



Attleboro Gastroenterology, P.C.

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**The Half NuLytey Prep for Morning 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 or Nulytey or Colyte 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 **must** remain on a **CLEAR** liquid diet\*, please do not eat any solid foods until after the procedure!

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

**At 3 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. Clear liquids are permitted until midnight. **"NOTHING" TO EAT OR DRINK AFTER MIDNIGHT except for prep drink.**

**DAY OF 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 bring inhalers if you use them. If you are **diabetic please check your glucose level** 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

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