



Nulytely (Split Dose) Bowel Prep for Colonoscopy

Purchase at the Pharmacy:

- **Prep Nulytely and in addition you will need to purchase a 10 ounce bottle of Magnesium Citrate (over the counter no prescription needed)**

One Week Prior to the Procedure:

Please make sure to inform your physician if you are taking blood-thinning medications such as Coumadin, Plavix, Lovenox, or Aspirin. If you are taking Blood thinning medications such as Coumadin make sure to have your blood work drawn the day prior to your procedure. You may be asked to discontinue these medications 3-7 days prior to your procedure if approved by your family physician or cardiologist. Stop Iron and Herbal medications and supplements.

One Day Prior to Procedure:

NO SOLID FOODS today or until after your procedure - only clear liquids.

1. Fill the container with 4 liters (1 gallon) of water (usually a mark is present on the container)
2. Mix thoroughly
3. Refrigerate
4. **ONLY CLEAR LIQUIDS UNTIL YOUR PROCEDURE IS COMPLETED!** See examples of clear liquids attached.
5. Between 4-5:00p.m., drink the 10 oz bottle of Magnesium Citrate.
6. At 6:00 p.m., start drinking prep solution. Drink one 8 oz. glass every fifteen minutes and stop when you have finished ½ the bottle (2 liters or half gallon). Place the remaining solution back in the refrigerator for tomorrow. **Continue to drink water, clear soda or clear sports drinks through the evening or until you go to bed.**

****The better hydrated you are the better the outcome of your prep**

The Day of your Colonoscopy:

5-6 hours prior to your exam, drink the remaining prep solution as previously described.

You may drink clear liquids up to 3 hours prior to your exam.

If you take medication, you may take essential medications (for blood pressure, heart, seizures).

If you are Diabetic, do not take your oral diabetic medication the morning of the procedure. If you take injectable insulin, give yourself ½ the morning dose. Check your blood sugars frequently while you are drinking your prep and before you leave for your procedure. Please bring your glucose monitor to your procedure in case it needs to be checked, however we will be able to check your glucose if there is a need. **As always please check with your primary care physician about holding your insulin and diabetic medications on your procedure day.**



ENDOSCOPY OUTPATIENT INSTRUCTIONS

DO'S

***Clear Liquids only the day prior to the procedure and nothing by mouth 3 hours prior to your procedure.**

1. If applicable, **DO** follow your colon preparation instructions. If you have questions regarding your colon preparation, please call, [\(850\) 877-2105](tel:850-877-2105) for instructions.
2. If you are taking Coumadin **DO** make arrangements to have your blood drawn (for a PT) the day prior to your procedure. **DO** discontinue your blood thinner for _____ days prior to your procedure date.
3. **DO** bring your medications the day of your procedure. **DO** take your heart, blood pressure, seizure, anti-depressants, thyroid, cholesterol and asthma medications, if applicable, with a sip of water.
4. **DO** follow your insulin instructions per your primary care physician. Please discuss with him or her your preparation for the procedure, diet and time your procedure is scheduled. If applicable, **DO** check your blood sugar prior to leaving your house the morning of the procedure. Please bring your glucometer, testing strips and insulin to the endoscopy center the morning of your procedure.
5. **DO** wear casual clothes the day of procedure.
6. **DO** bring a copy of your insurance information and/or payment. If you have questions regarding payment, please contact our billing specialist at [\(850\) 656-2549](tel:850-656-2549).
7. **DO** make arrangements for someone to drive you home. It is necessary to have a responsible adult available on discharge to receive post-procedure instructions and to drive you home. If a responsible adult is not available to you home, sedation WILL NOT BE ADMINISTERED.
8. Some medications we use can have amnesiac affect, for that reason, your responsible adult should be available upon completion of the exam for consultation with you and your physician.
9. **DO** resume your normal daily routine the following day unless specific instructions are given to you at the time of discharge.
10. If applicable: **DO** bring your implanted cardiac defibrillator / pacemaker identification card to the hospital on the day of the procedure.

DON'TS

1. **DON'T wear** nail polish on at least one fingernail (for patient monitoring purposes).
2. **DON'T** bring unnecessary valuables.
3. **DON'T** drive or operate machinery the day of your procedure.
4. **DON'T** take herbal supplements or herbal medications Seven days prior to the procedure.
5. **DON'T** bring personal items such as blankets.

PLEASE BE ADVISED

1. To provide care for all patients in a timely manner and maximize your physician's time, please cancel your procedure as soon as possible and no later than 4 days prior to your appointment. Call [\(850\) 877-2105](tel:850-877-2105) to cancel your procedure.



2. To obtain biopsy results we have recently implemented a patient portal. Digestive Disease Clinic is thrilled to offer a new solution that enables you to communicate with us more quickly, easily, and on your schedule. The new solution is a secure patient portal that delivers self-service capabilities for you to manage your healthcare at your fingertips. Please ask for email invitation. This new technology gives our patients the ability to communicate with DDC staff, renew medications, schedule an appointment and pay your bill online. This account will allow you to communicate with our office, and will allow us to communicate your test results. If you do not have internet access, please call our office at [850-877-2105](tel:850-877-2105) to obtain your test results.
3. In order to avoid a \$75.00 cancellation or no show fee, please let us know 72 hours prior to your procedure if you cannot make this appointment.