Please purchase (2) 32 ounce bottles of Gatorade (or Crystal Light drink mix to make (2) 32 ounce portions), 4 bisacodyl (DULCOLAX) laxative tablets (not stool softeners) and a 238 gm. bottle of Miralax powder. Generics are fine. These are both over the counter and DO NOT need a prescription. DO NOT MIX WITH RED OR PURPLE LIQUIDS.

DO NOT FOLLOW THE DIRECTIONS ON THE LABEL OF THE MIRALAX CONTAINER.

2 NIGHTS BEFORE YOUR COLONOSCOPY:
Mix 7 capfuls of the Miralax powder with each of the 32 ounce bottles of Gatorade (or Crystal Light) and refrigerate them.

THE DAY BEFORE YOUR COLONOSCOPY:
1. Begin the clear liquid diet (see instruction sheet) when you wake up. NO FOOD MAY BE CONSUMED TODAY. Drink plenty of these fluids during the day to stay hydrated and to improve your results. You may continue to drink clear liquids even during the time you are drinking the prep. You must stop any liquids 6 hours before your procedure start time.

2. At 2 pm take 4 bisacodyl (Dulcolax) tablets.

3. At 5 pm begin drinking the first 32 ounces of the Miralax prep solution. Drink 8 ounces every 15 minutes until the 32 ounces has been consumed. It should be completed in 1 hour.

THE MORNING OF YOUR PROCEDURE:
1. Start the second 32 ounces of the prep beginning 8 hours before the start time of your procedure:_______. It should be completed in 1 hour. These guidelines for the timing of when to take this second 32 ounces of prep are very important, even if you are scheduled early in the morning.

2. DO NOT drink any other liquids during the 6 hours before your procedure start time.

Colonoscopy Technique: A colonoscope is a fiber optic flexible scope that is inserted in the rectum after the patient is sedated. The scope is about the diameter of your finger and has a light source at the end so that the physician can see the lining of the entire large intestine, from the rectum to the cecum (where the appendix and small bowel attach to the large bowel). Factors affecting visibility of the entire lining include the presence of stool and the patient’s anatomy (a fold, kink, or scar tissue that may make it more difficult for the physician to see the lining of the bowels).

Esophagogastroduodenoscopy Technique: A fiber optic flexible scope is inserted through the mouth after the patient is sedated. The scope is about the diameter of a pen and has a light source at the end so that the physician can see the lining of the pharynx, esophagus, stomach and first portion of the small bowel (duodenum).