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PROCEDURE PREPARATION INSTRUCTIONS

Procedure Date: ____/____/____ Estimated Arrival Time: ____:____ AM

Procedure: Colonoscopy EGD

- Location:**
- Memorial Hermann Surgery Center 23920 Katy Freeway #200 Katy, TX 77494 281-644-3200
(In Line Anesthesia – Delta Medical Billing** Chris Sisemore 832-971-0305)
 - Methodist Hospital Katy 18500 Katy Freeway Houston, TX 77094
 - Memorial Hermann (KINGSLAND) 21720 Kingsland Blvd. Katy, TX 77450
 - Memorial Hermann Katy Hospital 23900 Katy Freeway Katy, TX 77494

Your procedure will take approximately 30-45 minutes to complete. Your total time at the facility will be approximately 2.5 – 3 hours. You should plan on taking the day off from work. For your safety you will not be permitted to drive yourself home after the procedure. **Please make arrangements to have a responsible adult accompany you and drive you home.**

The time given for your procedure when scheduling is an estimated time subject to change per facility.

The facility will call to confirm your appointment and arrival time the day before your procedure. If you are given a different arrival time at that moment please arrive at the time which was given to you by the facility staff.

COLONOSCOPY/EGD

(Pre-Procedure Instructions)

- **DO NOT** take blood thinners such as Coumadin, Warfarin, Pletal, Plavix, or Aspirin during the **seven (7) days prior** to your procedure **UNLESS** instructed otherwise.
- **STOP** all Fiber supplements, Vitamins, Iron supplements, Aspirin-like products such as Advil, Ibuprofen, Aleve, and certain arthritis medications **five (5) days prior** to your procedure. ****Can use TYLENOL**
- **DIABETICS:** Do not take diabetic medications, including insulin, on the morning of your procedure.

**** Please check your blood glucose level in the morning prior to your arrival.**

EGD procedures: Nothing to eat or drink after midnight

If you have any questions or concern please contact our office 281-945-5190, Rachel or Naydine

Dietary Preparations for COLONOSCOPY

(_____) **Two (2) days before** your procedure avoid all fruits containing seeds; avoid whole grains and nuts, do not eat corn or raw vegetables; avoid rice, beef, milk/milk based products, avoid any foods or beverages that are colored red, blue, or purple.

*****2 days prior foods you can eat:** chicken, turkey, fish, eggs, peanut butter, wheat/white bread, apples, pears, bananas, pasta, cooked/steamed vegetables.

The day before your procedure (_____)

You will be on a clear liquid diet the entire day before your colonoscopy.

Clear Liquid options ----*Do Not Eat Jell-O*

Plain water Apple Juice White grape juice strained lemonade (no pulp)
Black Coffee Tea Clear Sodas (Sprite, Mountain Dew, etc.)
Sports Drinks (excluding red, blue and purple colored drinks) Broth (chicken, bouillon, consommé)

Suprep

Place in the refrigerator to cool.

Drink slowly using a straw.

The evening before your procedure

Begin first dose at 6:00 p.m.

Pour one 6 oz. bottle of Suprep liquid into the mixing container.

Add cool drinking water to the 16 oz. line on the container and mix.

Drink all the liquid in the container.

*Within the hour: drink **TWO** 16 oz. containers of water.*

Begin the second dose 4hours before your scheduled procedure time

With a procedure time of _____. You will start Drinking at _____.

Please be aware that if the time of your procedure changes so will the time you start your second dose of the prep.

DO NOT EAT OR DRINK ANYTHING AFTER YOU HAVE COMPLETED YOUR PREP.

Biopsy results: will be sent through the **patient portal** 10-14 days after procedure.

If you are unable to access your portal please contact our office.

CANCELATION POLICY: All procedures must be cancelled or rescheduled at least 48 hours prior to the procedure time. NOT DOING SO WILL RESULT IN A \$100.00 FEE.