

DOUBLE BOWEL KIT INSTRUCTIONS

Mesquite Gastroenterology & Surgery Center 7445 E. Tanque Verde Road Tucson, Arizona 85715 Phone: 520-722-0929 Fax: 520-722-0745 www.mesquitegsc.com	Tucson Medical Center TMC GI 5301 E. Grant Rd Tucson, Arizona 85712 Phone: 520-327-5461	St. Joseph's Hospital St. Joseph GI 350 N. Wilmot Rd Tucson, Arizona 85711 Phone: 520-873-3000
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You are scheduled for a Colonoscopy with Dr. Arenas at the following facility:

- MSC
 TMC GI
 St Joseph GI

Appointment Date: _____ **Time:** _____ **Please arrive 30 minutes prior at:** _____

You must have a responsible driver to take you home after your procedure. This **DOES NOT INCLUDE** cab, UBER, or the equivalent therefore. Medical Transportation services are acceptable. If you cannot arrange for a responsible individual to take you home, please notify Mesquite Gastroenterology or Surgery Center. **If you arrive at the Surgery Center without acceptable transportation your procedure will be postponed.**

- Please be advised that these instructions are different from the laxative package instructions.
- Arrive a half-hour prior to your procedure time at Mesquite. If scheduled at TMC or St. Josephs, arrive 1 hour prior to your procedure time.
- If you have any questions about these instructions, please contact our office at **520-722-0744 EXT.214**

3 DAYS BEFORE COLONOSCOPY PROCEDURE: PLEASE FOLLOW LOW-FIBER DIET

Listed are some examples of food options that are okay to eat during your low fiber diet.

Milk & Dairy	Milk, cream, hot chocolate, buttermilk, yogurt, cheese including cottage cheese, sour cream
Breads & Grains	Breads and grains made with refined white flour (including rolls, muffins, bagels, pasta); white rice, plain crackers such as Saltines, low fiber cereal (including puffed rice, cream of wheat, corn flakes)
Fats & Oils	Butter, margarine, vegetable and other oils, mayonnaise, salad dressings made without seeds or nuts
Meats	Chicken, turkey, lamb, lean pork, veal, fish and seafood, tofu
Soups	Broth, bouillon, consommé, and strained soups
Desserts	Custard, plain pudding, ice cream, sherbet or sorbet, Jell-O, or gelatin without added fruit or red/purple dye, cookies or cake made with white flour, prepared without seeds, dried fruit or nuts
Beverages	Coffee, tea, hot chocolate or cocoa, clear fruit drinks (NO PULP), soft carbonated drinks, Ensure, Boost, or Enlive without added fiber
Other	Sugar, salt, jelly, honey, syrup, lemon juice

2 WEEKS BEFORE YOUR PROCEDURE	<ul style="list-style-type: none"> Stop taking Phentermine, Phendimetrazine, or Benzphetamine
7 DAYS BEFORE YOUR PROCEDURE	<ul style="list-style-type: none"> If you are taking Ozempic (semaglutide) as an injection, hold on to after your procedure.

<p>5 DAYS BEFORE PROCEDURE</p>	<ul style="list-style-type: none"> • You must stop taking the following medications: (If cleared by your Primary Care Physician or Cardiologist): Aspirin, NSAIDS (Advil, Ibuprofen, Celebrex, Naproxen, Meloxicam, Diclofenac Aleve) Coumadin, Eliquis, Heparin, Pradaxa, Plavix, Clopidogrel, Xarelto, or other blood thinners. If you must continue, please let us know. • STOP any bulking agents and vitamin supplements: Metamucil, Citrucel, Gemfibrozil, Ginseng, Ginkgo, Garlic tablets, Vitamin E, Multi Vitamins, Fish Oil, and Iron supplements. • Tylenol is acceptable to take during this time.
<p>3 DAYS BEFORE PROCEDURE</p>	<ul style="list-style-type: none"> • <u>If diabetic and taking Steglatro, stop taking 4 days before your procedure. If you take Invokana, Farxiga, or Jardiance stop at 3 days before your procedure.</u> <p>Start a low fiber diet. (No whole grain, raw vegetables, fruit, nuts, popcorn, or seeds of any kind, etc.) Take two doses of Miralax powder laxative (1 oz total) around 4:00PM</p> <ul style="list-style-type: none"> • Stir and dissolve in 8-12 oz of water or clear beverage • (This is available over the counter at your pharmacy)
<p>2 DAYS BEFORE PROCEDURE</p>	<p>IN THE MORNING mix the GOLYTELY/NULYTELY/COLYTE (1 gallon laxative) with water and refrigerate. If it is unflavored and you wish to flavor the beverage, you may add Crystal Light powder into the gallon mix. CLEAR LIQUID DIET ALL DAY (liquids you can see through) which includes Beverages: Any soft drinks, Gatorade, Kool-Aid, fruit juices NO PULP (apple, white grape, lemonade, etc.), water, tea, coffee. SOUPS: low sodium chicken, beef or vegetable bouillon or broth. OTHER: Hard candies, Jell-O (no fruit or toppings), Popsicles (no sherbets, ice cream or fruit bars)</p> <p><u>NO DAIRY PRODUCTS, OR ANYTHING THAT IS RED OR PURPLE IN COLOR</u></p> <ul style="list-style-type: none"> • Breakfast, lunch, and Dinner- LIQUID DIET ONLY, drink all the clear liquids you want. <u>NO SOLID FOOD!</u> • Take any heart, blood pressure, seizure, or other necessary medications as usual. • Individual responses to laxatives vary. Remain close to toilet, as multiple bowel movements will occur. <p>START YOUR LAXATIVE PREP:</p> <ul style="list-style-type: none"> • BY 3PM: start drinking the GOLYTELY/NULYTELY/COLYTE. Drink the entire 1-gallon laxative. • Drink one 8-ounce glass every 10 minutes until gone. • Continue your clear liquid diet, drink as much of the clear liquids as you like until bedtime. <u>NO SOLID FOOD!</u>
<p>DAY BEFORE PROCEDURE</p>	<p>CONTINUE CLEAR LIQUID DIET ONLY (liquids you can see through) includes Beverages: Any soft drinks, Gatorade, Kool-Aid, fruit juices NO PULP (apple, white grape, lemonade, etc.), water, tea, coffee. SOUPS: low sodium chicken, beef or vegetable bouillon or broth. OTHER: Hard candies, Jell-O (no fruit or toppings), Popsicles (no sherbets, ice cream or fruit bars)</p> <p><u>NO DAIRY PRODUCTS, OR ANYTHING THAT IS RED OR PURPLE IN COLOR</u></p> <ul style="list-style-type: none"> • Insulin dependent diabetics should take ½ the usual dose of Insulin the day before your exam and ½ the usual dose on the day before your exam. Continue to monitor blood sugar as usual.
<p>EVENING BEFORE</p>	<p>By 5PM start your laxative prep:</p> <ul style="list-style-type: none"> • Pour ONE 6-ounce bottle of SUPREP into mixing container. Then pour cool drinking water and mix. Start drinking the SUPREP. Drink the entire 16-ounce laxative mixture. You must drink 2 more 16-ounce containers of water within the next hour. • Continue your clear liquid diet, drink as much of the clear liquids as you like until bedtime. <u>NO SOLID FOOD!</u>
<p>THE MORNING OF YOUR PROCEDURE</p>	<ul style="list-style-type: none"> • DO NOT chew any gum, suck on hard candies, mints, or use chewing tobacco. • DO NOT take any oral diabetic medications the morning of your exam. • At ___ (at least 5 hours prior to your procedure) Pour ONE 6-ounce bottle of SUPREP into mixing container. Then pour cool drinking water to the 16-ounce line on the container and mix. Start drinking the SUPREP. Drink the entire 16-ounce laxative mixture. You must continue 2 more 16-ounce containers of water within the next hour. • Take any heart, blood pressure, seizure, or other necessary medications 4 hours before procedure (with water is okay). • STOP DRINKING WATER 4 HOURS BEFORE YOUR PROCEDURE. • Please wear sensible shoes (no heels) and comfortable clothing, bring a pair of warm socks. • Please bring a list of medications with you. • Please come prepared to pay your outpatient procedure co-pay. Check with your insurance for your required amount.