

Procedure Instruction Packet

READ this instruction packet completely at least 7 days prior to your procedure!!

**Your procedure may be cancelled if these instructions are not followed.

Date o	f Procedure:
Proced	ure Scheduled:
Requir	ed Arrival Time:
>	We ask all patients to arrive 1 hour prior to the estimated start time of their procedure.
Estima	ted Start Time of Procedure:
>	Note: The exact time for each procedure varies from patient to patient. Our physicians give each

Please print this packet out if you are receiving it by email.

It is important that you read the instructions a few times before your procedure. We recommend you set a reminder on your calendar 7-10 days prior to your procedure to ensure you are prepared and understand your restrictions.

Important: If you are scheduled for a colonoscopy, follow our instructions <u>ONLY</u>. Do **NOT** follow the instructions within the colonoscopy prep kit you receive at the pharmacy.

Following the instructions within this packet is very important. We want to ensure your procedure will be performed with success.

You will receive a confirmation call or text 72 hours prior to your scheduled procedure.

Colonoscopy Prep Instructions with Clenpiq Prescription

YOUR BOWEL Prep IS VERY IMPORTANT- Please read instructions carefully!

10 Days Prior	1 Week Prior	5 Days Prior	2 Days Prior	1 Day Prior	Procedure Day
You must STOP taking Phentermine,	Pick up your prescription.	Stop consuming	Drink at least four 8oz. glasses of water throughout the day.	Begin clear liquid. NO Solid foods today. Red, purple or blue colored liquids are not allowed.	Clenpiq Prep- Part 2 If your procedure is scheduled before 1130am: At 3am complete below steps.
or any medication containing <u>Phentermine</u> .	Only follow these instructions. Do NOT follow box instructions.	all food with seeds, corn and		Acceptable clear liquids include: water, clear broth, apple juice, white cranberry juice, white grape juice,	If your procedure is scheduled after 1130am: At 730am complete below steps. It should take 1 hour to complete
Examples: Qsymia, Qnexa, Adipex-P,	If you take dietary, herbal or fiber supplements, or medications	nuts. <u>Stop</u> taking	Blood Pressure and Heart medications: Continue to take these medications as	soda, gelatin (Jello), popsicles, coffee, and tea (no milk or creamer). If you are taking diabetic medication,	Step 1 - Drink 2 nd bottle of Clenpiq solution. Shake well prior to drinking. Drink all Solution in 2nd bottle.
Suprenza, Fastin or Phentercot.	containing iron, discontinue these 7 days before your appointment. ibuprofen, Advil, Aleve and NSAIDs	directed. Take them the day of your procedure with a small sip of water no	cut your dose in half this day and do not take any diabetic medication day of procedure. If you have an insulin pump, check with	Step 2- Drink <u>four- 8oz glasses of clear liquid (total of 32oz)</u> . Drink each 8oz every 15 minutes. It should take you no more than 1 hour to complete	
	If you take Coumadin, Plavix, Pradaxa, Xarelto,	You may take Tylenol as needed. Inha Con	less than 2 hours before procedure. Inhalers and Nasal Spray: Continue to take these medications as directed. Bring with you day of procedure.	prescribing MD for instructions.	these steps. **You need to finish 4 hours prior to your procedure.
	Eliquis or other blood thinners: You must obtain			Drink at least four 8oz. glasses of water throughout the day. Do NOT drink alcohol the day before your procedure.	Nothing by mouth at least 4 hours prior to scheduled procedure time-including gum, hard candy or mints.
	permission to withhold this			6pm: Begin Clenpiq Prep- Part 1	No smoking the day of procedure.
	medication prior to your procedure. Contact our pre- operative nurse for		If you have a fever, cold, or respiratory symptoms within 48 hours of your	Step 1 -Drink 1 st bottle of Clenpiq solution. Shake well prior to drinking. Drink all Solution in 1 st bottle.	You may take your essential morning medications with a small sip of water, <u>at least</u> 2 hours prior to your procedure, unless otherwise directed by your physician.
	concerns or questions at 410 224-3636		procedure- call us. NO Solid Foods after	Step 2- Drink <u>five 8oz glasses of clear</u> <u>liquid (total of 40oz). Drink each 8oz</u> every 15 minutes.	You will need: -Insurance Cards -Driver's License/Photo ID
	You MAY continue to take: once daily aspirin (81mg or 325mg daily)		midnight	It should take you no more than 90 minutes to complete these steps.	-Any co-insurance fees due -A responsible adult driver to drive you home. A taxi or shuttle is not an approved means of transportation unless you have a family member or friend with you. You may not drive until the day after your procedure.

Medication Record Form

- This form must be <u>completed</u> prior to your procedure.
- Please list all prescriptions, over the counter medications, vitamins and supplements taken in the last month.
- Please remember to review medication instructions provided on page 1 of your procedure instructions.
- If you have questions regarding your medications prior to your procedure, please call 410-224-3636 and ask to speak with our procedure coordinator.

Medication Name	Dose	Frequency and Time(s) Taken	Date / Time of Last Dose

Patient Signature	Date

Medication Record Form

Patient Signature	Dat	re		