

GASTROENTEROLOGY CENTER

OF THE SOUTH

8120 Main Street- Suite 200

Houma, LA 70360

(985) 851-5206

INSTRUCTIONS FOR OUTPATIENT ENDOSCOPIC TESTING

1. This procedure will be performed at Terrebonne General Hospital Atrium Endoscopy unit, or at the outpatient/short stay department located at the main hospital.
2. Nothing to eat or drink after midnight. The morning of your test, your stomach must be empty. If you are on heart, blood pressure, breathing, or seizure medications that you normally take in the morning, you must take them on the morning of the procedure, with only a few sips of water.
3. **A NURSE FROM T.G.M.C. ENDOSCOPY DEPT. WILL CONTACT YOU THE DAY BEFORE YOUR PROCEDURE AFTER 2:00p.m. TO INFORM YOU OF THE TIME TO REPORT FOR YOUR PROCEDURE. IF YOU HAVE ANY QUESTIONS ABOUT YOUR TIME PLEASE CALL 985-850-6256/985-580-6167.**
4. You will receive sedatives and **MUST BRING SOMEONE WITH YOU ON THE DAY OF YOUR PROCEDURE. THEY WILL NEED TO DRIVE YOU HOME.** You will not be able to drive the remainder of the day. The sedative will cause you to be forgetful temporarily. You will not remember the procedure or speaking to the doctor after the procedure. The doctor will explain your results to the person with you and they should explain the results to you when you start to remember again.
5. **NO ASPIRIN, ADVIL, ALEVE, MOTRIN, BC POWDER, STANBACK, ALKA SELTZER, ARTHRITIS PILLS OR BLOOD THINNERS FOR 7 DAYS PRIOR TO THE PROCEDURE. IF YOU ARE CURRENTLY ON AN ASPIRIN REGIMENT YOU DO NOT NEED TO STOP, WE DO NOT WANT YOU TO TAKE ANY ADDITIONAL ASPIRIN PRODUCTS.** Continue your other medications. Do not take any over the counter medications without checking with us first. **TYLENOL IS SAFE TO TAKE UP UNTIL MIDNIGHT THE NIGHT BEFORE THE PROCEDURE.**
6. If you have any problems after the procedure or questions in regards to the prep, please do not hesitate to call us at **985-851-5206.**
7. You should check with your insurance company and inform them this procedure has been scheduled.
8. **DO NOT TAKE YOUR DIABETES MEDICATIONS THE MORNING OF YOUR PROCEDURE.** Bring them with you and you will be allowed to take them after the procedure with food.

COLON PREP INSTRUCTIONS – Moviprep

1. THE DAY BEFORE YOUR PROCEDURE

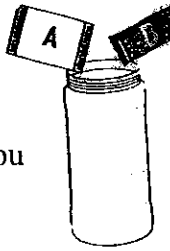
A. You must be on a clear liquid diet, starting when you get up in the morning. The more fluids you drink, the better your colon will be cleaned out

B. DO NOT DRINK ANY RED OR ORANGE FLUIDS.

C. CLEAR LIQUID DIET (LISTED BELOW). DO NOT EAT OR DRINK ANYTHING ELSE EXCEPT WHAT IS ON THIS LIST!

| | | |
|------------|-------------|------------------------|
| SOUP BROTH | KOOL AID | GATORADE/POWERADE |
| ICED TEA | JELLO | POWERADE |
| COFFEE | POPSICLES | WATER |
| LEMONADE | FRUIT JUICE | SOFT DRINKS (DIET/REG) |

D. Mix 1 package A and 1 package B with lukewarm water in 1 liter bottle. Place in the refrigerator so it can become chilled.



E. Start drinking Moviprep jug at 4:00 pm. Drink 8 oz every 15 minutes until you are finished with the 1st container. The container is clearly marked with 8oz markings.

F. Mix the last package A and package B with water in 1 liter bottle. Place in the refrigerator so it can become chilled.



F. Start drinking the 2nd container of Moviprep at 9:00pm. Drink 8 oz every 15 minutes until you are finished with the 2nd container. The container is clearly marked with 8oz markings.

2. **DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT!**

3. THE MORNING OF YOUR PROCEDURE

A. If you are on heart, blood pressure, breathing, or seizure medications, you must take them with only a few sips of water.

B. DO NOT TAKE YOUR DIABETES MEDICATIONS THE MORNING OF THE PROCEDURE. Bring them with you and you will be allowed to take them after your procedure with food.

C. THE NURSE FROM T.G.M.C. ENDOSCOPY DEPARTMENT WILL CONTACT YOU THE DAY BEFORE YOUR PROCEDURE AFTER 2:00pm TO TELL YOU WHAT TIME TO REPORT FOR YOUR PROCEDURE. IF YOU HAVE QUESTIONS ABOUT YOUR TIME PLEASE CALL 985-850-6256.