

REMINDER

Nothing to
drink 6 hours
prior to your
procedure
time.

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SUPREP BOWEL PREPARATION (DAY BEFORE/ AND DAY OF YOUR PROCEDURE)

- o *SuPrep prescription will be sent to your pharmacy*

7 days prior to the procedure:

1. **PLEASE DISCONTINUE** all blood thinning and anti-inflammatory medications. This includes, but not limited to, Coumadin, Plavix, Iron supplements, Multi-Vitamins (Vitamin E) and Fish oil. Also discontinue any NSAID's (nonsteroidal anti-inflammatory drugs) such as, but not limited to, aspirin, aspirin type products, Ibuprofen, Aleve, Advil, etc. ***TYLENOL MAY BE TAKEN***
2. If your doctor has prescribed any of the medications listed above, please consult with your doctor before discontinuing.
3. If you are diabetic, check with your primary care doctor regarding diet and medication instructions.

3 days prior to the procedure:

1. AVOID- Corn, Nuts, popcorn, foods with seeds, and large amounts of red meat.
2. Drink plenty of liquids to be well hydrated. This will be helpful for the tolerance of the colonoscopy prep.

Day before the procedure: SUN MON TUES WED THURS FRI

Do not drink alcohol

Do not eat any solid food. ONLY consume clear liquids.

The Dosing Regimen is a split-dose (2-day) regimen.

DOSE 1: At 4:00 PM

Step 1: Pour ONE (1) 6-ounce bottle of SUPREP liquid into the mixing container.

Step 2: Add cool drinking water to the 16-ounce line on the container and mix.

Step 3: Drink ALL the liquid in the container.

Step 4: You must drink two (2) more 16-ounce containers of water over the next 1 hour.

Day of procedure:

You will continue a clear liquid diet up until **SIX HOURS** prior to you scheduled procedure time.

DOSE 2: At _____ AM *MORNING OF THE PROCEDURE* (8 hrs prior to procedure)

Continue to consume only clear liquids.

Repeat **STEP 1 to STEP 4** from Dose 1.

IMPORTANT: You must complete all prep required water at least 6 hours before colonoscopy

Nothing to drink after: _____.

NOTHING TO DRINK 6 HOURS PRIOR TO YOUR PROCEDURE TIME

Take your usual blood pressure and heart medication prior to fasting period. If you have asthma, please bring your inhalers with you. **Patients with Diabetes:** Decrease Insulin dose by 1/3-1/2 on the day of the bowel preparation, and NO Insulin on the day of the procedure. Patients on Oral Diabetes meds: NO Oral Diabetes Meds on the morning of the procedure day.

You will need to be close to a bathroom. You will have progressively looser bowel movements over the next several hours. Individual responses to laxatives vary. This preparation will cause multiple bowel movements. Consider using **Vaseline, Aquaphor or diaper rash cream/ zinc oxide** around the anal opening before starting the prep and after each bowel movement to minimize irritation from passing many bowel movements.

Make arrangements for a responsible adult 18+ or medical transport to drive you home after your colonoscopy. You may **NOT** use a bus, taxi, or a rideshare application such as an Uber, without a responsible adult to accompany you to your home. You are **NOT** to drive for the remainder of the day. Please expect to spend up to **1-1.5 hours** (from check in time) at the facility.

CLEAR LIQUID DIET

Beverages:

Coffee (no cream)

Tea

7UP / Sprite/ Ginger Ale

Apple Juice/ White grape juice

Lemon-Lime Gatorade / Crystal Light

Lemonade

Soups:

Bouillon

Fat Free chicken broth

Clear broth

Sweets & Desserts:

Honey

Sugar

Green/Yellow/ White Popsicles

Butterscotch Candy

Hard Candy (Green, Yellow, or Clear)

Jolly Ranchers (Green, Yellow, or Clear)

Jell-o (Plain, Lemon Lime, or Pineapple (no chunks))

NO CHEWING TOBACCO

NO SOLID FOODS

CLEAR LIQUIDS ONLY

NO RED, PURPLE, OR BLUE DYES

No Dairy Products

Deviating from this diet will prevent adequate preparation of the colon for the exam and can result in needing to repeat the procedure at a later date.