

Colonoscopy with Magnesium Citrate

(This preparation is not for you if you have kidney failure or advanced cardiac disease)

Today's Date: _____ Patient Name: _____

You are scheduled for a Colonoscopy at North Coast Endoscopy, Suite #380, in the Lake Ambulatory Care

Center on _____ at _____ a.m/p.m. Please arrive at the office at _____ a.m./p.m.

Please let our office know at least 5 days in advance if you are regularly taking aspirin, blood thinners, or Coumadin. **DO NOT TAKE ANY OF THE FOLLOWING FOR FIVE (5) DAYS BEFORE THE PROCEDURE:** Aspirin, Motrin®, Ibuprofen®, Advil®, Aleve®, Excedrin or most arthritis medications. You **MAY** take Tylenol® if needed.

THREE DAYS BEFORE THE PROCEDURE

1. Take 1 cap full of Miralax with 8 ounces of water Twice today.

TWO DAYS BEFORE THE PROCEDURE:

2. May have Breakfast and Lunch. Have Clear Liquid Dinner. (**NO SOLID FOODS AND NOTHING WITH RED DYE**). The ONLY items you may have are black coffee, tea, orange juice with NO pulp, apple juice, bouillon/broth, water, clear pop (Ginger Ale or Sprite), and any kind of jello or popsicles as long as they are not red.
3. Take 1 cap full of Miralax with 8 ounces of water Twice today.
4. Take four (4) Dulcolax pills before bed.

ONE DAY BEFORE THE PROCEDURE:

1. **ALL DAY - NO SOLID FOOD AND NOTHING WITH RED DYE.** The ONLY items you may have are black coffee, tea, orange juice with NO pulp, apple juice, bouillon/broth, water, clear pop (Ginger Ale or Sprite), and any kind of jello or popsicles **AS LONG AS THEY ARE NOT RED.** Also, make sure to drink plenty of water throughout the day!
2. Take one bottle of Lemon Magnesium Citrate at 6 PM. (Purchase at local drug store).
3. Take one bottle of Lemon Magnesium Citrate at 10pm (Purchase at local drug store).
4. **DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT.**

THE MORNING OF THE PROCEDURE:

Nothing by mouth the morning of the procedure.

You must have a driver to take you home the day of the procedure. You are not to drive the entire day of your procedure. Your driver **MUST** return within **one** (1) hour of drop off in our office (#380).

You could possibly be here up to three (3) hours total on the day of your procedure.

It is very important for you to keep your appointment on the scheduled date. Please cancel for true emergencies only. Thank you for your cooperation.