## SUTAB PREP INSTRUCTIONS

Please read all instructions carefully

Mesquite Gastroenterology & Surgery Center	Tucson Medical Center	St. Joseph's Hospital
7445 E. Tanque Verde Road	TMC GI	St. Joseph GI
Tucson, Arizona 85715	5301 E. Grant Rd	350 N. Wilmot Rd
Phone: 520-722-0929 Fax: 520-722-0745	Tucson, Arizona 85712	Tucson, Arizona 85711
www.mesquitegsc.com	Phone: 520-327-5461	Phone: 520-873-3000
		<u> </u>

Appointment Date:	Time:		Please arrive 30 minutes prior at:
□ MSC		TMC GI	☐ St Joseph GI
You are scheduled for a Colono	oscopy with Dr. Arenas a	at the following	ng facility:

You must have a responsible driver to take you home after your procedure. This **DOES NOT INCLUDE** cab, UBER, or the equivalent therefor. <u>Medical Transportation services</u> 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.** 

- A prescription will be called into your pharmacy to purchase the **SUTAB BOWEL Preparation Kit.** Please be advised that these instructions are different from the SUTAB 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

## 2 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 ( <b>NO PULP</b> ), soft carbonated drinks,
	Ensure, Boost, or Enlive without added fiber
Other	Sugar, salt, jelly, honey, syrup, lemon juice

2 WEEKS BEFORE	Stop taking Phentermine, Phendimetrazine, or Benzphetamine
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<b>PROCEDURE</b>	
7 DAYS BEFORE YOUR PROCEDURE	If you are taking Ozempic (semaglutide) as an injection, hold on to after your procedure
ROCLDORL	You must stop taking the following medications: (If cleared by your Primary)
5 DAYS BEFORE PROCEDURE	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.
	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.
2 DAYS BEFORE	Start a low fiber diet. (No whole grain, raw vegetables, fruit, nuts, popcorn, or seeds of any kind, etc.)
PROCEDURE	Take two doses of Miralax powder laxative (1 oz total) around 4:00PM. This is an
INOCEDURE	over-the -counter laxative.
	- Stir and dissolve in 8-12 oz of water or clear beverage
	- Individual responses to laxatives vary. Remain close to a toilet, as multiple
	bowel movements will occur.
	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. <b>SOUPS</b> : low sodium chicken, beef or vegetable
	bouillon or broth. <b>OTHER</b> : Hard candies, Jell-O (no fruit or toppings), Popsicles (no
	sherbets, ice cream or fruit bars)
	NO DAIRY PRODUCTS, OR ANYTHING THAT IS RED OR PURPLE IN COLOR
	<ul> <li>Breakfast, lunch, and Dinner- LIQUID DIET ONLY, drink all the clear liquids you want. NO SOLID FOOD!</li> </ul>
	<ul> <li>Take any heart, blood pressure, seizure, or other necessary medications as usual.</li> </ul>
	<ul> <li>Insulin dependent diabetics should take ½ the usual dose of Insulin the day</li> </ul>
	before your procedure and ½ the usual dose on the day of your procedure.
	Continue to monitor blood sugar throughout your prep process.
	START YOUR FIRST BOTTLE OF LAXATIVE PREP (12 TABLETS)
	• At 5PM- Fill the provided container with 16 ounces of water. Swallow each
<b>EVENING</b>	tablet with a sip of water and drink the entire amount of water within 30 minutes.
<b>BEFORE</b>	One hour after taking the last pill you must drink another 32 ounces of water
	over the next hour and a half.
	Individual responses to laxatives vary. Remain close to a toilet, as multiple
	bowel movements will occur.
	START SECOND BOTTLE LAXATIVE (12 TABLETS)
	DO NOT chew any gum, suck on hard candies, mints or use chewing tobacco.  At a contract 7 hours prior to your procedure) Fill the provided container.
THE MORNING	<ul> <li>At (at least 7 hours prior to your procedure) Fill the provided container with <u>16 ounces of water</u>. Swallow each tablet with a sip of water and drink the</li> </ul>
OF YOUR	entire amount of water within 30 minutes.
PROCEDURE	One hour after taking the last pill you must drink another 32 ounces of water
	over the next hour and a half.
	STOP DRINKING WATER 4 HOURS BEFORE YOUR PROCEDURE.
	Take any heart, blood pressure, seizure, or other necessary medications 4 hours
	before procedure (with water is okay).
	Nothing else to drink until after your procedure.
	Please bring a list of medications with you.
	Please come prepared to pay your outpatient procedure co-pay. Check with your