



## ENDOSCOPY CENTER OF NORTHEAST TENNESSEE, PC

### SUTAB SPLIT PREP

PROCEDURE DATE: \_\_\_\_\_

CHECK-IN TIME: \_\_\_\_\_

#### IMPORTANT: PLEASE READ INSTRUCTIONS THOROUGHLY! TO DO:

- Pick up your prescription for Sutab at your pharmacy
- Purchase (1) 10-ounce bottle of Milk of Magnesia over the counter
- Purchase (1) package/bottle of Simethicone 125mg capsules over the counter

**7 DAYS BEFORE PROCEDURE-** Stop taking any GLP-1 diabetic/weight loss injections and iron products (including multivitamins w/ iron and herbal medications) unless approved by your physician. Not holding these will result in your procedure being rescheduled!

**5 DAYS BEFORE PROCEDURE-** Blood thinning medications, such as Warfarin/Coumadin, Plavix/Clopidogrel, Brilinta/Ticagrelor, Effient or Aggrenox need to be held for five days. We will obtain clearance from your prescribing physician prior to your procedure, and you should not stop these medications until further directed to do so. Please note: If blood thinner is replaced with Lovenox injections, this should be held the evening before and morning of procedure.

**3 DAYS BEFORE PROCEDURE-** Do not consume any seeds or food containing seeds from this point on.

**2 DAYS BEFORE PROCEDURE-** Blood thinning medications, such as Xarelto or Pradaxa need to be held for two days. We will obtain clearance from your prescribing physician prior to your procedure, and you should not stop these medications until further directed to do so. Please note: If blood thinner is replaced with Lovenox injections, this should be held the evening before and morning of procedure.

**2 DAYS BEFORE PROCEDURE-** After your evening meal (around 5PM) drink 2oz of Milk of Magnesia. After that, you will begin a liquid diet and continue this until after procedure.

**1 DAY BEFORE PROCEDURE-** At 5PM, take 2 Simethicone capsules and follow steps 1-3 below. If you are diabetic, take  $\frac{1}{2}$  of your evening dose of medication and closely monitor blood sugar levels. **Nothing to eat or drink after midnight, except assigned prep!**

- #1: Open 1 bottle of tablets. Fill the provided container with water up to the fill line. Swallow each tablet with a sip of water and complete over 20 minutes- 1 pill approximately every 2 minutes. If you become uncomfortable, take the tablets slower.
- #2: Approximately 1 hour after the last tablet is swallowed, fill the provided container a second time with water and drink the entire cup within 30 minutes.
- #3: Approximately 30 minutes after finishing the second container of water, fill the provided container a third time with water and drink the entire cup within 30 minutes.

**DAY OF PROCEDURE-** Nothing to eat or drink, including gum/mints, except prep. About 5 hours prior to procedure, take 2 more Simethicone capsules and repeat steps 1-3 as above. No smoking, drug or alcohol use will be permitted day of procedure.

**\*\*PREP MUST BE COMPLETED NO LATER THAN 2 HOURS PRIOR TO APPOINTMENT TIME\*\***

For questions, please call (423) 929-7111 ext. \_\_\_\_\_

## IMPORTANT NOTES:

- You must take all 24 tablets and drink the entire volume of water as instructed! If your colon is not clear of stool, the doctor will not be able to see and remove precancerous polyps during the test. For this reason, we may need to repeat your entire procedure.
- You may take your scheduled inhalers and oral medications (except for blood thinners, iron products, GLP-1's and diabetic meds) with a small sip of water the day of procedure.
- Please bring inhaler(s) with you for your appointment!
- You will be sedated and may not drive the day of procedure. You must be accompanied to your appointment by a responsible friend/relative! They will be required to check in with you and remain on our property until you are discharged into their care. If you do not have a driver, your procedure will be cancelled!
- Showing up late or not following these directions could require cancellation of your appointment even if you have started the prep solution.

**\*\*PREP MUST BE COMPLETED NO LATER THAN 2 HOURS PRIOR TO APPOINTMENT TIME\*\***

## CLEAR LIQUID DIET OPTIONS

The photos below are examples of safe options, with guidelines listed below each photo for clarification. Please note: You are to be on a clear liquid diet the day prior to procedure, but **NONE** of these are acceptable the day of your procedure.

Tea & Coffee	Sweeteners	Powdered Drink Mixes	Vitamin Water & Coconut Water	Carbonated Beverages
Black only! NO creamers (including non-dairy)	Sugar only! NO honey	NO red, green, or purple	NO red, green, or purple	NO red, green, or purple
Sports Drinks	Popsicles	Jell-O	Juices	Broths
NO red, green, or purple	NO red, green, or purple	NO red, green, or purple	NO pulp, red, green or purple. Clear juices only!	NO noodles, rice, veggies or proteins. Clear broth only!