

PREPARING FOR YOUR **COLONOSCOPY**  
Dulcolax plus Miralax 8 Glass Prep  
PRINCETON GASTROENTEROLOGY ASSOC. PA  
To Schedule Call # 609-924-1422 Fax# 609-924-7473

Purchase the following **OVER THE COUNTER** products for your bowel prep:

- **Dulcolax Laxative Tablets** (NOT the suppositories or the stool softeners)
- **Miralax Laxative Powder** 238 gram bottle

**7 DAYS BEFORE YOUR PROCEDURE:**

- **Do NOT take anti-inflammatory medications such as Advil, Aleve, Excedrin, Ibuprofen, Motrin, Nuprin, etc.** unless otherwise directed by your physician.
- You **may** take Tylenol or Acetaminophen if necessary.
- Do **NOT** eat any seeds, nuts, corn or whole grain breads with visible nuts/seeds for 7 days before your procedure.

**ON THE DAY BEFORE YOUR COLONOSCOPY:**

- **Drink only clear liquids all day.**
- **Do NOT eat any solid food or dairy products.**
- **Drink clear broth or bouillon(chicken, beef, or vegetable) for meals & throughout the day**
- You **can have** any of the following **clear liquids** as long as they are **NOT RED OR PURPLE colored.**
  - Clear juices **without** pulp: apple, white grape, lemonade, white cranberry, lime
  - Clear Ensure or clear Pedialyte.
  - Water, clear soda (Sprite, cola, ginger-ale), Gatorade, Powerade, Jell-O (no fruit), ice popsicles
  - Iced or hot coffee or tea (without milk or non-dairy creamer). Any type of sweetener is ok.
- **At 5PM take 4 Dulcolax oral laxative tablets with an 8 ounce glass of water. Remain close to a bathroom.**

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- **If your procedure is scheduled BEFORE 10:30 AM:**

**-At 7 PM** drink one 8 ounce glass of a “clear liquid” **with** 1 ½ capfuls of Miralax every 30 minutes, for a total of 4 glasses. You may use any of the “clear liquids” mentioned above.

\_\_\_ 7PM    \_\_\_ 7:30PM    \_\_\_ 8PM    \_\_\_ 8:30PM

**-At 10 PM** drink one 8 ounce glass of a “clear liquid” **with** 1 ½ capfuls of Miralax every 30 minutes, for 4 more glasses.

\_\_\_ 10PM    \_\_\_ 10:30PM    \_\_\_ 11PM    \_\_\_ 11:30PM

Drink a few more glasses of any clear liquids if you are not clear by 12AM MIDNIGHT.  
Do **not** have anything to eat or drink, not even water **after 2:00 AM** (day of procedure).

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~OR~

- **If your procedure is scheduled AT 10:30 AM or LATER:**

**-At 7PM** drink one 8 ounce glass of a “clear liquid” **with** 1 ½ capfuls of Miralax every 30 minutes, for a total of 4 glasses. You may use any of the “clear liquids” mentioned above.

\_\_\_ 7PM    \_\_\_ 7:30PM    \_\_\_ 8PM    \_\_\_ 8:30PM

**-Continue drinking a few more glasses of clear liquids.**

**-At 5AM(morning of the procedure)** drink one 8 ounce glass of a “clear liquid” **with** 1 ½ capfuls of Miralax every 30 minutes, for 4 more glasses.

\_\_\_ 5AM    \_\_\_ 5:30AM    \_\_\_ 6AM    \_\_\_ 6:30AM

Do **not** have anything to eat or drink, not even water **after 7:00 AM** (morning of the procedure)

**YOUR PROCEDURE IS SCHEDULED AT:**

Princeton Endoscopy Center, LLC, First Floor  
 Princeton Plaza, Suite # 104, 731 Alexander Rd,  
 Princeton, NJ 08540  
 Tel: 609-452-1111  
 Parking & Entrance are at the rear of the building

University Medical Center at Princeton-Plainsboro  
 Medical Arts Pavilion, 5 Plainsboro Road, 2<sup>nd</sup> Fl.  
 Plainsboro, NJ 08536  
 609-853-7500

**ON THE DAY OF THE PROCEDURE:**

- Check in either at the **PRINCETON ENDOSCOPY CENTER SUITE 104**, (not the Princeton Gastroenterology office), or the **MAP building** at the University Medical Center at Princeton-Plainsboro.
- Be sure to bring your insurance card and PHOTO ID
- Bring a referral for the facility, if your insurance plan requires one
- **DO NOT DRIVE for the entire day.** Someone **MUST** drive you to and from your appointment as you will be receiving sedation which impairs your ability to drive an automobile.
- You may take a taxi **ONLY if you are accompanied by an escort over the age of 18.** The taxi driver is **NOT** an acceptable escort.
- **NO gum, NO mints, NO cough drops within 6 hours of your arrival time.**
- Please brush your teeth the morning of the procedure: rinse and spit.
- Do NOT wear your contact lenses on the morning of the procedure.
- Please bring the completed forms (2 page questionnaire and medication reconciliation) to the Princeton Endoscopy Center. (If your procedure is at the hospital, bring your completed medication form).

**Please take all of your usual medications including your blood pressure and heart medication upon awakening with a small sip of water, except for medications you were specifically told to stop.**

**If you are diabetic:**

\_\_\_\_\_ Obtain specific insulin instructions for the day of the prep and the day of the procedure from your primary doctor or endocrinologist.

\_\_\_\_\_ Do **not** take your oral diabetic medications the morning of the procedure. You will receive specific instructions about when to take it when you are discharged from the Endoscopy Facility.

**If you take Coumadin (Warfarin), Effient, Plavix (Clopidogrel), Pradaxa, Xarelto or Aspirin:**

\_\_\_\_\_ You should **NOT** take \_\_\_\_\_ for \_\_\_\_\_ days before the procedure unless you are otherwise instructed.

\_\_\_\_\_ You should continue to take your aspirin unless otherwise instructed.

\_\_\_\_\_ You can **take** your asthma medication AND please **bring** your asthma medication to your procedure.

\_\_\_\_\_ Day of procedure, take all your vitamins and supplements **AFTER** the procedure

The procedure generally takes about **40 minutes**, but you should plan on being present for about **1 ½- 2 hours**.

**\*\*\*If you have questions, please read the “FAQs about colonoscopy” on our website @ [www.princetongi.com](http://www.princetongi.com).**

Nurse's Notes: \_\_\_\_\_

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