



## Colonoscopy Prep with Dulcolax & Miralax Instruction Sheet

Patient Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Your colonoscopy is scheduled \_\_\_\_\_(Day), \_\_\_\_\_(Date) at \_\_\_\_\_(Time).

\_\_\_\_ Arrive at front desk of the Endoscopy Center by \_\_\_\_\_(Time).

\_\_\_\_ Arrive at Evangelical Hosp Surgical Desk Reception (take Elevator A to 2<sup>nd</sup> floor) by \_\_\_\_\_(Time).

**Please familiarize yourself with instructions on front and back of this instruction sheet after your procedure has been scheduled. Your preparation actually begins 7 days prior to your procedure. You will need to purchase (2) 5 mg Dulcolax laxative tablets and 1 Bottle of 238 gm (8.3 oz) Miralax Powder from your preferred pharmacy.**

Call \_\_\_\_\_ @ 570-524-2722 @ extension \_\_\_\_\_ if you have any questions.

Days Before Your Procedure	Do's and Don'ts
<b>7</b>	<b>STOP ALL SUPPLEMENTS, FLAX SEEDS, CHIA SEEDS, etc. AVOID EATING CORN</b> – due to the kernels).
<b>5</b>	<b>Discontinue</b> use of all <i>iron</i> products, multi-vitamins and <b>anti-inflammatories</b> (aspirin, Motrin, Ibuprofen, Aleve, Excedrin) <b>unless</b> these are required for a cardiac or vascular condition. Last Dose _____. For symptom management such as joint pain or headache, only use Tylenol.
<b>3-5</b>	<b>We will call your Primary Care Provider</b> to determine if and when blood thinners such as Coumadin should be stopped and we will call you with details. Anticipated Last Dose _____.
<b>1</b>  _____  _____	<p><b>Consume a clear liquid diet (see back for details) and Dulcolax-Miralax(see below).</b> The time of day to begin these protocols will depend on the scheduled time of your procedure.</p> <p><b>[Diabetics: Do not take any oral diabetic medication but take ½ the normal dose of insulin.]</b></p> <p><b>AM Procedure:</b> Start your clear liquid diet at the beginning of your day, take 2 Dulcolax tablets at 4 PM, and begin Step 1 Miralax at 6 PM, and Step 2 Miralax at 11 PM. Then <b>nothing by mouth until after procedure.</b></p> <p><b>PM Procedure:</b> Start your clear liquid diet by noon, take 2 Dulcolax tablets at 4 PM, and begin Step 1 Miralax at 6 PM, and Step 2 Miralax at <b>5 AM on the day of your procedure.</b> Then <b>nothing by mouth until after procedure.</b></p>

**Step 1 Miralax:** Mix 7 capfuls of Miralax in **32 oz** of a clear liquid drink and set aside. Drink **8 oz** of the mixture every **30 minutes** or until it is finished. Continue with your clear liquid diet as desired.

**Step 2 Miralax:** Mix 7 capfuls of Miralax in **32 oz** of a clear liquid drink and set aside. Drink **8 oz** of the mixture every **30 minutes** or until it is finished. Afterwards, **do not consume anything else by mouth until after your procedure.**  
(Xdrive, Preps)

Upon completion of thorough prepping, your bowel movements should be a clear or yellowish liquid. If they are darker, administer a Fleets enema in advance of your procedure time and call the Gastroenterology of Evangelical for further instructions @ 524-1213.

### Checklist for the Day of Your Procedure

- \_\_\_\_\_ **PLEASE TAKE** medications for **Heart conditions** and/or **high blood pressure** with a *small sip* of water before you leave home. All other medications, vitamins, or supplements can be taken *after* your procedure unless directed otherwise by your physician.
  
- \_\_\_\_\_ **Diabetics:** Do *not take any medications* until after your procedure when you start to eat again
  
- \_\_\_\_\_ Do *not* take anything by mouth after completing your prep prior to your procedure. This includes gum, cough drops, mints, alcohol, and tobacco products (including smoking).
  
- \_\_\_\_\_ You **must** have a driver, as following sedation, you are legally not permitted to drive. If you do not have a driver, your procedure will be cancelled. **Your driver will be REQUIRED TO STAY on the premises** during your procedure. If your driver refuses to stay, the provider may decide to cancel the procedure.
  
- \_\_\_\_\_ If you are prescribed to use a CPAP machine, please bring this along to your procedure.
  
- \_\_\_\_\_ If you need corrective lenses wear glasses and not contacts.
  
- \_\_\_\_\_ If you need to cancel on the day of your procedure, please call **shortly after 6 AM** 570-524-1213 if you are scheduled at the Endoscopy Center. 570-522-2624 if you are scheduled at Evangelical Community Hospital.

### Clear Liquid Diet Tips

Any liquid or thawed frozen liquid that you can “see through” is considered to be a clear liquid and can be consumed. Keep in mind drinks like Gatorade or Pedialyte will replenish fluids and electrolytes. **Avoid red and even purple** colored liquids since “staining” can appear as inflamed tissue during the procedure.

- Coffee/Tea**                      Natural and artificial sweeteners are acceptable to have with your coffee/tea but **do not use dairy or non-dairy products.**
  
- Water**                              All types including flavored and seltzer are acceptable.
  
- Juices**                             All “see through” juices – consider drinking white (vs. purple) grape and white (vs. red) cranberry juices. **(Nectars and high pulp juices are not acceptable.)**
  
- Snack Drinks**                    Sodas including Pepsi and Coca-Cola, Kool-aids, lemonades, and many other drinks are acceptable **except red, blue and purple snack drinks.**
  
- Popsicles**                        Most popsicles, when melted, are frozen clear liquids and are acceptable **except red, blue and purple. Frozen fruit and creamed fruit bars are not acceptable.**
  
- Broth**                                All clear broths are acceptable.
  
- Jello**                                 All Jello products **except red, purple, blue and JELLO with fruit.**