

TEXAS★ENDOSCOPY

6405 W. Parker Rd, Suite 370 • Plano, Texas 75093 • 972-473-9900
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***You MUST HAVE TRANSPORTATION from the facility by an adult family member or friend. No taxis, Uber, Lyft, or other public transportation, even no paid/non-paid medical transportation services. IF you do not have this transportation in place when you arrive you will be cancelled for your procedure(s).**

***For any questions regarding your Bowel Prep instructions, please call your physician's office:
McKinney Office is 972-562-4430 Plano Office is 972-.943-9094**

SUTAB® Preparation Instructions for Colonoscopy

7 Days Prior to Procedure:

MEDICATION INFORMATION:

- **IF you are taking these medication on a weekly basis for weight loss you must stop these medication for 7 days prior to the date of your procedure: Any semiglutide- Ozempic®, Wegovy®, Trulicity®, Bydureon®, Mounjaro®, Zepbound®. If you have not stopped these medications your procedure will be cancelled.**
- **IF you are taking these medication a daily basis for Diabetes you must stop them the day prior to your procedure: Rybelsus®, Victoza®, Saxenda®, Byetta®, Invokana®, Steglatro®, Farxiga®, Adlyxin®. If you have not stopped these medications your procedure will be cancelled**
- **IF you are taking Plavix®, Coumadin® (Warfarin®), Lovenox®, Eliquis®, Brilinta® or any other prescribed blood thinner, it's very important that you notify the nurse at your GI Physician's office for instructions as when to when to STOP this medication before your procedure (see numbers above).**
- **IF you are taking a diet medication that contains the product PHENTERMINE® YOU MUST STOP THIS MEDICATION 4 DAYS PRIOR TO YOUR PROCEDURE**
- **IF you are taking 325mg Aspirin®, switch to 81mg Aspirin® daily 7 days prior to your procedure and stay on this dose leading up to procedure. If you are already taking 81mg Aspirin®, do not stop prior to procedure unless specifically instructed by your GI physician or Physician prescribing this medication.**
- **DO NOT eat NUTS and SEEDS** i.e. popcorn, strawberries, etc. for 7 days prior to procedure

SUTAB® BOWEL PREP Instructions for Colonoscopy prescription is 2-part split dose prep

DAY PRIOR TO YOUR PROCEDURE:

1. If you have not received your bowel prep prior to the day prior to procedure, please contact your GI Physician's office at one of the numbers above.
 - A) In addition to your bowel prep, please purchase two containers of 238gm bottles of Miralax® (over the counter laxative)
 - B) **The Day Prior to Procedure:**

You **MUST** be on a clear liquid diet **ALL DAY starting as soon as you get up! (NO SOLID FOODS)**

 1. **List of liquids:** Tea, Black Coffee (no creamer), Coke®, Sprite®, diet sodas, chicken or beef broth, Jell-O®, Popsicles® (Not Fruit Sickles®), apple juice, cranberry juice (natural red), Gatorade®, Powerade®, and water.

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2. **Absolutely no RED/PURPLE** products. No Orange Juice, Milk, or Milk Products such as creamers.
3. **You will need to take any Thyroid, Blood Pressure, Seizure, Anxiety medications. Only take a half dose your Diabetic medications.**

C) The Night Prior to Procedure:

1. **At 6:00 pm** complete the following STEPS for part 1 of your SUTAB 2-part prep.
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 - a) Open 1-bottle of 12-tablets SUTAB®, fill a 16 oz cup with water, swallow each tablet slowly one at a time, every 5 to 10 minutes try to complete all 12 tablets within 1 hour.
DO NOT TAKE ALL TABLETS IN ONE SWALLOW.
 - b) 30 minutes later drink 1-16oz of water within 15 minutes
 - c) 30 minutes later drink 1-16oz of water within 15 minutes

D) **If by 9pm you have not had a bowel movement or are not passing clear to clear yellow liquid from your rectum, MIX one 238 gram container of Miralax® in 64oz. of water. Drink half (32oz) of this mixture over 1 hour.

E) **If by 10pm you're still not passing clear liquids, drink the other half (32oz) of mixture over 1 hour.

F) **If by 1030pm you have not had any bowel movements by 10:30pm, call our your GI physician's office for the physicians on call.

The Day of Procedure:

- A) 1. **6 hours** prior to your procedure:
complete the following STEPS for part 2 of your SUTAB 2-part prep.
 - a) Open 1-bottle of 12-tablets SUTAB®, fill a 16 oz cup with water, swallow each tablet slowly one at a time, every 5 to 10 minutes try to complete all 12 tablets within 1 hour.
DO NOT TAKE ALL TABLETS IN ONE SWALLOW.
 - b) 30 minutes later drink 1-16oz of water within 15 minutes
 - c) 30 minutes later drink 1-16oz of water within 15 minutes
2. **Nothing by mouth 4 hours prior to your procedure except: You may take your Thyroid, Blood Pressure, heart, Seizure or Anxiety medications with small sips of water no later than 2 hours prior to your procedure.**
****DO NOT take Your Diabetic medications this morning prior to procedure****

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