Phone: 865-539-5372 Option 2

Fax: 865-539-5369

BOWEL PREPARATION INSTRUCTIONS FOR CAPSULE ENDOSCOPY DR. BENITEZ

	HAVE BEEN SCHEDULED FOR A DIAGNOSTIC PROCEDURE CALLED <u>SMALL BOWEL CAPSULE ENDOSCOPY</u> TO BE FORMED ON
	ATARRIVAL TIME
YOU	WILL NEED TO REPORT TO PARKWEST HOSPITAL (MAIN ENTRANCE)
LAT	E ARRIVAL MAY RESULT IN UP TO A 2-HOUR DELAY IN YOUR PROCEDURE
FOR	E-PROCEDURE INSTRUCTIONS: THIS EXAMINATION YOU MUST FOLLOW A SPECIAL CLEAR LIQUID DIET FOR PART OF THE DAY PRIOR TO YOUR MINATION.
•	BEGINNING ONYOU MAY HAVE BREAKFAST AND LUNCH FOLLOWED BY CLEAR LIQUIDS FOI THE REMAINDER OF THE DAY.
•	AT 6:00 P.M. ONYOU WILL START YOUR MIRALAX PREP. MIX ½ OF 4.102. BOTTLE OF MIRALAX WITH 3202.OF WATER AND DRINK OVER 2 HOUR PERIOD.
•	TAKE ALL EVENING MEDICATIONS PRIOR TO 10:00 P.M.
	NOT EAT OR DRINK ANYTHING AFTER 10P.M. ON THE NIGHT PRIOR TO OR ON THE MORNING YOUR PROCEDURE.
	DO NOT TAKE ANY MEDICATIONS BEGINNING 2 HOURS BEFORE UNDERGOING CAPSULE ENDOSCOPY. YOU MAY TAKE USUAL MEDICATIONS AT 9:00 A.M. ON THE DAY OF THE EXAMINATION.
ME	DICATIONS:
	• IP YOU HAVE SPECIFIC MEDICAL PROBLEMS SUCH AS SEVERE HIGH BLOOD PRESSURE OR ANGINA, YOU MAY TAKE YOUR MORNING MEDICATION WITH A SMALL SIP OF WATER AT LEAST 2 HOURS BEFORE UNDERGOING PROCEDURE. IF YOU TAKE INSULIN FOR DIABETES, TAKE 1/2 YOUR USUAL DOSE THE EVENING BEFORE AND MORNING OF YOUR PROCEDURE.
	 IF YOU TAKE IRON SUPPLEMENTS, PLEASE DISCONTINUE FOR FIVE DAYS PRIOR TO EXAM.
	ABSTAIN FROM SMOKING 24 HOURS PRIOR TO UNDERGOING CAPSULE ENDOSCOPY.

IF YOU HAVE ANY QUESTIONS OR HAVE AN EMERGENCY ON THE DAY OF YOUR EXAM SUCH THAT IT MUST BE RESCHEDULED, PLEASE CALL THE OFFICE AT 865-539-5372 OPTION 2.

PLEASE BRING I.D., INS. CARDS AND LIST OF CURRENT MEDICATIONS WITH YOU



CLEAR LIQUID DIET

DAY BEFORE PROCEDURE

TEA (decaffeinated or regular)
BLACK COFFEE (NO CREAMER/MILK)
CARBONATED BEVERAGES (clear or light colored only)
FRUIT FLAVORED DRINKS
GREEN TEA
LEMONADE
GATORADE (NO RED OR PURPLE)
POWERADE (NO RED OR PURPLE)

BOUILLION (BEEF OR CHICKEN)

WATER

JELL-O (NO RED OR PURPLE)
POPSICLE (NO RED OR PURPLE)

SUGAR HONEY SYRUP HARD CANDY (NO RED OR PURPLE) SALT

4 DAY PRE-PROCEDURE DIET—FOODS ALLOWED

MEAT—FISH, CHICKEN, PORK, TURKEY AND GROUND BEEF

PASTA—NO RED SAUCE

WHITE RICE

DAIRY-CHEESE, MILK, PLAIN YOGURT

EGGS

WHITE BREAD