



Attleboro Gastroenterology, P.C.

Mark A. Robbin, M.D.
David N. Schwartz, M.D., F.A.C.G.

Sonia H. Uchman, M.D.
David A. Cohen, M.D.
Amber J. Trudel, MSN, N.P.

The Half NuLytely Prep / AFTERNOON Colonoscopy

Purchase Dulcolax (Bisacodyl) tablets, 4 (5mg tablets) or 2 (10mg tablets), **total 20mgs**, found in the laxative aisle. **Fill prescription** for jug of the Trilyte, Colyte or Nulytely generic powder.

FIVE DAYS BEFORE: Please **stop** aspirin, aspirin containing products, and anti-inflammatory meds (Ibuprofen, Motrin, Advil, Aleve, and Naprosyn). **You may take Tylenol.**

***If you take Coumadin (Warfarin) stop this for **5 days** and Plavix for **3 days** unless otherwise instructed. You **MUST** notify the person that prescribed this drug of the date of your procedure for dose instructions after the procedure.

THE DAY BEFORE

You **may** have a light breakfast before **8AM**. You must then remain on ***CLEAR** liquids only. Please **do not eat any solid foods** until after the procedure!

At 5PM - Take Dulcolax tablets (**20 mgs**) by mouth with clear liquids.

At 8 PM - **Mix** the Colyte preparation. Drink **8 ounces** every **20 minutes** until you have finished **one half** of the gallon. *If after the half-gallon, you still are not having clear discharge per rectum, please drink the **second half** of the gallon.*

IMPORTANT: DRINKING MORE FLUIDS WILL IMPROVE YOUR INTESTINAL PREPARATION FOR THE TEST AND YOU WILL FEEL BETTER!!

***CLEAR LIQUIDS INCLUDE:** Strained fruit juices without pulp, white grape or white cranberry juice, apple juice, lemonade, Gatorade, soft drinks, jello, popsicles and chicken or beef broth. **These liquids cannot be colored red or purple!** Consume 64 oz of sports drink during the day. You may have coffee or tea with sugar or sweetener. **NO** milk or cream.

DAY OF PROCEDURE

"NOTHING" TO EAT or DRINK for 6 hours before procedure

*****You may take any blood pressure meds with water before 6AM in the morning.

Report to Sturdy Hospital Emergency Room. Your procedure time is approximate; please plan to be at the hospital approximately 2 - 3 hours.

You **MUST HAVE A RIDE HOME** from the hospital, this person must come inside to pick you up at the Endoscopy/ Day Surgery dept. You **WILL NOT BE ALLOWED TO DRIVE or RETURN TO WORK THAT DAY.** **This is not negotiable.** If you **must** take a taxi home **you are required** to be accompanied by a relative or friend. For your safety, please go home and rest.

Please bring a **current list of medications** that you are taking and bring inhalers if you use them. If you are **diabetic please check your glucose the morning** of the procedure.

Special Instructions: _____

Your test is scheduled for _____ at _____

Arrive at the hospital at _____

Please call the office with any questions (508) 222-2021