

2 DAY COLONOSCOPY PREPARATION: MIRALAX EXTENDED					
PLEASE PURCHASE	<ul style="list-style-type: none"> Over the counter at local pharmacy <ul style="list-style-type: none"> Dulcolax (bisacodyl) 5 mg pills (need 3 pills total) Miralax 238 gram bottle x 2 Gatorade – 28 (or 32) oz bottles x3 (No Red, Purple or Orange Color) 				
7 DAYS BEFORE	<ul style="list-style-type: none"> Stop fiber supplements and iron supplements, including multivitamins 				
4 DAYS BEFORE	<table border="1"> <thead> <tr> <th>Begin a LOW FIBER Diet including:</th> <th>High Fiber Foods to AVOID:</th> </tr> </thead> <tbody> <tr> <td> <ul style="list-style-type: none"> White or sour dough bread White Rice, Pasta Eggs, Chicken, Turkey, Fish Cheese, Yogurt, Milk, Ice Cream, Pudding Canned or cooked fruit/vegetables without skin or peel (carrots, cucumbers, potatoes) Pureed fruits/vegetables (smoothies, strained puree soups) Creamy peanut or almond butter </td> <td> <ul style="list-style-type: none"> Raw fruits/vegetables with seeds, skin, membranes Cooked/canned fruit/vegetables with skin/seeds/peel Whole wheat or multigrain bread or crackers Nuts, Seeds Popcorn Oatmeal, bran cereal Brown rice, quinoa </td> </tr> </tbody> </table>	Begin a LOW FIBER Diet including:	High Fiber Foods to AVOID:	<ul style="list-style-type: none"> White or sour dough bread White Rice, Pasta Eggs, Chicken, Turkey, Fish Cheese, Yogurt, Milk, Ice Cream, Pudding Canned or cooked fruit/vegetables without skin or peel (carrots, cucumbers, potatoes) Pureed fruits/vegetables (smoothies, strained puree soups) Creamy peanut or almond butter 	<ul style="list-style-type: none"> Raw fruits/vegetables with seeds, skin, membranes Cooked/canned fruit/vegetables with skin/seeds/peel Whole wheat or multigrain bread or crackers Nuts, Seeds Popcorn Oatmeal, bran cereal Brown rice, quinoa
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3 DAYS BEFORE	<ul style="list-style-type: none"> Continue LOW FIBER Diet 				
2 DAYS BEFORE	<ul style="list-style-type: none"> Continue LOW FIBER Diet 7PM: <ul style="list-style-type: none"> Pour half of a Miralax container into Gatorade bottle #1. Then shake until it is dissolved Drink the first 28 (or 32) oz bottle of Miralax/Gatorade mix: a cup every 15 minutes until completed 				
1 DAY BEFORE	<ul style="list-style-type: none"> MORNING: Start a CLEAR LIQUID diet <ul style="list-style-type: none"> Apple, White Grape, White Cranberry Juices without Pulp Clear Soup/Broth Tea or Black coffee (no milk/creamer) Gatorade/Powerade (no red, purple or orange color) Jello (no red, purple, or orange color) Popsicles (no red, purple, or orange color) 6PM: Take Dulcolax 3 tablets with sips of water 7PM: <ul style="list-style-type: none"> Pour half of the Miralax container into Gatorade bottle #2 and half into the Gatorade bottle #3; shake until dissolved Drink the second 28 (or 32) oz bottle of Miralax/Gatorade mix: 				

	<p>a cup every 15 minutes until completed</p> <ul style="list-style-type: none"> ○ Put the third 32 oz bottle in the refrigerator ● Bowel movements should begin 1-2 hours after starting the Miralax/Gatorade mix but the effect can be delayed by up to 4-6 hours
DAY OF COLONOSCOPY	
5 HOURS BEFORE	<ul style="list-style-type: none"> ● Drink the third 28 (or 32) oz bottle of Miralax/Gatorade mix <ul style="list-style-type: none"> ○ A cup every 15 minutes until completed ● By the end of the cleanse your stool should be a clear liquid with yellow or green tinge
3 HOURS BEFORE	<ul style="list-style-type: none"> ● Stop drinking/eating clear liquids ● Do not chew gum or mints ● Take regular medications with a small sip of water the morning of your procedure unless otherwise instructed by your physician
30 MIN BEFORE	<ul style="list-style-type: none"> ● Arrive at endoscopy suite 30 MIN PRE PROCEDURE (no later) ● Bring list of current medications including doses ● Bring a Photo ID and Insurance Card ● Bring any applicable Referrals ● Please do not bring any valuables

GENERAL INSTRUCTIONS:

URINE PREGNANCY TESTING	<ul style="list-style-type: none"> ● If you are a premenopausal woman, you will need to submit a urine sample upon office check in
IF YOU HAVE DIABETES	<ul style="list-style-type: none"> ● Contact your primary care doctor or endocrinologist for instructions regarding your medications
IF YOU TAKE MEDICATION TO THIN YOUR BLOOD	<ul style="list-style-type: none"> ● Contact your gastroenterologist for further instructions at (212) 427-8761 ● Medications include but are not limited to: <ul style="list-style-type: none"> ○ Heparin, Lovenox, Warfarin (Coumadin), Rivaroxaban (Xarelto), Apixaban (Eliquis), Edoxaban (Lixiana, Savaysa), Betrixaban (Bevyxxa), Clopidigrel (Plavix), Prasugrel (Effient), Brilinta (Ticagrelor)
IF YOU TAKE WEIGHT LOSS MEDICATIONS	<ul style="list-style-type: none"> ● Alert your GI provider to discuss holding your medication(s) prior to your procedure
IF YOU TAKE ASPIRIN OR BLOOD PRESSURE MEDICATIONS	<ul style="list-style-type: none"> ● You may continue to take these medications
ESCORT	<ul style="list-style-type: none"> ● Please ensure that you have an escort (responsible adult over the age of 18) to pick you up at the end of the procedure