Bryn Mawr Medical Specialists Endoscopy Center SUTAB PM Colonoscopy Preparation

Appointment Date:	Arriv	al Time:	_		
7 Days Prior	5 Days Prior	3 Days Prior	2 Days Prior	1 Day Prior	Procedure Day
7 Days Prior 7 Days Prior Arrange a ride. You will be sedated for this procedure & <u>must</u> have an escort, over the age of 18, to drive you home. You are <u>not</u> permitted to take a cab or Uber home, unless you are accompanied by a responsible adult (family or friend). Please make necessary arrangements or speak with our office regarding ride concerns. You are not permitted to drive, work, exercise, operate equipment or drink alcohol for the remainder of the day, after your procedure. If you are diabetic, please inform your	5 Days PriorStop taking the following medications:Vitamins, HerbalSupplements, Ibuprofen (Advil, Motrin) or Aleve.If you take Aspirin because you have risk factors for coronary artery disease or stroke: DO NOT stop AspirinIf you take other blood thinners, such as Coumadin or Plavix, carefully follow the instructions, provided at the time of scheduling, regarding need to hold them. You may be asked to contact your cardiologist for special instructions to hold blood thinners.Check with your		2 Days Prior Drink at least 8 glasses of water throughout the day. Begin a "Low residue Diet" today (see handout). Please confirm your ride.	1 Day Prior Start "Clear Liquid Diet" (see handout). *No red or purple clear liquids. 7pm Start - Dose 1 <u>Step 1</u> -Open 1 bottle of 12 SUTAB tablets. <u>Step 2</u> -Fill provided container with 16oz water (up to fill line). Swallow each tablet with a sip of water, one at a time spaced 1 minute apart, and make sure to DRINK THE ENTIRE AMOUNT OF WATER over 15 to 20 minutes. <u>Step 3</u> -Approx 1 hr after the last tablet is ingested, fill provided container again with 16oz water and DRINK THE ENTIRE AMOUNT over 30 min, <u>Step 4</u> -Approximately	Procedure DayTake your heart and blood pressure medicationsAt 6am Start Dose 2 Repeat Step 1 to Step 4 from Dose 1.The bowel prep must be completed 4 hours prior to your arrival time. Then nothing by mouth.No Cannabis use of any form after midnight.Be sure to bring your completed paperwork, current insurance card and photo ID with you.Your driver must be present in the endoscopy suite, at the time of discharge.
Primary Care Physician or Endocrinologist about your scheduled procedure and discuss your diabetic medications.insura the fol -Bene -Dedu -Co-P surg (Your fin responsi	insurance company for the following: -Benefits -Deductible -Co-Pay for outpatient surgery (Your final co-pay responsibility will be			30 min after finishing the second container of water, fill again with 160z water and DRINK THE ENTIRE AMOUNT over 30 min. If you vomit the	Bryn Mawr Medical Specialists Endoscopy Center <u>is located</u> in Suite 330 of the <u>Bryn Mawr</u> <u>Medical Arts Pavilion</u> at 825 Old Lancaster Road, Bryn Mawr- NOT
made.	determined after your claim is submitted.)			preparation, please call the Physician on call at (610) 526-0881.	at Bryn Mawr Hospital.

Please See the Attached Important Information Regarding Your Procedure