

SUTAB Instructions

**PLEASE READ ALL INSTRUCTIONS AHEAD OF THE PROCEDURE DATE.
CALL OUR OFFICE IF YOU HAVE QUESTIONS / CONCERNS: 985-446-1958**

You will need to get your prescription for the **SUTAB® Bowel Prep Kit** filled at the pharmacy ahead of time. The kit will include 2 bottles of tablets that must be swallowed with water.

****PLEASE NOTIFY YOUR PHYSICIAN IF YOU HAVE KIDNEY DISEASE OR KIDNEY PROBLEMS.****

2 days prior to procedure	1 day prior to procedure	Day of procedure
No nuts or seeds	Start Clear Liquid Diet & Begin Prep	Arrive at scheduled time

DIET

Two days before your procedure, do not have any nuts or seeds as they are digested slowly.

The day before the procedure, remain on a clear liquid diet all day.

This includes any liquid, which when held up to a light, can be seen through.

Examples:

- Broths and Bouillons
- Fruit Juices (apple, grape, white cranberry, tang, strained lemonade / orange juice)
- Beverages such as coffee (NO milk/creamer), tea, carbonated beverages (soda/cola)
- Dessert such as popsicles, Jell-O, honey, syrup

Drink plenty of clear liquids to avoid dehydration.

****No liquid that contains RED or PURPLE dye, MILK, or ALCOHOL****

Do not eat/drink anything after midnight the night before your procedure except as instructed below:

SUTAB® BOWEL PREP KIT INSTRUCTIONS

****Please disregard the instructions that are inserted in the kit.****

DOSE #1: 5:00 PM THE AFTERNOON BEFORE YOUR PROCEDURE

- **Open 1 bottle of 12 tablets.**
- **Fill the provided container with 16 ounces of water (up to fill line). Swallow each tablet with a sip of water and drink the entire amount over 20 minutes.**
- **You MUST drink two (2) more 16-ounce containers of water over the next 2 hours.**

DOSE #2: _____

- **Open 2nd bottle of 12 tablets.**
- **Fill the provided container with 16 ounces of water (up to fill line). Swallow each tablet with a sip of water and drink the entire amount over 20 minutes.**
- **You MUST drink two (2) more 16-ounce containers of water over the next 1 hour.**

COLONOSCOPY – GUIDELINES

****PLEASE READ COMPLETELY AT LEAST ONE WEEK PRIOR TO YOUR PROCEDURE AND CALL OUR OFFICE AT 985-446-1958 TO SPEAK TO A NURSE TO DISCUSS ANY QUESTIONS/ CONCERNS.****

• *****MEDICATIONS*****

- **Do not take any medication by mouth the morning of your procedure. It is okay to continue to use your inhaler – and we would like for you to bring your inhaler with you.**
- If you take any **PRESCRIPTION BLOOD THINNERS**, **please inform us immediately** – you will need clearance from the physician who prescribed the medication to stop taking them prior to your procedure. We can help you to obtain the clearance.
- Please continue to take your routine medications as scheduled up until midnight the night before your procedure.

GENERAL INFORMATION

Please inform us as soon as possible before the date of your procedure if you have any of the following: Internal defibrillator, Latex allergy, Home Oxygen

• **DIABETIC GUIDELINES**

- **INFORM THE PHYSICIAN TREATING YOU FOR DIABETES OF YOUR UPCOMING PROCEDURE**
- The morning of your test, do not take your diabetic medication. Check your blood sugar at home before your appointment. Report the result to the nurse who takes you in to the procedure area.
- Use sugar free drinks for liquids (like Crystal Light) during the prep to avoid increase in blood sugar. Monitor your blood sugar closely during your prep to prevent low blood sugar.

• **HELPFUL TIPS**

- Drinking the prep through a straw and chilling the solution may improve tolerance.
- Use baby wipes instead of toilet paper. Have Vaseline or Desitin handy.

DRIVING / ACCOMPANYING ADULT

You will be sedated and cannot drive, or use a taxi/bus after the procedure. An adult must accompany you – preferably a family member. **This person must remain in our office the entire time of your visit.** If this is not followed, your procedure may be cancelled.

RESULTS

If a biopsy is taken, the results may take a week to come in and be reviewed by your physician. Once reviewed, a nurse will call you to explain the results and give you further instructions.

THIBODAUx ENDOSCOPY CENTER, LLC

****IMPORTANT PATIENT INFORMATION****

1. **NOTHING** to eat or drink after midnight (the night before procedure).
2. **NO MEDICATIONS** the morning of your procedure.
3. You will be put to sleep for your procedure. This is why you are instructed **NOT to EAT, DRINK, or take MEDICATIONS** before your

procedure.

4. The time you are instructed to be at the center is your **ARRIVAL TIME**, not necessarily your **PROCEDURE TIME**. An anesthesia interview and chart update has to be done before your procedure to document any missed information or changes since your procedure was scheduled. We do respect your time as well as that of your driver and strive to make this process as efficient as possible.