

BURLINGTON COUNTY ENDOSCOPY CENTER
140 Mt. Holly Bypass, Unit 5
Lumberton, NJ 08048

COLONOSCOPY INSTRUCTIONS – Evening/Morning Prep (Split Dose)
Miralax (Glycolax)/Gatorade – No Prescription Required

Date of Procedure: _____

Arrival Time for Procedure: _____

Prep ***does not*** require a prescription. **Miralax** can be purchased over the counter at the pharmacy.

If you DO NOT follow these instructions your procedure may be cancelled. If you have any **questions**, or **you are unable to complete most of the prep given, or have not moved your bowels**, please call the GCSJ office **IMMEDIATELY** at **609-265-1700**. If it is after 5 pm you will receive a callback from the Doctor On-Call for the evening.

PRIOR TO YOUR PROCEDURE: Be sure to purchase **Miralax** (237g bottle); **bisacodyl (two 5mg tablets); 64 ounces of Gatorade** (**NO RED OR PURPLE**) 4 or 5 days before your “Prep Day”.

If you take **ANY BLOOD THINNERS OR MEDICATION FOR DIABETES**, follow the instructions given to you by the provider at your office visit **OR** by the nurse during your phone interview.

7 DAYS PRIOR TO THE PROCEDURE STOP THE FOLLOWING (unless otherwise instructed by your physician)

Fish Oil, IRON or Multivitamin with Iron, OTC supplements

THE ENTIRE DAY BEFORE THE PROCEDURE – (YOUR PREP DAY)

You are to be on CLEAR LIQUID DIET. **NO SOLID FOOD (NO RED or PURPLE COLORED PRODUCTS – ORANGE IS OK)**

This includes **only** the following:

1. Water
2. Clear Broth: chicken, beef, vegetable
3. Clear juices: apple, white grape, white cranberry
4. Soft drinks: soda, Gatorade, Lemonade- **NO RED OR PURPLE**
5. Coffee or tea: (hot or iced) – **NO CREAM, MILK, or POWDERED CREAMER**
6. Jell-O- **NO RED OR PURPLE**
7. Popsicles (without fruit or cream), lemon sorbet, Italian Ice

MIXING THE PREP SOLUTION: *On the morning of your prep day:* Mix all of the 237g bottle of Miralax (Glycolax) with 64 ounces of warm (room temperature) Gatorade (no red or purple). You will need to mix the Miralax with the Gatorade/Powerade in two separate one quart containers. Simply **split the bottle of Miralax into 2 containers** and then **add 32 ounces of Gatorade to each container**, *stir or shake to dissolve all of the powder*. Once all of the powder is dissolved, place containers in the refrigerator to chill solution for later.

START PREP: **Plan on being at home during your prep. For your comfort you may use Vaseline or moistened baby wipes around the anal area.**

At 3pm the day prior to your colonoscopy, take 2 bisacodyl tablets with 8 ounces of clear liquid.

Begin drinking your first bottle of prep (1 quart = 32 ounces) **after work 5pm**, but **no later than 7 pm the night before** the colonoscopy. Drink 1 glass (approximately 8 ounces) every 15 minutes once you start drinking. It will take about 1 hour to finish the first dose of prep. If you become nauseous, simply slow down and resume drinking at a slower rate. (*Drinking the prep through a straw and chilling the solution usually increases tolerance*)

Try to be up and about (active) as much as possible while drinking the solution. You may **continue to drink clear liquids from the list during the prep time**. It is important for you *to prevent yourself from becoming dehydrated so KEEP DRINKING THE RECOMMENDED CLEAR LIQUIDS up until midnight.*

MORNING OF THE PROCEDURE: Your morning prep start time will be **6 HOURS PRIOR TO YOUR PROCEDURE**. GCSJ will advise you when to begin.

*******You must finish your prep and not drink anything else within 4 hours of your procedure. NOTHING BY MOUTH AFTER FINISHING YOUR SECOND DOSE OF PREP. No hard candy, Lifesavers, mints, gum or Smoking 5 HOURS PRIOR TO YOUR PROCEDURE TIME*******

Begin your second dose the morning of your colonoscopy starting at ____am. Follow the same instructions as you did with first bottle of prep.

You **MAY** take your morning medications after your last cup of the morning prep with a **SIP of water**. However, if you are **DIABETIC**, you **MAY NOT** take your diabetes medication.

You are required to have a responsible party over the age of 18 accompany you to provide transportation after your procedure. For the safety of our patients, we do not allow our patients to drive themselves home. Public transportation is not permitted without a responsible person to accompany you in the taxi, bus, etc. We recommend that your driver wait for you during the visit to the surgical center.

PLEASE NOTE: *Female patients, of childbearing age, (up to and including the age of 50) will be required to provide a urine specimen for pregnancy testing. **This is required for the administration of anesthesia on the day of your procedure.** Please avoid urinating immediately prior to your arrival the day of your procedure to prevent delay or possible cancellation.*