

COLONOSCOPY

Name: _____

Procedure on: _____

Arrival Time: _____ Hospital: _____

DAY BEFORE PROCEDURE

- Breakfast:** **Liquid Diet** – Example: small portion of porridge, oatmeal or cream of wheat
- Lunch:** **Liquid Diet** – Example: Cream of broccoli soup or Ensure; ¼ portion of fillet of fish or mashed potato; apple sauce.
- Dinner:** **Clear liquid Diet** – Examples include: Strained fruit juices (apple, white grape, lemonade), clear broth or bouillon, coffee or tea; Gatorade, carbonated and non-carbonated soft drinks, Kool-Aid, plain Jell-o, ice popsicles.

<p><input type="checkbox"/> "Magnesium Citrate Prep."</p> <p>12:00 noon: Take 4 Bisacodyl (5 mg tablets) with an 8 oz glass of any clear liquid. (Do NOT chew or crush the bisacodyl tablets)</p> <p>6:00 p.m.: Drink 1 full bottle (10 oz) of Magnesium Citrate. Follow with several glasses of approved "clear liquids."</p> <p>6:30 p.m.: Drink at least 3 more glasses of "clear liquids," more if desired.</p> <p>Day of Procedure: (3 hours before you leave for the procedure):</p> <ul style="list-style-type: none"> - Drink 1 full bottle (10 oz) of Magnesium Citrate, as you did the day before. - Follow with 1 (8 oz) glass of clear liquid - Then nothing by mouth until after the procedure. 	<p><input type="checkbox"/> "GoLytey Prep."</p> <p>12:00 noon: Take 4 Bisacodyl (5 mg tablets) with an 8 oz glass of any clear liquid. (Do NOT chew or crush the bisacodyl tablets.)</p> <p>6:00 p.m.: Add 1 gallon of water to GoLytey. Drink <i>the entire</i> gallon over the course of 3 hours.</p>	<p><input type="checkbox"/> "GoLytey Prep." (Split Dosing)</p> <p>12:00 noon: Take 4 Bisacodyl (5 mg tablets) with an 8 oz glass of any clear liquid. (Do NOT chew or crush the bisacodyl tablets.)</p> <p>6:00 p.m.: Add 1 gallon of water to GoLytey. Drink <i>2/3 of the</i> gallon over the course of 3 hours.</p> <p>Day of Procedure: (3 hours before you leave for the procedure): Drink <i>the remaining 1/3 of the</i> Golytey.</p>
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NOTES:

- Have someone accompany and drive you home, following your procedure.
- Take all your medications as usual except as noted below.
- Stop Aspirin/Aspirin-containing products one week prior to your procedure.
- Diabetics on insulin: take half your usual dose of insulin the night of your procedure; do not take any insulin on the morning of your procedure.

ESOPHAGASTRODUOENDOSCOPY
(EGD)

Name: _____

Procedure on: _____

Arrival time: _____

Hospital: _____

PREPARATIONS

- Take all your medications as usual except as noted below.
- Stop Aspirin/Aspirin --containing products one week prior to your procedure.
- Diabetics on insulin: take half your usual dose of insulin the night of your procedure; do not take any insulin on the morning of your procedure.
- Do not eat or drink anything after midnight before your procedure.
- Have someone to accompany you back home.