

SUFLAVE INSTRUCTIONS

Your Colonoscopy has been scheduled with Dr. _____

On _____, _____, _____ at _____ am/pm
Day Month Date Arrival Time

At:

- | | |
|---|--|
| <input type="checkbox"/> Washington Hospital | <input type="checkbox"/> Washington Outpatient Surgery Center |
| Admitting Department | First Floor |
| 2000 Mowry Avenue | 2299 Mowry Avenue |
| Fremont, CA | Fremont, CA |
| 510-797-1111 | 510-791-5374 |

If you need to cancel or reschedule your procedure please call our office 3 days prior to the procedure at 510-248-1843.

Recommended List for Prep:

- **SUFLAVE Bowel Prep Solution** (*Prescription has been sent to your pharmacy*)

Recommended List for Clear Liquid Diet:

- | | | |
|---|-------------------------------|-------------------------------------|
| • Water | Carbonated Soda | Jell-O gelatin (not pudding) |
| • Popsicles | Black Coffee | Ginger Ale |
| • Black Tea | Bouillon (clear broth) | Gatorade |
| • Crystal Light | Coconut Juice | Sugar and Sugar Substitutes |
| • Honey | Syrup | Clear Hard Candy |
| • Clear Fruit Juices (<i>white grape, apple, lemonade</i>) | | |

Avoid solid foods, dairy products, fruit juices with pulp, and all red, orange, purple, and blue colored liquids.

Recommended List for Comfort:

- **Desitin, A&D Ointment, Vaseline** (*apply to anal area to relieve discomfort*)
- **Baby Wipes** (*use instead of toilet paper to reduce irritation*)

IMPORTANT: There are Medications which MUST be Stopped Prior to your Colonoscopy.

- Refer to the “Medication Instructions” on the last two pages.
- Always discuss medication concerns with your doctor.

**THREE DAYS PRIOR TO THE COLONOSCOPY:
DO NOT EAT:**

- | | | |
|-----------|----------|------------|
| • Legumes | Peas | Carrots |
| • Corn | Tomatoes | Watermelon |
| • Nuts | | |

IF YOU NEED TO CANCEL OR RESCHEDULE YOUR PROCEDURE PLEASE CALL OUR OFFICE TODAY AT 510-248-1843.

DAY BEFORE THE COLONOSCOPY:

- **DIET:**
 - **ALL DAY - Clear Liquids Only** (as described on the first page of these instructions)
 - **Any combination of liquids is allowed**
 - **Be creative for “meals”**
Stay hydrated! YOU NEED TO DRINK AT LEAST 3 LITERS OF FLUIDS!
Drink enough fluids to avoid dehydration while undergoing the colonoscopy prep
- **At 5PM:**
 - **Drink 1 bottle of SUFLAVE as your first dose, (8 oz every 15 minutes)**
 - **Over the next hour drink 16 oz of clear fluids**
 - **Within a few hours you can expect frequent bowel movements and diarrhea**

IMPORTANT: Continue your Clear Liquid diet to prevent dehydration and ensure good urine output by drinking 2 to 3 liters of clear liquid.

DAY OF THE COLONOSCOPY:

- **WAKE UP:** 4 to 5 hours before the scheduled time of your colonoscopy
 - If your colonoscopy is scheduled early in the morning you will need to get up in the early morning hours
- **IMMEDIATELY:**
 - Drink 1 bottle of SUFLAVE as your second dose, (8 oz every 15 minutes)
 - Over the next hour drink 16 oz of clear fluids
- Take any oral medications approved by your physician
 - Take with the smallest amount of water possible

This Completes Bowel Prep

**3 HOURS PRIOR TO YOUR COLONOSCOPY
DO NOT EAT OR TO DRINK UNTIL YOUR COLONOSCOPY IS COMPLETED**

WHAT TO EXPECT AFTER THE BOWEL PREP IS COMPLETE:

- More diarrhea
- Passing of clear, colored liquid
- IF your stool is brown and murky, please inform the nurse upon admission
 - Poor bowel preparation may result in having to reschedule your procedure and a more extensive prep



Dark and murky NOT OK	Brown and murky NOT OK	Dark Orange and semi-clear NOT OK	Light Orange and clear ALMOST THERE	Yellow and clear, like urine YOU'RE READY!
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AFTER THE COLONOSCOPY:

- You may resume your normal diet
- Continue drinking enough liquids until bedtime to prevent dehydration and ensure good urine output
- You **MUST** have a responsible driver pick you up and a responsible caregiver at home with you for 4 hours after discharge

PLEASE CALL THE OFFICE IF YOU HAVE ANY QUESTIONS AT (510) 248-1843

MEDICATION INSTRUCTIONS

Please discuss with your health care provider or cardiologist specific instructions prior to discontinuing any medications.

ANTI-PLATELET – Discontinue 5 Days Prior to Colonoscopy, unless otherwise specified by your physician

- ☐ Clopidogrel (Plavix)
- ☐ Ticagrelor (Brilinta)
- ☐ Prasugrel (Effient)
- ☐ Eptifibatide (Integrilin)
- ☐ Ticlodipine (Ticlid)

ANTI-COAGULANT – Discontinue 4 Days Prior to Colonoscopy

- ☐ Warfarin (Coumadin)

ANTI-COAGULANT – Discontinue 2 Days Prior to Colonoscopy

- ☐ Rivaroxaban (Xarelto)
- ☐ Dabigatran (Pradaxa)
- ☐ Apixaban (Eliquis)

ANTI-COAGULANT – Discontinue 1 Day Prior to Colonoscopy

- ☐ Heparin
- ☐ Enoxaparin (Lovenox)

ANTI-COAGULANT – Ask the Prescribing Doctor When to Discontinue

- ☐ Edoxaban (Savaysa)
- ☐ Fondaparinux (Arixtra)

OTHER MEDICATIONS – Discontinue 5 Days Prior to Colonoscopy

- ☐ Fish Oil
- ☐ Iron Supplements
- ☐ Vitamin E
- ☐ Hydrocil
- ☐ Metamucil
- ☐ Gingko
- ☐ Other Bulk Preparations
- ☐ Turmeric (Curcumin)

FOR 5 DAYS PRIOR TO COLONOSCOPY – You may take TYLENOL if needed.

ROUTINE PRESCRIBED MEDICATIONS – Continue taking as prescribed.

FOR 3 DAYS PRIOR TO COLONOSCOPY– Stop JARDIANCE

DIABETES MEDICATIONS – Discuss with your Endocrinologist, however normally:

- The plan would be:
 - Day Before Colonoscopy: take half the normal dose of Diabetes Medication and/or Insulin
 - Day of the Colonoscopy: DO NOT take your diabetes medication

Please review the guidelines from American Society of Anesthesiologists regarding preoperative holding of glucagon-like peptide receptor agonists:

Dulaglutide (Trulicity)
Exenatide (Byetta)
Exenatide extended-release (Bydureon)
Liraglutide (Victoza)
Lixisenatide (Adlyxin)
Semaglutide injection (Ozempic)
Semaglutide tablets (Rybelsus)
Tirzepatide (Mounjaro)
Wegovy (Semaglutide)
Zepbound(Tirzepatide)

If they are given by WEEKLY INJECTION, these medications SHOULD BE HELD 1 WEEK BEFORE procedure.

If they are given ORALLY on a DAILY basis, they SHOULD BE HELD on the DAY BEFORE procedure.