

Middlesex/Monmouth Gastroenterology

SUTAB BOWEL PREPARATION FOR COLONOSCOPY

YOUR BOWEL PREP IS VERY IMPORTANT! PLEASE READ INSTRUCTIONS CAREFULLY.

DAY PRIOR:

Breakfast/Before 10:00 am: You may have a protein shake, eggs, or white rice. **NO OTHER SOLID FOODS!**

AT 10:00 AM – STOP ALL SOLID FOODS and BEGIN clear liquid diet the rest of the day. (see clear liquid list at the bottom)

DRINK at least 64 ounces of clear liquids – the more the better – prior to beginning your prep.

1st part of prep (First Dose- 1 bottle of 12 tablets)

At about 5:00 pm fill the provided container with 16 ounces of water (up to the fill line). take each tablet with a mouthful of water, wait 2 minutes in between taking each tablet. You should finish the tablets and water in 30 minutes.

WAIT 1 HOUR then start drinking 32 ounces of clear liquids, finishing it over an hour and a half.

ARRIVAL TIME 7:00-9:15 COLUMN A

A) Follow the **DAY PRIOR** instructions and then this column.

2nd part of prep (Second dose-1 bottle of 12 tablets)

At about 10:30 pm fill the provided container with 16 ounces of water (up to the fill line). take each tablet with a mouthful of water, wait 2 minutes in between taking each tablet. You should finish the tablets and water in 30 minutes.

WAIT 1 HOUR then start drinking 32 ounces of clear liquids, finishing it over an hour and a half.

ARRIVAL TIME AFTER 9:30 COLUMN B

B) Follow the **DAY PRIOR** instructions and then this column.

2nd part of prep (Second dose-1 bottle of 12 tablets)

At least 5 hours prior to your procedure fill the provided container with 16 ounces of water (up to the fill line). take each tablet with a mouthful of water, wait 2 minutes in between taking each tablet. You should finish the tablets and water in 30 minutes.

WAIT 1 HOUR then start drinking 32 ounces of clear liquids, finishing it over an hour and a half.

*****ALL FLUIDS MUST BE FINISHED AT LEAST 4 HOURS BEFORE YOUR ARRIVAL TIME*****

****NOTHING TO DRINK INCLUDING WATER WITHIN 4 HOURS OF YOUR ARRIVAL TIME, UNLESS YOU TAKE MEDICATION THAT SHOULD NOT BE STOPPED... PLEASE SEE MEDICATION SHEET****

Clear Liquid Examples



Not Clear Liquid Examples



NOTHING RED OR PURPLE, NO MILK/CREAMER, ALCOHOLIC BEVERAGES, GUM OR SMOKING.

