

PLENVU Colonoscopy Split Dosing Instructions

*****READ ALL INSTRUCTIONS UPON RECEIPT*****

«FirstName» «LastName» Date of Appointment: «encDate» with Dr. «RendPrLName»

Be at the location marked below by:

Pre-Register at least 2 days prior with the following location:

___ Alaska Digestive Center 563-1750 ___ ARH Day Surgery 264-1952 ___ Providence Day Surgery 212-3149

(Due to Sedation, you must bring an adult driver with you to take you home safely)

Call your insurance plan to ensure they will cover your procedure. Please note there will be separate fees for the Physician, Facility, Pathology and/or Laboratory.

Medications:

Seven (7) days prior to procedure stop all:

- Prescription Iron Pills
- Stool Formers (Imodium, Fiber Supplements)

•Blood-thinning medications may need to be discontinued prior to your procedure.

Take your last dose of _____ on _____.

*****You should continue your other prescribed medication unless instructed not to*****

•Diabetic patients - If you take an oral hypoglycemic ("sugar pill"), do not take it the day of your procedure. If you are taking insulin, you should only take half (1/2) of your usual scheduled insulin dose the night before and nothing the morning of the procedure.

Foods to Avoid:

Five (5) days prior to procedure, avoid the following:

- Nuts - Seeds - Grains
- Granola - Corn - Popcorn

Upon awakening on _____, the day before your procedure, start a clear liquid diet. **(NO SOLID FOOD)**.

Diet: Avoid RED, ORANGE, or PURPLE liquids. No Milk/Milk Products and No Non-Dairy Creamer. No juices with Pulp

Acceptable List of Clear Liquids:

- Water - Apple Juice - Coffee (black)
- Gatorade - Bouillon - CrystalLite
- White grape juice - Soft Drinks - Popsicles
- Lemonade - Tea - Jell-O
- Hard Candies -White Cranberry Juice - Kool-Ai

Prep:

At 6:00 pm, on _____ the day before your procedure, use the mixing container to mix the contents of the Dose 1 pouch with at least 16 ounces of water by shaking or using a spoon until it's completely dissolved. This may take up to 2 to 3 minutes.

- Take your time- slowly finish the dose within 30 minutes.
- Refill the container with at least 16 ounces of the clear liquid of your choice. Again, take your time and slowly finish all of it within 30 minutes
- Continue clear liquid diet throughout the evening (NO SOLID FOOD)
- You will have many watery bowel movements that should begin in about 1 hour

The day of your procedure, _____ at _____ use the mixing container to mix the contents of Dose 2 (Pouch A and Pouch B) with at least 16 ounces of water by shaking or using a spoon until its completely dissolved. This may take up to 2 to 3 minutes.

- Take your time- slowly finish the dose within 30 minutes.
- Refill the container with at least 16 ounces of the clear liquid of your choice, slowly finish within 30 minutes.
- **No more liquids after _____ until your procedure is over (including water).**