

**BOWEL PREPARATION INSTRUCTIONS FOR MORNING SCOPES (GOLYTLEY)-DR BENITEZ**  
 YOU HAVE BEEN SCHEDULED FOR A DIAGNOSTIC PROCEDURE CALLED COLONOSCOPY TO BE PERFORMED ON

\_\_\_\_\_ AT \_\_\_\_\_ ARRIVAL TIME \_\_\_\_\_

REPORT TO \_\_\_\_\_ PARKWEST HOSP (MAIN ENTRANCE) \_\_\_\_\_ FT. LOUDOUN HOSP (ER/REG DESK)  
 \*\*\*\* LATE ARRIVAL MAY RESULT IN UP TO A 2-HOUR DELAY IN YOUR PROCEDURE \*\*\*\*

**PRE-PROCEDURE INSTRUCTIONS: DO NOT EAT CORN, VEGETABLES, FRUITS, SEEDS, NUTS, POPCORN OR HIGH FIBER FOODS FOUR DAYS PRIOR TO YOUR EXAMINATION.**

**\*\*\*\* DAY BEFORE \*\*\*\***

- ★ BEGINNING ON \_\_\_\_\_ YOU MAY EAT YOUR USUAL BREAKFAST, BUT AFTER THIS, ONLY CLEAR LIQUIDS FOR LUNCH AND DINNER ARE ALLOWED.
- AT 5:00 PM YOU WILL START YOUR GOLYTLEY PREP. ADD DRINKING WATER TO TOP LINE OF BOTTLE. CAP BOTTLE AND SHAKE WELL TO DISSOLVE. PLACE IN REFRIGERATOR.
- AT 6:00 – 8:00 PM YOU WILL BEGIN DRINKING THE GOLYTLEY SOLUTION. DRINK (1) 8OZ GLASS EVERY 10-15 MINUTES. BE SURE TO DRINK ONLY ½ OF THE SOLUTION. DRINK PLENTY OF WATER THROUGHOUT THE EVENING, BUT NOTHING AFTER 10:00 PM

**\*\*\*\* DAY OF PROCEDURE \*\*\*\***

- AT 5:00 – 7:00 AM BEGIN DRINKING THE GOLYTLEY SOLUTION. DRINK (1) 8OZ GLASS EVERY 10-15 MINUTES.. BE SURE TO DRINK THE REST OF SOLUTION, BUT NOTHING AFTER 7:00 AM

**DO NOT EAT OR DRINK ANYTHING ON THE MORNING OF YOUR EXAMINATION (EXCEPT YOUR PREP).** IF 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 EARLY ON THE DAY OF YOUR TEST. IF YOU TAKE INSULIN FOR DIABETES, TAKE ½ YOUR USUAL DOSE THE EVENING BEFORE AND HOLD YOUR MORNING DOSE DAY OF YOUR PROCEDURE.

**MEDICATIONS TO STOP PRIOR TO PROCEDURE**

**7 DAYS PRIOR:**

Trulicity  
 Ozempic  
 Mounjaro  
 Bydureon bcise  
 Byetta  
 Victoza, Saxenda  
 Adlyxin  
 Rybelsus

**7 DAYS PRIOR:**

Aspirin  
 Effient  
 Fish Oil  
 Flaxseed Oil  
 Supplements  
 Fiber

**5 DAYS PRIOR:**

Iron Supplements  
 Coumadin  
 Warfarin  
 Brilinta  
 Plavix

**3 DAYS PRIOR:**

Pradaxa  
 Eliquis  
 Savaysa  
 Xarelto

**2 DAYS PRIOR:**

Ibuprofen  
 Naproxen  
 Meloxicam  
 Anti-inflammatory

**BRING SOMEONE ALONG WITH YOU TO DRIVE YOU HOME.**

- YOU WILL BE SEDATED FOR THE EXAMINATION. WHILE MOST OF THE EFFECTS OF THE MEDICINE WILL WEAR OFF PRIOR TO YOUR DISCHARGE, WE CANNOT LET YOU LEAVE UNACCOMPANIED. YOU WILL NOT BE ABLE TO DRIVE A CAR THE REMAINDER OF THE DAY.

\*\*\*\*IN ORDER TO BETTER MEET THE NEEDS OF OUR PATIENTS, WE RESPECTFULLY ASK THAT YOU GIVE US AT LEAST 72 HOURS NOTICE IF YOU NEED TO RESCHEDULE YOUR PROCEDURE. GIVEN THIS CONSIDERATION WE MAY MORE PROMPTLY MEET OUR PATIENTS NEEDS. \*\*\*\*

IF YOU HAVE ANY QUESTIONS OR HAVE AN EMERGENCY ON THE DAY OF YOUR EXAM, PLEASE CALL OUR OFFICE AT (865)-539-5372 OPTION 2.

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

**OVER**

# **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)  
WATER  
  
BOUILLION (BEEF OR CHICKEN)  
  
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