

## SUTAB PREP INSTRUCTIONS

Please read all instructions carefully

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| Mesquite Gastroenterology & Surgery Center<br>7445 E. Tanque Verde Road<br>Tucson, Arizona 85715<br>Phone: 520-722-0929 Fax: 520-722-0745<br>www.mesquitegsc.com | Tucson Medical Center<br>TMC GI<br>5301 E. Grant Rd<br>Tucson, Arizona 85712<br>Phone: 520-327-5461 | St. Joseph's Hospital<br>St. Joseph GI<br>350 N. Wilmot Rd<br>Tucson, Arizona 85711<br>Phone: 520-873-3000 |
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You are scheduled for a Colonoscopy with Dr. Arenas at the following facility:

- MSC
  TMC GI
 St Joseph GI

You must have a responsible driver to take you home after your procedure. This **DOES NOT INCLUDE** cab, UBER, or the equivalent thereof. Medical Transportation services are acceptable. If you cannot arrange for a responsible individual to take you home, please notify Mesquite Gastroenterology or Surgery Center. **If you arrive at the Surgery Center without acceptable transportation your procedure will be postponed.**

- A prescription will be called into your pharmacy to purchase the **SUTAB BOWEL Preparation Kit**. Please be advised that these instructions are different from the SUTAB package instructions.
- Arrive a half-hour prior to your procedure time at Mesquite. If scheduled at TMC or St. Josephs, arrive 1 hour prior to your procedure time.
- If you have any questions about these instructions, please contact our office at **520-722-0744 EXT. 214**

### 2 DAYS BEFORE COLONOSCOPY PROCEDURE: PLEASE FOLLOW LOW-FIBER DIET

Listed are some examples of food options that are okay to eat during your low fiber diet.

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| Milk & Dairy    | Milk, cream, hot chocolate, buttermilk, yogurt, cheese including cottage cheese, sour cream   |
| Breads & Grains | Breads and grains made with refined white flour (including rolls, muffins, bagels, pasta); white rice, plain crackers such as Saltines, low fiber cereal (including puffed rice, cream of wheat, corn flakes)     |
| Fats & oils     | Butter, margarine, vegetable and other oils, mayonnaise, salad dressings made without seeds or nuts   |
| Meats           | Chicken, turkey, lamb, lean pork, veal, fish and seafood, tofu  |
| Soups           | Broth, bouillon, consommé, and strained soups   |
| Desserts        | Custard, plain pudding, ice cream, sherbet or sorbet, Jell-O, or gelatin <b><u>without added fruit or red/purple dye</u></b> , cookies or cake made with white flour, prepared without seeds, dried fruit or nuts |
| Beverages       | Coffee, tea, hot chocolate or cocoa, clear fruit drinks ( <b>NO PULP</b> ), soft carbonated drinks, Ensure, Boost, or Enlive <b><u>without added fiber</u></b>  |
| Other           | Sugar, salt, jelly, honey, syrup, lemon juice   |

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| <p><b>2 WEEKS BEFORE YOUR PROCEDURE</b></p> | <ul style="list-style-type: none"> <li>• <b>Stop taking Phentermine, Phendimetrazine, or Benzphetamine</b></li> </ul>   |
| <p><b>7 DAYS BEFORE YOUR PROCEDURE</b></p>  | <ul style="list-style-type: none"> <li>➤ <b>If you are taking Ozempic, Rybelsus, Mounjaro, Wegovy or other semaglutide containing medications an injection, hold until after your procedure. Oral doses need to be held 24 hours prior to the procedure.</b></li> <li>•</li> </ul>  |
| <p><b>5 DAYS BEFORE PROCEDURE</b></p>       | <ul style="list-style-type: none"> <li>• <b><u>You must stop taking the following medications:</u></b> (If cleared by your Primary Care Physician or Cardiologist): Aspirin, NSAIDS (Advil, Ibuprofen, Celebrex, Naproxen, Meloxicam, Diclofenac Aleve) Coumadin, Eliquis, Heparin, Pradaxa, Plavix, Clopidogrel, Xarelto, or other blood thinners. If you must continue, please let us know.</li> <li>• <b><u>STOP any bulking agents and vitamin supplements:</u></b> Metamucil, Citrucel, Gemfibrozil, Ginseng, Ginkgo, Garlic tablets, Vitamin E, Multi Vitamins, Fish Oil, and Iron supplements.</li> <li>• Tylenol is acceptable to take during this time.</li> <li>• <b><u>If diabetic and taking Steglatro, stop taking 4 days before your procedure. If you take Invokana, Farxiga or Jardiance stop at 3 days before your procedure.</u></b></li> </ul>   |
| <p><b>2 DAYS BEFORE PROCEDURE</b></p>       | <p>Start a low fiber diet. (No whole grain, raw vegetables, fruit, nuts, popcorn, or seeds of any kind, etc.)</p> <p><b><u>Take two doses of Miralax powder laxative ( 1 oz total) around 4:00PM. This is an over-the-counter laxative.</u></b></p> <ul style="list-style-type: none"> <li>- Stir and dissolve in 8-12 oz of water or clear beverage</li> <li>- Individual responses to laxatives vary. Remain close to a toilet, as multiple bowel movements will occur.</li> </ul>  |
|   | <p><b>CLEAR LIQUID DIET ALL DAY</b> (liquids you can see through) which includes:<br/> <b>Beverages:</b> Any soft drinks, Gatorade, Kool-Aid, fruit juices <b>NO PULP</b> (apple, white grape, lemonade, etc.), water, tea, coffee. <b>SOUPS:</b> low sodium chicken, beef or vegetable bouillon or broth. <b>OTHER:</b> Hard candies, Jell-O (no fruit or toppings), Popsicles (no sherbets, ice cream or fruit bars)</p> <p><b><u>NO DAIRY PRODUCTS, OR ANYTHING THAT IS RED OR PURPLE IN COLOR</u></b></p> <ul style="list-style-type: none"> <li>• Breakfast, lunch, and Dinner- <b>LIQUID DIET ONLY</b>, drink all the clear liquids you want. <b>NO SOLID FOOD!</b></li> <li>• Take any heart, blood pressure, seizure, or other necessary medications as usual.</li> <li>• Insulin dependent diabetics should take ½ the usual dose of Insulin the day before your procedure and ½ the usual dose on the day of your procedure. Continue to monitor blood sugar throughout your prep process.</li> </ul> |
| <p><b>EVENING BEFORE</b></p>                | <p><b>START YOUR FIRST BOTTLE OF LAXATIVE PREP (12 TABLETS)</b></p> <ul style="list-style-type: none"> <li>• <b>At 5PM-</b> Fill the provided container with <u>16 ounces of water</u>. Swallow each tablet with a sip of water and drink the entire amount of water within 30 minutes.</li> <li>• <b>One hour</b> after taking the last pill you must drink another 32 ounces of water over the next hour and a half.</li> <li>• Individual responses to laxatives vary. Remain close to a toilet, as multiple bowel movements will occur.</li> </ul>  |
| <p><b>THE MORNING OF YOUR PROCEDURE</b></p> | <p><b>START SECOND BOTTLE LAXATIVE (12 TABLETS)</b></p> <ul style="list-style-type: none"> <li>• <b>DO NOT</b> chew any gum, suck on hard candies, mints or use chewing tobacco.</li> <li>• At ____ (at least 7 hours prior to your procedure) Fill the provided container with <u>16 ounces of water</u>. Swallow each tablet with a sip of water and drink the entire amount of water within 30 minutes.</li> <li>• <b>One hour</b> after taking the last pill you must drink another 32 ounces of water over the next hour and a half.</li> <li>• <b>STOP DRINKING WATER 4 HOURS BEFORE YOUR PROCEDURE.</b></li> <li>• Take any heart, blood pressure, seizure, or other necessary medications 4 hours before procedure (with water is okay).</li> <li>• Nothing else to drink until after your procedure.</li> <li>• Please bring a list of medications with you.</li> <li>• Please come prepared to pay your outpatient procedure co-pay. Check with your insurance for your required amount.</li> </ul>   |