

IMPORTANT FOR YOUR OWN SAFETY

INSTRUCTIONS MUST BE FOLLOWED OR YOUR PROCEDURE WILL BE RESCHEDULED!

ITEMS YOU WILL NEED:

- **SUTAB** prescription. Pick up from your pharmacy within 7 days. **Do not follow the instructions on the prescription box.**
- **Clear liquids** including broth and/or Gatorade (see list on back page).

MEDICATIONS AND FOOD YOU ARE REQUIRED TO HOLD:

- **Blood Thinning Medication:** Hold _____ days prior to your procedure.
After getting approval from prescribing physician discontinue all blood thinning medications (Aggrenox, Arixtra, Coumadin, Effient, Pradaxa, Warfarin, etc.)
- **Diabetes Medication:** Other than medications listed below, take one half the usual dose the day prior to procedure and omit day of procedure.
- **GLP-1 Medication (Diabetic/Weight Loss):**
 - Hold one day prior to your procedure if on daily dosing.
 - Hold 7 days prior to procedure if on weekly dosing.If for diabetic management, may need to consult with your endocrinologist. (Trulicity, Byetta, Bydureon/Exenatide, Ozempic/Wegovy, Rybelsus/Semaglutide, Victoza, Saxenda, Adlyxin, etc).
- **Oil Capsules, Iron Supplements (Ferrous Sulfate), Nuts, Seeds, and Corn:** Hold 5 days prior to your procedure.

MEDICATIONS YOU ARE REQUIRED TO TAKE:

- Heart, blood pressure, seizure, asthma medications must be taken 4 hours prior to your procedure with a sip (less than 1 oz) of clear liquid.

ONE DAY PRIOR TO YOUR PROCEDURE: Clear liquids only - no solid food

Around 6pm on the evening before your procedure complete steps 1 through 4. Do not take oral medications within 1 hour of starting each dose of SUTAB.

1. Add cold drinking water to the 16-ounce line on the container provided
2. Open 1 bottle of **SUTAB** containing 12 tablets, swallow each tablet with a sip of water and drink the entire amount over 15-20 minutes.
3. One hour after the last tablet was ingested, fill the provided container again to the 16-ounce line and slowly drink over a 30 minute period.
4. Approximately 30 minutes after finishing the container of water, repeat step 3.

Continue drinking approved clear liquids (see list) until 4 hours prior to procedure

ON THE MORNING OF YOUR PROCEDURE:

7 hours before your procedure repeat steps 1 through 4 using the remaining bottle of **SUTAB**. Do not take oral medications within 1 hour of starting each dose of SUTAB.

- **SOMEONE ELSE MUST BE AVAILABLE TO DRIVE YOU HOME**
- **NOTIFY OUR OFFICE IF YOU HAVE ANY PENDING OR UPCOMING HEART TESTING OR THERE HAS BEEN A CHANGE IN YOUR HEALTH OR MEDICATIONS SINCE SCHEDULING YOUR PROCEDURE**

Nothing by mouth after _____ day of exam.
OVER

APPROVED CLEAR LIQUIDS (NO ALCOHOL)

Allowed up to 7 hour prior to procedure

- Clear Protein / Nutritional Drinks (Ensure Clear, Protein2o, Premier Protein Clear, etc)

Allowed up to 4 hour prior to procedure

- Fruit juices without pulp (apple, grape, cranberry, etc.)
- Coffee or Tea (without milk or non-dairy creamer.)
- Jell-O (No **RED** Jell-O)
- Clear broth or bouillon (beef or chicken.)
- Sport Drinks (Gatorade, Powerade, etc.)
- Kool-Aid
- Soft Drinks (all Pepsi & Coke products.)
- Popsicles
- Water

How do I know if my prep is working after drinking the second half? Look at your stool!

- Your prep is working if the output is clear (able to see the bottom of the toilet bowl). The output may be yellow and clear like urine or a light orange and almost clear (no solid pieces).
- The prep may not be adequate and you should contact the office if the output is dark orange and somewhat clear or brown and murky (unable to see the bottom of the toilet bowl).
- Your procedure could be rescheduled or delayed if you are not prepped properly. If you are not sure that your prep is working, please call (541)779-8367.

Important Prescription Information

A prescription for Sutab has been sent to your pharmacy, please pick it up ASAP as the prescription at the pharmacy will expire and be invalid in about 7 days.

If Sutab is not covered by your insurance plan OR you determine that Sutab is too expensive, you have the option to do a less expensive alternative prep that has been approved by our physicians.

If you choose not to purchase Sutab, you will need to purchase the following items instead.

- **Miralax or generic (510 Gram bottle),**
- **4 (four) -5mg Dulcolax tablets**

For detailed alternative prep instructions, log onto our website www.gpcmedford.com and select the "PROCEDURE PREP" tab and choose the **PROCEDURE PREP-Miralax**.

Post Procedure

- If biopsies are taken during your procedure you will receive a results letter in about 2 weeks.
- If normal, the doctor will inform you of that after the procedure and a copy of the report will be given to you at that time. A copy will also be sent to your primary care provider.
- If you are still having symptoms discussed at your consult appointment please call our office @ 541-779-8367 option 1 to schedule a follow up appointment.
- **For post procedure complications please refer to the instructions in the handout given to you by the facility.**