

SUTAB PREP- AM

Scheduled Procedure:

- EGD
 Colonoscopy

Date: _____

Estimated Arrival Time: _____

** Your final arrival time will be given when your appointment is confirmed.*

Doctor

Scheduled with: _____

**subject to change*

Location of Procedure: Franklin- Endoscopy Center Harris Hospital Angel

**Failure to stop any of the medications listed below, may result in your procedure being canceled.*



Medications to Stop Prior to Your Procedure:

14 Days- Phentermine

8 DAYS

- Semaglutide
- Trulicity
- Ozempic
- Mounjaro
- Saxenda
- Rybelsus
- Wegovy
- Zepbound
- Soliqua
- Tirzepatide

*Any other **WEEKLY** GLP-1 Agonist medications for diabetes or weight loss.

7 DAYS

- Aspirin
- Vazalore
- Ibuprofen
- Motrin
- Aleve
- Meloxicam
- Advil
- Naproxen
- BC Goody's
- Diclofenac

5 DAYS

- Plavix
- Coumadin
- Warfarin
- Brilinta
- Prasugrel

4 DAYS

Daily GLP-1 agonist (pills or injections).

- Saxenda
- Rybelsus
- Soliqua

3 DAYS

- Xarelto
- Pradaxa
- Eliquis
- Savaysa



CONFIRMATION: About a week before your procedure, a staff member will call to confirm your appointment.

- If a message is left, please return our call at your earliest convenience. This call will provide you with your final arrival time. *We ask that you go by the arrival time during your confirmation call and NOT the estimated time on this form.
 - o Failure to confirm your appointment may result in your appointment being moved to the end of the day.



RIDE HOME- You must have a responsible adult to drive you home after your procedure. You MAY NOT ride the transit or take a taxi home.

- *The only time that this is allowed is if you have a responsible adult to ride transit or taxi service with you.*

PREP INFORMATION

1 DAY BEFORE PROCEDURE

***** NO SOLID FOOD TODAY*****

You may have clear liquids all day today. (See the clear liquid diet sheet attached)



5:00PM:

PART 1: Take the first bottle of tablets following the instructions provided by the office.

- 1) Open 1 bottle of 12 tablets.
- 2) Fill the provided container with 16 ounces of water. Swallow one tablet every 1-2 minutes. You should finished the 12 tablets and the entire 16oz of water within 20 minutes.
- 3) Approximately 1 hour after the last tablet is swallowed, fill the container with water a second time and drink within 30 minutes.

Approximately 30 minutes after completing step 3, fill the container with 16 ounces of water and drink the entire amount over 30 minutes.



10:00PM:

PART 1: Take the second bottle of tablets following the instructions provided by the office.

- 1) Open 2nd bottle of 12 tablets.
- 2) Fill the provided container with 16 ounces of water. Swallow one tablet every 1-2 minutes. You should finished the 12 tablets and the entire 16oz of water within 20 minutes.
- 3) Approximately 1 hour after the last tablet is swallowed, fill the container with water a second time and drink within 30 minutes.
- 4) Approximately 30 minutes after completing step 3, fill the container with 16 ounces of water and drink the entire amount over 30 minutes.

****You may continue clear liquids until instructed time.**

PROCEDURE DAY



Early morning: Take your usual prescribed heart medication / blood pressure medication (NOT BLOOD THINNER) with a sip of water if applicable. Do not take any other medications before your procedure unless instructed to do so.

****No Tobacco Products 6 hours prior to your arrival time****



YOU CAN HAVE CLEAR LIQUIDS UNTIL 4 HOURS PRIOR TO YOUR ARRIVAL TIME!!

(No gum, candy, mints, ice chips, sips of clear liquid or chewing tobacco **after** the 4 hours mark.)

Franklin ENDOSCOPY Center

(828) 349-3636

197 Riverview Street, Franklin, NC 28734

Harris Regional Procedures

(828) 586-9200

68 Hospital Drive, Sylva, NC 28779

Patient Initials _____ / Staff Initials _____