequency and Time(s) Taken | Date / Time of Last Dose |
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| Patient Signature | Date |
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Patient Signature

Date