COLONOSCOPY INSTRUCTIONS-SUTAB PREP Dr. Levin, Dr. Manzanillo-Devore, Dr. Cox

Location: Fairfield Medical Center, North Entrance Registration (ED Side)

401 N. Ewing St. Lancaster, OH 43130

ARRIVAL TIME: You will be contacted the day before your procedure by Fairfield Medical Center for your

arrival time. You should receive a call before 8:00pm.

You <u>MUST</u> have a driver. If you do not have a driver to and from your procedure, your procedure will be cancelled. Your procedure requires sedation, and you will be unable to drive.

MEDICATIONS:

If you take **Iron (Ferrous Sulfate/Fumarate)** products or **Multi-vitamins with Iron** you will need to **STOP** these medications **5 (five) days prior to your procedure.**

<u>If</u> you are on a blood thinner, you may need to stop this medication prior to your procedure. Our office staff will reach out to your cardiologist for confirmation and contact you with the date to stop this medication. If you have not heard from our office at least a week before your procedure, please contact our office at 740-687-9182.

You will **NOT** need to stop taking **Aspirin**.

Please note that procedures involve multiple departments and staff to ensure a seamless experience for you. Multiple missed appointments will result in the inability to reschedule your procedure and possible dismissal from the office.

Preparation Instructions:

7 DAYS PRIOR TO PROCEDURE-DO NOT CONSUME ANY SEEDS, NUTS OR TRAIL MIX

IF YOU ARE ON ANY OF THE FOLLOWING MEDICATIONS, PLEASE FOLLOW THE GUIDELINES BELOW ON HOLDING THESE MEDICATIONS

Brand Name	Generic Name	Days to Stop Before Procedure
Trulicity	Dulaglutide	7 Days
Byduren BCise	Exenatide ER	7 Days
Ozempic/Wegovy	Semaglutide	7 Days
Mounjaro	Tirzepatide	7 Days
Byetta	Exenatide	1 Day
Victoza/Saxenda	Liraglutide	1 Day
Adlyxin	Lixisenatide	1 Day
Rybelsus	Semaglutide	1 Day

A prescription for **SUTAB** will be sent to your pharmacy.

If your pharmacy does not receive this prescription, please contact our office at 740-687-9182.

^{*}DO NOT FOLLOW THE INSTRUCTIONS WRITTEN ON THE BOX*

DAY BEFORE YOUR PROCEDURE

Medications: *Take your allowed medications with a clear liquid the morning of the day before your procedure.

*If you are a Diabetic, only take *half* of your normal dose.

DO NOT EAT ANY SOLIDS FOODS FOR THE ENTIRE DAY BEFORE YOUR PROCEDURE. ALL ORAL INTAKE MUST BE A CLEAR LIQUID. DO NOT DRINK ANY LIQUID THAT IS RED, BLUE OR PURPLE IN COLOR, DAIRY PRODUCTS, OR ALCOHOL.

IF YOU ARE DIABETIC-ONLY CONSUME SUGAR FREE LIQUIDS

Examples of allowed liquids:

Coffee without cream, tea, broth, apple or white grape juice, Sprite, 7-Up, Mountain Dew, Jello (no Red, Blue or Purple), popsicles (No Red, Blue or Purple), water.

What Not To Drink or Eat

Any Solid Foods, Milk or dairy products including yogurt, applesauce, popsicles with fruit pieces, alcohol, Metamucil.

If you are unsure if you should eat something, it is best to not eat or drink it.

At 6:00pm Begin your laxative prep.

- 1. Fill the provided cup with 16 ounces of water. Open one of the bottles of Sutab tablets. Swallow each tablet with a sip of water. You should take all 12 tablets. Drink the remaining water in the cup within 15-20 minutes.
- 2. Approximately 1 hour after taking the last pill, fill the cup again with 16 ounces of water and drink the entire cup within 30 minutes.
- 3. Approximately 30 minutes after finishing the second cup of water, fill the cup once more with 16 ounces of water and drink the entire cup within 30 minutes.

You will need to remain on clear liquids until midnight. You will need to have nothing by mouth after midnight until you take your second prep the day of your procedure.

DAY OF PROCEDURE

Medications: *Take your allowed medications with a small sip of water.

DO NOT TAKE ANY DIABETIC MEDICATION THE DAY OF YOUR PROCEDURE

You may resume all medications after the procedure.

5 (five) hours prior to your arrival time: Begin your second laxative prep.

- 1. Fill the provided cup with 16 ounces of water. Open the remaining bottle of Sutab tablets. Swallow each tablet with a sip of water. You should take all 12 tablets. Drink the remaining water in the cup within 15-20 minutes.
- 2. Approximately 1 hour after taking the last pill, fill the cup again with 16 ounces of water and drink the entire cup within 30 minutes.

3. Approximately 30 minutes after finishing the second cup of water, fill the cup once more with 16 ounces of water and drink the entire cup within 30 minutes.

When your bowel movements produce a light-yellow urine like appearance you have successfully completed your bowel preparation.

If you have any questions regarding your preparation or procedure, please contact our office at 740-687-9182.

**Note: If you have access to My FMC Portal you may see your pathology report prior to the provider reviewing the report. The office will notify you of your results by phone or mail. Your patience and cooperation are appreciated.