

LIDDC: MIRALAX or POLYETHYLENEGLYCOL/GATORADE INSTRUCTIONS

* FOLLOW THESE INSTRUCTIONS - NOT INSTRUCTIONS IN PREP KIT

A. MORE THAN TWO WEEKS BEFORE YOUR PROCEDURE:

Inform the office **(631) 751-8700** IF:

1. You are diabetic
2. You are allergic to latex
3. You take **blood thinning products** (Coumadin, Plavix, Aggrenox, Pradaxa, Pletal, Brilinta, Ticlid, Trental, Effient, Xarelto, Eliquis).
4. You have a **prosthetic heart valve**, a history of **endocarditis, vascular graft, prosthetic joint replacement within the last 12 months**. You may need antibiotic coverage for your procedure.
5. Make sure you have a **driver** to take you home after the procedure.

B. ONE WEEK BEFORE YOUR PROCEDURE:

1. Do not take iron, iron-containing compounds, Vitamin E, fish-oil, advil, motrin, ibuprofen, aleve, naprosyn. You may take Tylenol (acetaminophen).
2. If you are taking aspirin 81 mg/day (baby aspirin) you should CONTINUE this unless otherwise instructed.
3. **Blood work** should be done 7-14 days prior to the procedure. A **pregnancy test** should be done less than **7 days** prior to the procedure if you are a woman of child bearing age.
4. Avoid fruits/vegetables with **seeds**: eg tomatoes, kiwi fruit, caraway, flax, poppy, sesame etc. and corn.

C. THE DAY BEFORE YOUR PROCEDURE:

1. **DO NOT EAT SOLID FOOD.** Drink **only clear liquids** (liquids you can see through). These should **not be RED or PURPLE**. Examples include: apple juice, water, clear broth or bouillon, Gatorade, Snapple, carbonated soda, jello, ice popsicles, black coffee, black tea. (sugar or sweetener is allowed – but NO milk/creamer)
2. Drink at least 8 glasses of clear liquid during the day. It is very important that you stay well hydrated.
3. At **3pm** take **4 Dulcolax tablets** (available over the counter)
4. At **5pm**, mix the 8.3 oz. (238 g) bottle of Miralax or 225 g of Polyethylene glycol in 64 oz. of Gatorade or Crystal Light Beverage. Shake the solution until the Miralax has dissolved. Drink **8 oz. every 10-15 minutes** until you have finished the entire solution. Continue clear liquids until bed-time. Remain close to toilet facilities.
5. If your procedure is scheduled in the **hospital**, call the evening before for your arrival time.
 - Mather Hospital 476-2717
 - St Charles Hospital 474-6441

D. THE DAY OF YOUR PROCEDURE: DO NOT EAT ANY FOOD

1. **Do not eat anything after midnight on the day of your procedure.** You **may not drink anything** less than 6 hours before your procedure. No gum or candy. You may brush your teeth.
2. Take your usual morning medications with a **sip** of water.
3. Wear loose fitting clothes. Do not wear contact lenses, jewelry or make-up. Remove tongue piercings.
4. Bring your **inhalers** with you. Bring your **glasses case** with you.
5. Contact the office if you have questions or your physical condition changes (cold, fever, illness) (631) 751-8700.
6. We may **cancel the procedure if you do not have a driver to take you home**. Your driver will need to sign your discharge papers. You may **resume your normal diet** after the procedure. You **may not drive for the rest of the day/night**. You may **resume normal activities** the next day.