



INSTRUCTIONS FOR YOUR AFTERNOON PROCEDURE

What: Colonoscopy with Suprep

Where:	FRONT RANGE ENDOSCOPY CENTER 719 N CASCADE AVE 719 – 433 – 7224	SCOPE 2920 N CASCADE AVE 719-362-2300	MEMORIAL HOSPITAL CENTRAL 1400 E BOULDER ST 719 – 365 – 5543 CHECK IN AT THE NORTH ENTRANCE	PENROSE HOSPITAL 2222 N NEVADA 719 – 776 – 8010 PRE-REGISTRATION AND SCHEDULE A PRE-OP	ST FRANCIS HOSPITAL 6001 E WOODMEN RD 719-776-8010 PRE-REGISTRATION
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When: Date: _____ **Check-in Time:** _____ **Procedure Time:** _____

Failure to adhere to the following instructions may result in cancellation of your procedure.

****IMPORTANT INSTRUCTIONS****

1. Please wear loose, comfortable clothing. Bring your insurance cards, a photo ID, and a co-pay if needed.
2. If on anticoagulants, follow the protocol prior to your procedure. Please check with your prescribing physician.
3. **Diabetics:** The day of your procedure, please hold oral diabetic medications and short acting insulin until after the procedure. Please check with your prescribing physician.
4. **Continue to take your pain, psychological, blood pressure, and seizure medications as normal, but NOT WITHIN 4 HOURS OF THE PROCEDURE. (Hold Lisinopril day of procedure)**
5. You **MUST** be accompanied by a responsible adult to drive you home. Buses and taxi services are not permitted unless you are accompanied by an adult.
6. If you cannot keep this appointment for any reason you must call the office at 719 – 636 – 1201. **48 hours'** notice is required, or you will be subject to a **\$250 fee.**
7. **Absolutely nothing to drink 4 hours prior to procedure.**
8. If your procedure is scheduled after 12:00 noon, you may have **CLEAR LIQUIDS** until 4 hours prior to your **CHECK IN** time.
9. **Please be advised that your procedure will likely be cancelled if you are found to have used illicit drugs within 14 days of your procedure or marijuana the day of your procedure.**

Please be advised

Every procedure will incur three of four separate fees that you will receive a bill for:

1. Facility fee – Facility where the procedure is performed.
2. Physician's fee – Peak Gastroenterology Associates, P.C.
3. Anesthetist's Fee
4. Pathology Fee – From the outside laboratory that performs tests on any biopsies taken during your procedure.

How to Prepare for your Colonoscopy

1. **Two to three days before you start your prep:**

- ✦ Follow the low-residue/low-fiber diet. See the attached guide.
- ✦ A low-residue/low-fiber diet is for people who need to rest their intestinal tract.
- ✦ A low-residue-low-fiber diet limits the amount of food waste that must move through the large intestine.

Points to Keep in Mind

- Avoid any food made with seeds, nuts, or raw or dried fruit.
- Avoid whole-grain breads and cereals. Consume products made from refined flour.
- Do not eat raw fruits or vegetables. Remove skins before cooking.
- Limit milk and milk products to two cups a day. Use lactose-reduced milk or lactase enzymes if you are lactose intolerant.
- Limit fats since these can increase stool bulk.
- Avoid tough, fibrous meats with gristle.

2. **The day before your procedure: Date:** _____

- ✦ You MAY drink: water, lemon/limeade, Gatorade®, Sprite®, 7 UP®, Ginger Ale, coffee and tea (without creamer, sugar and sweetener are ok), clear broth, bouillon, popsicles and Jell-O® that are not red or purple.
- ✦ You may not EAT anything!
- ✦ You may not drink anything red or purple!
- ✦ You may not consume milk/dairy!
- ✦ You may not consume alcoholic beverages!
- ✦ You may not consume dark sodas!
- ✦ You may not consume any fluids 4 hours prior to your procedure.



DO **NOT** FOLLOW THE INSTRUCTIONS THAT COME WITH THE PREP!

3. **Mixing Suprep (both bottles needed for complete preparation)**

- I. **Pour ONE (1) 6-ounce bottle of Suprep liquid into the provided mixing cup.**
- II. **Add cold clear liquid to the 16-ounce line on the cup and stir.**

Afternoon Procedure

4. When to take Suprep:

- ✦ **First dose:** At **6 PM** the evening before your procedure, drink one **16 oz. cup of diluted Suprep**. The first bowel movement usually occurs within one hour of starting to drink the prep. You will have loose/watery stools over the next one to three hours. **You must drink two more 16 oz. cups of water over the next hour to STAY HYDRATED!**
- ✦ **Second dose:** At **6:00 AM** the morning of your procedure, drink the second **16 oz. cup of diluted Suprep**. Again, you must drink two more **16 oz. cups of water over the next hour to STAY HYDRATED.**

DO NOT DRINK ANYTHING (NOT EVEN WATER) 4 HOURS PRIOR TO YOUR CHECK IN TIME

Helpful Hints

- BABY WIPES ARE KINDER THAN TOILET PAPER
- PETROLEUM JELLY SOOTHES SORE AREAS
- KEEP SMILING! ☺