GASTRO HEALTH

YOUR COLONOSCOPY IS SCHEDULED FOR:

Date of Procedure: _____

Gastro Health Physician: _____

Arrival Time: _____

Facility/address: _____

Phone: _____

Registration Assistant: _____

Appointments missed or canceled with less than 72 hours' notice may result in a fee in accordance with applicable office policies.

DAY BEFORE-CLEAR LIQUID PREPARATION INSTRUCTIONS FOR YOUR COLONOSCOPY WITH PLENVU

PLEASE REVIEW THE INSTRUCTIONS ***AT LEAST 3 DAYS PRIOR*** TO THE PROCEDURE USE THESE PREPARATION INSTRUCTIONS ***AND NOT*** THOSE INCLUDED WITH THE PLENVU BOX.



It is important that you follow these directions carefully and complete the entire preparation to ensure the most effective cleansing.

- If you are taking any blood thinners and/or insulin **AND** this was **NOT** discussed with your doctor at the time of scheduling the procedure, please call us **BEFORE** starting the preparation. These include, but are not limited to *Aspirin, Coumadin-(Warfarin), Plavix-(Clopidogrel), Xarelto-(Rivaroxaban), Pradaxa-(Dabigatran), Eliquis-(Apixaban), Arixtra-(Fondaparinux), Effient-(Prasugrel), Aggrenox-(Aspirin/Dipyridamole), and all NSAIDs (Ibuprofen, Motrin, Aleve, Naproxen, Celebrex, Mobic).*
- **YOU MUST CONTINUE TO TAKE ALL** your other medications every day prior to the colonoscopy AND take them with a small sip of water on the day of your colonoscopy.
- **IF YOU ARE DIABETIC, DO NOT** take your diabetic pills the evening prior or day of the colonoscopy.
- Please plan to have someone drive you home after the procedure. You will not be allowed to drive yourself home.
- You cannot take an Uber, Lyft, taxi, or public transportation home from your procedure without an adult companion.

DAY BEFORE PREPARATION INSTRUCTIONS FOR YOUR COLONOSCOPY WITH PLENVU

3 DAYS BEFORE THE PROCEDURE

STOP eating fruits and vegetables including beans, corn and seeds.

THE DAY PRIOR TO THE PROCEDURE

You may not have any solid food. If desired you may have a liquid yogurt only for breakfast before 10 AM, no later. After 10 am you may have only clear liquids. For example: water, coffee, tea, broth, sodas, apple juice, Gatorade, Kool-aid, Jell-O, popsicles, and hard candy.

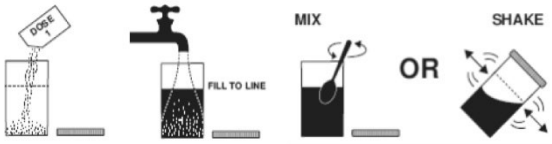
DO NOT DRINK MILK. DO NOT DRINK LIQUIDS THAT ARE RED OR PURPLE IN COLOR.

BEGIN YOUR PLENVU

STEP 1:

For best results mix ahead and refrigerate the solution prior to drinking.

- Empty **Dose 1** into the mixing container that comes with your PLENVU.
- Add lukewarm water (16 oz) to the top line of the container and mix or shake to completely dissolve.



STEP 2:

Starting between 5 and 7 PM, begin drinking Dose 1. Finish the entire contents within 30 minutes.

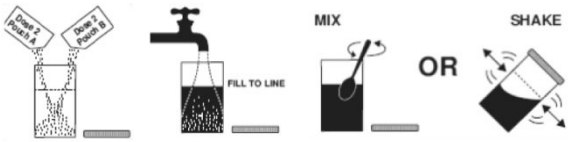
STEP 3:

- Rinse the mixing container with water. Refill to the fill line (16 oz) with any clear liquid of your choice.
- Drink the entire contents of the mixing container over the next 30 minutes.
- Continue drinking additional clear liquids. **(At least 16 ounces)**

THE DAY OF THE PROCEDURE

STEP 4:

Follow same directions as Step 1 using **Dose 2** pouches A and B.



STEP 5:

Starting at _____ **(4 hours before the arrival time)** begin drinking Dose 2. Finish the entire contents within 30 minutes.

STEP 6:

- Rinse the mixing container with water. Refill to the fill line (16 oz) with any clear liquid of your choice.
- Drink the entire contents of the mixing container over the next 30 minutes.
- Continue drinking additional clear liquids. **(At least 16 ounces).**

YOU MUST COMPLETE STEP 6 AND STOP ALL LIQUIDS BY _____ (At least 2 hours before your Arrival Time)

Please call us if you have any questions or if you are having difficulty with the preparation.