

COLONOSCOPY PREPARATION INSTRUCTIONS

Patient's Name _____ **Doctor** _____

Date _____ **Arrival Time** _____ **Scheduler's Name** _____

DO call our office at least 48 hours in advance if you need to cancel your procedure or there will be a \$100.00 cancellation fee charged.

DO inform your doctor if you have a pacemaker, internal defibrillator, latex allergy, artificial heart valve or joint replacement.

DO inform your doctor if you are in a wheel chair.

DO inform your internist or endocrinologist if you are diabetic.

Oral glucose pill: Do not take this the morning of the procedure.

DO ingest only a clear liquid diet the day before your procedure.

DO the colonoscopy bowel cleansing prep as prescribed.

DO take your medications in the morning for breathing problems, seizures, heart or high blood pressure with sips of water. (Make sure you take them by 6:00 am)

DO check with your cardiologist if you take Coumadin, Ticlid, or Plavix. **(DO NOT STOP MEDICATION UNTIL YOU SPEAK TO YOUR CARDIOLOGIST).**

DO have a driver to take you home (A MUST: no taxi or walking home). The medication stays in your system for at least 12 hours.

DO have an adult member with you for the rest of the day and evening after the procedure. **Your pick up time is** _____.

DON'T take aspirin or medications containing aspirin for three days prior to your procedure such as, Aleve, Motrin, Ibuprofen, Nuprin, Lodine, Naprosyn, emprin, Advil, Ecotrin, Vioxx, Ultram, Celebrex, and Mobic. Tylenol is OK.

DON'T eat or drink anything after midnight before this procedure.

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Visit our website at www.southbaygastro.com

