

Division of Gastroenterology & Hepatology Colonoscopy Instructions – NuLYTELY/GoLYTELY/TriLyte/Colyte

Cold	onoscopy scheduled	d on//_ with Dr
Stor	ny Brook University	Hospital (14N)
	-	
Arri	ve at <u>:</u> AM/P	IVI
	IMPORTANT—please	read all instructions as soon as you receive them.
COV	ID-19 TESTING	
•	You MUST have a COVID PO	CR test 3 days before your procedure, regardless of vaccination status.
	Our office will assist with sched	
ΔS SC	OON AS POSSIBLE	
	Identify a driver for the day of	vour colonoscopy.
		ompany you when leaving the procedure unit, even if you take public
		be permitted to drive after your procedure. Your companion may wait in
	our waiting room during your p	rocedure. If they are unable to wait for 3 hours (including prep time
	and recovery), bring their phon	e number so we may contact them. If we cannot confirm your
	transportation, your colonosco	py WILL be cancelled.
	Are you on any of the following	g medications?
	Warfarin (Coumadin®),	
	Enoxaparin (Lovenox®),	Ask the physician who prescribed this medicine how to take it
	clopidogrel (Plavix®),	before and after your procedure
	or other blood thinners	
	Aspirin	You may continue taking aspirin unless otherwise instructed
		Depending on what type of insulin you are taking, you may need to reduce your insulin dose the day before the procedure. Please ask
	Insulin	your diabetes doctor for exact instructions. DO NOT TURN OFF YOUR
		INSULIN PUMP
	Oral Diabetes	
	medications	Do not take these medications on the morning of your procedure
	Do you have an ICD (defibrillat	• •
	If so, please notify your gastro	enterologist immediately for specific instructions.
KEY II	<u>NSTRUCTIONS</u>	
	•	paration products from your local pharmacy at least 5 days prior
		Lyte/Colyte (available by prescription only).
	Gas tablets (Gas-X or Mi	•
	•	NTIRE day before your colonoscopy
	···	tion until the day before your colonoscopy.
		to perform an effective colonoscopy. It is critical that you thoroughly
		ons. You are taking a split-dose bowel prep which will be taken in 2
	parts. The first dose will be tal	ken at 6 pm the day prior to the procedure and the second dose will be
	taken 6 hours prior to your sch	eduled procedure. The second dose may be in the middle of the night

but the correct timing is essential for an effective bowel prep—set an alarm clock if necessary.

☐ If you have any questions regarding the prep or you feel it is not working call 631-444-5220.



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 5 DAYS PRIOR TO COLONOSCOPY □ If applicable, stop taking any vitamins, herbal medications or iron supplements. □ Call Admitting at 444-1870 and provide your insurance information. 3 DAYS PRIOR TO COLONOSCOPY □ Confirm your transportation for the day of your procedure □ No solid foods after midnight 2 DAYS PRIOR TO COLONOSCOPY *No solid foods (ONLY clear liquids) *At 5 p.m., drink 1 bottle magnesium citrate & 3 glasses of water. *At 10 p.m., drink 1 bottle magnesium citrate & 3 glasses of water. 1 DAY BEFORE YOUR COLONOSCOPY □ You may take your regular prescription medications, unless you are instructed otherwise. □ You may not eat any solid foods or consume any alcohol today. □ Begin clear liquid diet ("clear liquid" means you can see through it when poured into a glass). It is very important to drink a lot of liquids today and drink an extra 8oz of clear liquid from 11AM-6PM. ➤ Clear juices without pulp (apple, white grape), clear broth, tea, coffee, clear soda, Gatorade®, Jell-O® ➤ NO red or purple liquids, NO milk products, NO vegetables, NO breads, NO meats
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Jell-O®
NO red or numbe liquids NO milk products NO vegetables NO breads NO meats
Two rea or purple inquitas, two films products, two vegetables, two breads, two fileats
\Box If preferred, mix the bowel prep solution ahead of time and refrigerate. Mix according to the
directions on the container. The reconstituted solution must be used within 48 hours.
☐ At 6 pm: Drink 8 oz. approximately every 10 minutes until about HALF (1/2) is done. Place the remainder of the
solution in the refrigerator. This is a split-dose prep and you will drink the remainder as directed below.
Note: It is normal to feel 'full' and 'bloated' during the prep.
It is easier to drink the prep when it is cold (on ice), and through a drinking straw.
➤ Some people may experience nausea or vomiting. If this occurs, simply wait 30 minutes before
resuming drinking. If symptoms persist, please call our office (631) 444-5220.
☐ At 9 pm: take 2 gas tablets (Gas-X or Mylanta Gas) with 8 oz. of clear fluid.
□ 10 pm: take 2 gas tablets with 8 oz. clear liquid.
\square Continue to drink clear liquids throughout the evening.
ON THE DAY OF YOUR COLONOSCOPY
□ At : AM/PM (6 hours before your scheduled procedure time: Drink the remaining bowel prep
solution, every 10 minutes, until the solution is finished.
☐ The prep and liquids should be completely finished 5 hours before your scheduled procedure.
☐ Take your heart and blood pressure medications with a sip of water.
□ Nothing else to eat or drink. Do not chew any gum or hard candy.
$\ \square$ Do not take any diabetes medications (insulin or pills) on the morning of your procedure.
☐ Wear loose fitting, comfortable clothes, with flat shoes or sneakers.
□ Do not wear jewelry or bring any valuables to the procedure.
□ Please bring a list of your current medications. You will need to complete a medical history form in the waiting room prior to the procedure. If you are unable to complete the form, please make sure you have company you who can complete the form for you
have someone accompany you who can complete the form for you. ☐ If you have an ICD (defibrillator) or a pacemaker, please bring the device card with you.

☐ Make sure a responsible adult is available to take you home. If they are not able to stay for 3 hours in

our waiting room, then bring their phone number so we may contact then.