

## Colonoscopy Preparation with SUTAB

Date of Procedure: \_\_\_\_\_ Arrival Time: \_\_\_\_\_

\*\*\*Once you receive notification from your Pharmacy, please pick up your prescription. Please remember to take the enclosed SUTAB coupon with you.\*\*\*

### **DO NOT FOLLOW THE INSTRUCTIONS ON THE SUTAB BOX**

**BLOODTHINNERS:** If you normally take Pletal (Cilostazol), Jantoven, Plavix (Clopidogrel), Coumadin, Warfarin, Persantine (Dipyridamole), Eliquis (Apixaban), Aggrenox, Xarelto, or Pradaxa (Dapigatran), we generally stop these for your procedure. **We have contacted your prescribing physician to make sure that it is okay for you to stop for the recommended number of days.** Upon scheduling, you should have received instructions on which day to stop. **Do not stop taking aspirin for the procedure.**

**FOUR DAYS BEFORE PROCEDURE:** Discontinue eating any foods with seeds, nuts, fruit or vegetables with skin and corn. Also, avoid multivitamins as well as iron, herbal and homeopathic supplements (unless advised by a physician).

[ X] Your doctor has recommended that you take MiraLAX in addition to the SUTAB. You will need to purchase MiraLAX 119 gram bottle and take 17 grams (one capful) of MiraLAX in 8 oz of water twice a day, beginning 3 days prior to procedure.

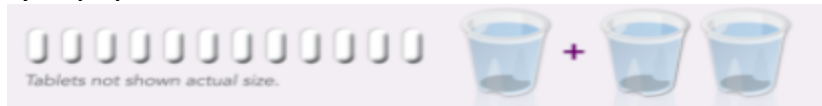
**ONE DAY BEFORE PROCEDURE:** Clear liquids such as broth or bouillon, Jell-O, popsicles, and Gatorade (NO red or purple), tea, coffee, clear soft drinks, and water are allowed. NO SOLID FOODS OR MILK PRODUCTS.

**Diabetics: Insulin Pump – Follow instructions from your Endocrinologist**

**Oral Diabetic or Insulin Dependent – Take half of your normal dose unless otherwise instructed.**

**Beginning at 5:00pm, complete steps 1 through 3:**

**Dose 1 of your prep:**



**Step 1 –Open one bottle of 12 tablets.**

**Step 2- Fill the provided container with 16 oz of water (up to the fill line). To prevent nausea, please allow a FULL 45 minutes to space out taking the 12 tablets along with first 16 ounces of water (That is approximately 4 minutes between each tablet).**

**DO NOT CRUSH OR BREAK THE TABLET IN HALF, this is a time release tablet**

**IMPORTANT:** If you experience preparation-related symptoms (for example, nausea, bloating, or cramping), pause or slow the rate of drinking the additional water until your symptoms diminish.

**Step 3- One hour after taking the last tablet. Fill the provided cup with 16 oz. of water and drink slowly over the course of 30 minutes. Make sure to complete all of the water.**

**Step 4 – 30 minutes after completing step 3, Fill the provided cup with 16 oz. of water and drink slowly over the course of another 30 minutes. Make sure to complete all of the water.**

\*\*\*Bowel movements usually start within 1-2 hours after ingestion of the first tablet and can continue 1-2 hours after you finish. If at any point during the process you feel nauseated, slow down the speed at which you drink the water. \*\*\*

### **DAY OF PROCEDURE:**

- **6 hours before your procedure, repeat steps 1 through 4 using the remaining bottle of 12 tablets of SUTAB. You must finish the final glass of clear liquid at least 3 hours before your procedure.**
- **6 hours before your procedure discontinue all forms of tobacco products**
- **You may have clear liquids, gum, and hard candy (not red or purple) up to 3 hours before your procedure.**

\*\*IF YOU TAKE BLOOD PRESSURE MEDICATIONS, YOU MAY TAKE THEM 3 HOURS PRIOR TO YOUR PROCEDURE TIME.

\*\*IF YOU ARE A DIABETIC, DO NOT TAKE YOUR MEDICATIONS BUT PLEASE BRING THEM WITH YOU. \*\*DO NOT TAKE HEPARIN OR LOVENOX ON THE DAY OF PROCEDURE.