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You are scheduled to have a **colonoscopy** on
Friday/Saturday \_\_\_\_\_\_\_\_\_\_\_\_ at \_\_\_\_\_\_\_\_\_\_\_\_
but you must be here by \_\_\_\_\_\_\_\_\_\_\_\_.

**Please follow these instructions:**

**\*\*Do NOT take any Advil, Aleve, Aspirin, Coumadin, Ibuprofen, Motrin, Nuprin or Plavix 7 days prior to your appointment. All other prescribed medications (such as Tylenol) are permitted until the morning of your procedure.**

1. Select **one** of the following below as your breakfast/lunch on Thursday/Friday:\_\_\_\_\_\_\_\_\_\_
	1. Apple sauce
	2. Cottage cheese
	3. Plain yogurt
	4. Vanilla ice cream

**PLEASE REFRAIN FROM EATING FOOD AFTER BREAKFAST/ LUNCH ON \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. You may continue the clear liquid diet until 5am/6am/7am/8am/9am/10am/11am/12pm/1pm on
\_\_\_\_\_\_\_\_\_\_\_\_\_\_. After this time, you may have **NOTHING TO EAT OR DRINK AT ALL**.

List of clear liquids you can drink: You may have unlimited amounts. **NO DAIRY**

|  |  |  |
| --- | --- | --- |
| Apple juice or any clear fruit juice | Coconut water | Water |
| Clear broth (beef, chicken, etc.) | Coffee/tea **(NO cream, dairy, or milk)** | Gatorade, Vitamin water, Crystal Light |
| Clear soda (7-up, Ginger Ale, Sprite) | Jello **(NO red or purple)** |  |

1. **Colon Prep: Please follow the instructions according to your prescription**
**Step 1:** At 5pm on Thursday/Friday \_\_\_\_\_\_\_\_\_\_\_\_\_\_, drink half of the solution within 90 mins. The first bowel movement usually occurs approximately 1 hour after you start drinking the solution. Keep the solution refrigerated.
**Step 2:** At 4am/6am on Friday/Saturday \_\_\_\_\_\_\_\_\_\_\_\_\_\_, drink the second half of the solution within 90 mins. **You may continue the clear liquid diet until** 5am/6am/7am/8am/9am/10am/11am/12pm/1pm.
* **2 Week MiraLAX Instructions: (FOR POOR PREP ONLY)
Step 1:** On Monday/Tuesday/Wednesday/Thursday/Friday \_\_\_\_\_\_\_\_\_\_, take 1 MiraLAX packet daily for 14 days.
**Step 2:** Take 1 bottle of Magnesium Citrate on Day 15 as directed.
**Step 3:** Refer to the above for instructions for Day 16 and 17
* **YOU CANNOT HAVE ANY LIQUIDS 3 HOURS BEFORE YOUR EXAM OR IT WILL BE CANCELLED AND**

**A CANCELLATION FEE WILL BE CHARGED**

* **Females will be required to have a pregnancy test as a routine preoperative safety check.**
* **You MUST have an escort pick you up after the procedure.**
* **PLEASE CHECK WITH YOUR INSURANCE ABOUT YOUR COVERAGE FOR YOUR COLONOSCOPY SO YOU CAN MAKE APPROPRIATE ARRANGEMENTS.**

**LET YOUR INSURANCE KNOW THAT THE CPT CODE FOR THE OFFICE IS 45380 OR GO121**

**It is the patient’s responsibility for any deductible amounts or co-insurance not covered by your current insurance plan.**

**Poor Prep RX Chart (for poor prep ONLY)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |
| Day 11 packet of Miralax | Day 21 packet of Miralax | Day 31 packet of Miralax | Day 41 packet of Miralax | Day 51 packet of Miralax | Day 61 packet of Miralax | Day 71 packet of Miralax |
| Day 81 packet of Miralax | Day 91 packet of Miralax | Day 101 packet of Miralax | Day 111 packet of Miralax | Day 121 packet of Miralax | Day 131 packet of Miralax | Day 141 packet of Miralax |
| Day 15MagnesiumCitrate (as directed) | Day 16Refer toInstructionson page 1 | Day 17(procedure day)Refer to instructions on page 1 |  |  |  |  |