

SUTAB 2 Day Preparation

Procedure is scheduled with: _____

Date: _____

Arrival time: _____

Procedure time: _____

Procedure Location

| Out Patient Endoscopy Locations | | | |
|--|---|---|---|
| Clayton 900 S. Lombard Street. Suite# 104 Phone: 919-341-3547 | Raleigh 2601 Lake Drive, Suite# 201 Phone: 919-783-4888 | Wake Forest 10540 Ligon Mill Road Suite# 109 Phone:919-439-3393 | Wilson 2402 Camden St SW Suite #300 Phone: 252-237-4100 |
| Out Patient at Wake Med Hospital Cary North New Bern | | Out Patient at Rex Hospital | |

You will be sedated for this procedure and you must have:

Adult driver, 18 years or older to bring you to your procedure

Adult driver must stay at the facility for the duration of the procedure

Adult driver must drive you home

If you take Phentermine it MUST be stopped 14 days prior to procedure

If you take coumadin, warfarin, pradaxa, or any other blood thinner please call our office for specific instructions

The facility has the right to delay or cancel your procedure in the event you do not have an adult with you to drive you home.

If you are unable to keep your appointment, please call our office as soon as possible to reschedule. We do reserve the right to charge for missed appointments or appointments cancelled less than 72 hours in advance.

Diabetic Patients

If taking diabetic medication:

Day before procedure:

AM --Take your normal insulin and/or oral medications.

PM --Take ½ of PM insulin dose, NO oral diabetic medication.

Day of procedure:

Do not take any diabetic medications until after the procedure.

Asthma Patients

If using an inhaler

Bring inhaler with you on day of procedure

CPAP or VPAP

If you use either of these machine, you are required to bring it with you

SUTAB 2 Day Preparation

1). **Follow instructions outlined below.** Please do not follow instructions found in the SUTAB kit received from the pharmacy.

Bowel prep will include the following items sent to your pharmacy:

1-SUTAB Kit (kit contains 2 bottles of 12 tablets)

2-Reglan tablets (generic name is Metoclopramide) or Zofran

2-Dulcolax tablets (generic name is Bisacodyl) this can be purchased over the counter, no prescription required)

2). **5 days prior**

Stop any iron supplements you are taking.

Avoid sesame seeds and nuts

3). **Day before procedure:**

Drink clear liquids **only for all snacks and meals.**

Clear liquid diet: coffee, tea, soft drinks, Jell-O, clear broth, popsicles, clear fruit juices, Gatorade, water, Snapple, powdered juices. Avoid red or purple liquids

Force fluids all day prior to and after beginning the bowel prep to keep you hydrated

No solid foods or milk products

2:00 pm: Take the 2 Dulcolax tablets.

5:30pm: Take the Reglan or Zofran tablet (this is optional). The prep may cause nausea.

Taking the Reglan or Zofran in advance of the prep should help reduce the nausea.

6:00 pm: Open one bottle of SUTABS provided in the kit.

Add drinking water up to the 16-ounce line of the container.

Swallow each tablet with a sip of water over 15-20 minutes and drink the entire amount of water in the container.

An hour after the last tablet is swallowed, drink 2 additional 16-ounce containers of water over the next hour.

~Do not plan to go anywhere after you have started drinking the prep.

The prep will cause diarrhea to cleanse your bowel for the procedure.

~Using baby wipes rather than toilet tissue to protect your rectum from irritation.

DO NOT eat or drink anything after midnight other than the 2nd prep dose as instructed below

4) Morning of procedure -- 2nd Dose

Start so you are finished 4 hours prior to arrival time.

30 minutes before starting the 2nd dose take 1-Reglan or Zofran tablet.

Add drinking water into the container up to the 16 ounce line.

Swallow each tablet with a sip of water over 15-20 minutes and drink the entire amount of water in the container.

An hour after the last tablet is swallowed, drink 2 additional 16-ounces of water over the next hour.

Do not drink anything after you have completed the prep

Do not eat anything until after the procedure

COLONOSCOPY

Colonoscopy is the visual examination of the lining of the colon. The colon is about 5-6 feet long. The purpose of the exam is to identify any abnormalities by inserting a flexible fiberoptic tube into the anus. The tube, which is about the thickness of your finger, is slowly passed through the length of the colon to the cecum.

The results obtained from the colonoscopy may help explain the cause of symptoms such as rectal bleeding, pain, or diarrhea. A screening colonoscopy is recommended for anyone age 50 or older.

How do I prepare for the examination?

The colon must be thoroughly clean in order for the exam to be accurate and complete. Please follow the enclosed preparation instructions.

What should I expect during the examination?

While lying on your left side with your knees bent, the physician will perform a finger exam of the anus and rectum. The colonoscopy is done by inserting a long flexible lighted tube into the rectum and beyond. In many cases, the instrument can be inserted throughout the entire extent of the large intestine, permitting a complete examination. The patient during the course of the examination usually experiences abdominal cramps. However, you will be sedated with medications, which will help the cramps. Be sure and tell us if you are allergic to any medications.

What is a polyp?

A polyp is a growth that is attached to the inside of the colon. Most of these growths are benign but their removal is strongly recommended so that the polyp may be examined under the microscope, permitting an exact diagnosis to be made. In addition, benign polyps at times may become malignant with the passage of time. Therefore, we believe they should be removed. At times, a polyp is discovered unexpectedly during the course of a colonoscopy examination, which is being done for other reasons. We recommend that all patients give us permission ahead of time to remove polyps if they are discovered.

What happens if a polyp is discovered?

If a polyp is discovered, a thin snare wire is passed through the colonoscope and the polyp is encircled. The snare is tightened and an electric current is passed through the wire, which cuts off the polyp. The polyp is then brought out of the colon and sent to the pathologist for further examination.

Are there any possible complications?

The possible complications of colonoscopy and polypectomy (polyp removal) include perforation (rupture) of the colon, hemorrhage from the colon and side effects due to the medications (sedatives) which are given. In very rare circumstances, death could result from a complication.

Please notify the physician if you are taking any blood thinners (coumadin, aggrenox, plavix). Please review all of your medications with the office as well as any medication allergies.

What can I expect after the exam?

You can expect to feel bloating for about 30-60 minutes after the exam. This sensation will be relieved as gas is passed. You may feel sleepy for several hours after the exam from the medications given prior to the exam. Do not plan to return to work, drive or sign any legal documents for the remainder of the day.

If your physician removes polyps or takes a tissue biopsy during your examination, his/her nurse will contact you in 7-10 business days with the pathology results.