

The logo for Southwest Endoscopy (SWE) consists of the letters 'SWE' in white, bold, sans-serif font, centered within a dark blue rectangular box. The box has a thin white horizontal line above and below the text.

**SWE**

# Golytely Split Dose Prep

**Location: Southwest Endoscopy**  
**7788 Jefferson St NE, Albuquerque, NM 87109**  
*Please call to confirm appointment 505-999-1600*

**The following instructions are your physician's specific instructions. Please follow the instructions carefully to ensure a successful prep.**

You can reach your physician's office at: 505-999-1600

**NO SHOW FEE:** Any patient who fails to keep their scheduled procedure will be charged a \$150.00 fee. The fee must be paid prior to rescheduling any appointments.

**Cancellations:** must be made 4 business days prior to your scheduled procedure. Any cancellation made less than 4 business days will be charged \$150.00.

**Changes in Health Status:** Please contact our office for evaluation if you have had any significant changes in your health status between the time your procedure was scheduled and your procedure date. Significant changes can include a heart attack or starting a new anticoagulant (blood thinners). Please also contact our office if you develop or are experiencing flu-like or COVID related symptoms.

Examples of blood thinning medication include; Arixtra (fondaparinux), Beryxxa (betrixaban), Brillinta (ticagrelor), Coumadin (warfarin), Effient (prasugrel), Eliquis (apixaban), Plavix (clopidogrel), Pradaxa (dabigatran), Savaysa (edoxaba), Ticlid (ticlopidine), Xarelto (rivaroxaban)

If you recently started taking any medications listed above, please contact our office immediately at 505-999-1600.

**1 week prior to your procedure purchase the following:**

- Pick up your prescription of Golytely bowel prep kit at your pharmacy.
- Purchase 1 package of over-the-counter Dulcolax (Bisacodyl) Laxative 5mg tablets (you will only need 2 tablets)
- Optional for a sore bottom – plain or aloe baby wipes, Desitin, A&D ointment, or Vaseline.
- Clear liquids



When purchasing Dulcolax tablets, **ensure you purchase the Dulcolax Laxative** tablets, not the Dulcolax stool softener tablets, as shown in the images above and below.



**7 days prior to procedure**

**Pick up your prescription for Golytely at your pharmacy. Purchase 5mg Dulcolax/Bisacodyl tablets.**

**Special Notes:**

Let us know if you are on any of the following blood thinners: Plavix, Coumadin, Effient, Pradaxa, Eliquis, Xarelto or other blood thinning medications.

**STOP:**

iron supplements or vitamins that contain iron

**STOP:**

fish oil, krill oil or shark oil supplements.

**3 days prior to procedure**



**STOP** eating any vegetables, fruits, or corn. No foods that contain seeds like tomatoes, green chile or sesame seed buns.

You can eat meat, fish, rice, pasta, breads without seeds, peanut butter, eggs, cheese and cereal.

Purchase clear liquid diet items, ointment, reading material, etc.

**2 days prior to procedure**



Continue to avoid vegetables, fruits, or corn. No foods that contain seeds like tomatoes, green chile or sesame seed buns.

Confirm arrangements with your driver.

**1 day prior to procedure**

**NO SOLID FOODS  
NO ALCOHOL**

**Clear liquids only** from the time you wake up until after your procedure. A clear liquid diet is necessary for a colonoscopy.

**Prep at a Glance**

**12:00 pm** take 2 Dulcolax  
**5:00 pm** take 64oz of prep solution.

Drink plenty of water and liquids throughout the day to avoid dehydration.

Detailed, step-by-step instructions continue on page 4.

**Day of procedure**

8 hours prior to your procedure

Begin drinking the 64oz of prep solution.

**Remember, you will not have any solid foods this day.**

Do not drink **6 hours prior** to your procedure except for your usual medication with no more than 2 oz of water 2 hours prior to your procedure.

Do not skip heart, blood pressure or seizure medications.

**Clear Liquid Diet Details: NO RED or PURPLE. NO DAIRY**

**Approve**

- Sodas, coffee, tea clear juices, fitness waters.
- Popsicles without pulp.
- Chicken, vegetable, and beef broth, Gelatin.

**Avoid**

- No milk/dairy
- No juices with pulp
- No RED or PURPLE



## Prep Day: The day before your procedure

Drink plenty of water throughout the day to avoid dehydration.

1

**12:00 PM** Two days prior to your procedure.

Take 2 (5mg) Dulcolax tablets with a glass of water.



2

**12:00 PM** the day prior to your procedure.

Prepare the mix by adding drinking water to the indicated line (4 liters) near the top of the gallon jug. Shake until powder is mixed with the liquid and chill in the refrigerator.

The solution **MAY NOT** be mixed with any other drink and **MUST BE** used within 24 hours after mixing



3

**5:00 PM** the day prior to your procedure.

Begin drinking, and drink **HALF OF THE MIXTURE (64 oz.)** Drink an 8 oz. glass of the solution every 10-15 minutes **until half of the solution is gone.**

Shake the container before pouring each dose. Continue to drink water, clear soda, or clear sports drinks throughout the evening.



## Prep Day: The day of your procedure

**8 hours** prior to your procedure

Begin drinking and drink **THE REMAINDER OF THE MIXTURE (64 oz.)** Drink an 8 oz. glass of the solution every 10-15 minutes **until half of the solution is gone.**

Shake the container before pouring each dose. Prep must be completed no later than **6 hours** prior to your procedure.





**Individual responses to laxatives vary. This preparation will cause multiple bowel movements and stay close to a bathroom.**



Proper preparation is crucial for your colonoscopy. If your bowel is not thoroughly emptied and cleaned, your gastroenterologist will not have a clear view of your colon. This could result in missing a polyp or needing to reschedule the procedure. The scale above represents the different phases of colon prep. You have prepped correctly when your stool appears yellow and clear, similar to urine.

# Bowel Prep Frequently Asked Questions

## **What is a clear stool?**

A clear stool can have a slight tint of yellow or brown. It will be completely transparent and will not contain any solid matter.

## **I am not having bowel movements. What should I do?**

Bowel movements can take up to 5-6 hours after beginning the prep to start. Be patient, continue to drink liquids.

## **The prep is making me nauseous, what should I do?**

If you develop nausea or vomiting, slow down the rate at which you drink the solution. Wait 30 minutes before you continue drinking the prep. Please try to drink all the laxative solution even if it takes you longer. If vomiting persists, or you are not able to finish the preparation, stop the preparation and call your physician's office for further instructions.

## **What are some high-fiber foods I should avoid?**

Raw fruits and vegetables, nuts, seeds, whole-grain breads, beans, and lentils are typically high in fiber.

## **What are some good options for low-fiber foods?**

Choose white bread and white rice for lower fiber options, as well as pasta made with white flour. Chicken, fish, dairy, and eggs are also low in fiber and are good choices for foods 2-3 days before you begin your prep.

## **If I eat popcorn or seeds 3 days before my procedure, do I need to reschedule?**

You will not need to reschedule your procedure; however, the seeds or nuts may cause difficulty in screening and require rescreening. If you have eaten a large number of seeds or nuts, you may want to contact the nurse or physician.

## **Can I drink ALCOHOL on the liquid diet?**

Alcohol is not allowed as part of the liquid diet.

## **Can I continue to be on the liquid diet after I begin consuming the laxatives?**

Yes, you may continue the liquid diet until you are directed to discontinue anything by mouth, which is typically 6 hours prior to the procedure. The more liquids you drink the better your prep will be.

**Why do I have to wake up so early for the second dose? Can't I take it all the night before?** A split prep has proven to be the most effective for a successful colonoscopy. It is essential that you follow the directions provided with your prep medications.

## **If I weigh under 100 pounds, do I need to take all of the prep?**

The liquid amount is not weight-dependent. It is important to finish the prep for a successful colonoscopy.

## **What if I have more prep questions?**

If you have more questions regarding your prep, please contact your physician at 505-999-1600 between 7 AM-10PM. All prep questions in the middle of the night will be returned after 7AM the next morning.

## THE DAY OF YOUR PROCEDURE

All patients must check in for their procedure 60 minutes before the procedure time. For example, if your procedure is set for 7 a.m., please check in at 6 a.m., as our office opens at 6 a.m. Please allocate 2-3 hours for your visit.

**You must start drinking the second dose of the prep 8 hours before your procedure and then have nothing by mouth for 6 hours before your procedure.**

TAKE YOUR BLOOD PRESSURE MEDICATIONS, HEART MEDICATIONS, OR SEIZURE MEDICATIONS AS PRESCRIBED **WITH A SMALL SIP OF WATER** (no more than 2oz) NO LATER THAN 2 HOURS PRIOR TO YOUR PROCEDURE OR YOUR PROCEDURE WILL BE CANCELED. YOU CANNOT HAVE CHEWING GUM, HARD CANDY, OR TOBACCO PRODUCTS THE DAY OF YOUR PROCEDURE.

**You must arrange to have a responsible adult (18 or older) come with you to your procedure to drive you home.** You cannot drive, take a bus, or leave the facility alone. Your driver does not need to stay at our facility during your procedure but needs to remain reachable by phone. The staff will call your driver 30 minutes before you are ready to be discharged

- You will need your current insurance card, picture ID, and copayment.
- If you are female under age 50 you may need to submit a urine specimen for a pregnancy test.

**Your Patient Advisor will call you from a 913 area code to assist you with your preparation information. You can also choose to order a prep kit during the call (this is not required). You may decide to purchase your prep items over the counter. If you have any questions or concerns about the preparation, feel free to ask during the call.**

**Please contact Your Patient Advisor by calling 800-349-0285 or emailing [support@yourpatientadvisor.com](mailto:support@yourpatientadvisor.com).**

### **Your Patient Advisor Customer Service Hours:**

Monday through Thursday from 6:00 am -9:00 pm MT

Friday from 6:00 am - 4:00 pm MT

Saturday from 9:00 am - 3:00 pm MT

Sunday from 11:00 am - 7:00 pm MT

# Diabetic Medication and Diet Instructions for Colonoscopy

The following information is both diet and medication recommendations for our diabetic patients undergoing endoscopic procedures. These are general guidelines. Please contact your healthcare provider who manages your diabetes for questions.

**For people with diabetes, any procedure that causes you to miss a meal or change your usual meal plan will require special planning to safely manage your blood sugar levels.**

- Schedule the appointment for early in the day so that you can eat afterwards and take your medication as close to the usual time as possible.
- Check your blood glucose level before all meals and at bedtime on the preparation day and on the day of the procedure.
- Check your blood glucose if at any time you have symptoms of low blood glucose or very high blood glucose

## **DIET: Clear liquid food choices for the day before your colonoscopy:**

Aim for 45 grams of carbohydrates at meals and 15-30 grams for snacks. Avoid anything that is colored **red**, **orange**, or **purple**. Look for CLEAR, YELLOW, or GREEN flavors (examples: lemon, lime, apple, white grape, peach, banana).

| <b>Food Item</b>                                     | <b>Grams of Carbohydrate</b> |
|--|------------------------------|
| <b>Ensure Active Clear (4 ounces)</b>                | <b>18</b>                    |
| <b>Clear Boost Breeze (4 ounces)</b>                 | <b>27</b>                    |
| <b>Clear apple juice (not cider) (4 ounces)</b>      | <b>15</b>                    |
| <b>White grape juice (4 ounces)</b>                  | <b>20</b>                    |
| <b>Jell-O (gelatin), regular sweetened (1/2 cup)</b> | <b>17</b>                    |



| Food Item  | Grams of Carbohydrate |
|--|-----------------------|
| Popsicles or ice pops (read label)               | 15                    |
| Italian ice (1/2 cup)                            | 27                    |
| Sugar (for coffee or tea) (1 teaspoon or packet) | 15                    |
| Fat-free broth, bouillon, or consommé            | 20                    |
| Diet clear soda                                  | 0                     |
| Coffee   | 0                     |
| Tea, unsweetened or diet                         | 0                     |
| Seltzer  | 0                     |
| Flavored water                                   | 0                     |

**SAMPLE MENU- Avoid foods that are colored red, orange, or purple**

| Breakfast   | Lunch   | Dinner  |
|---|---|---|
| <ul style="list-style-type: none"> <li>• Apple or white grape juice (1 cup)</li> <li>• Regular sweetened Jello (1/2 cup)</li> <li>• Tea with lemon</li> </ul> | <ul style="list-style-type: none"> <li>• Broth</li> <li>• Italian ice (1cup) Tea with lemon</li> <li>• Regular sweetened Jello (1/2 cup)</li> </ul> | <ul style="list-style-type: none"> <li>• Broth</li> <li>• Apple or white grape juice (1 cup) Tea with lemon</li> <li>• Regular sweetened Jello (1/2 cup)</li> </ul> |

# MEDICATIONS: DAY PRIOR TO PROCEDURE (Preparation Day)



| If you take  | Morning                             | Lunch/<br>Dinner                   | Bedtime                             |
|--|-------------------------------------|------------------------------------|-------------------------------------|
| <ul style="list-style-type: none"> <li>• Glucophage(metformin)</li> <li>• Januvia</li> <li>• Janumet</li> <li>• Byetta,Tradjenta</li> <li>• Onglyza</li> <li>• Invokana</li> <li>• Avandia</li> <li>• Avandamet</li> <li>• Actos (pioglitazone)</li> <li>• ACTOplus Met<br/>(pioglitazone &amp; metformin)</li> <li>• Farxiga</li> </ul>   | <p><b>Take your usual dose</b></p>  | <p><b>Take your usual dose</b></p> |                                     |
| <ul style="list-style-type: none"> <li>• Glucotrol</li> <li>• Glucotrol XL</li> <li>• Micronase (glyburide)</li> <li>• Glucovance (glyburide and metformin)</li> <li>• Jardiance</li> <li>• Metaglip (glipizide&amp; metformin HCl)</li> <li>• Prandin (repaglinide)</li> <li>• Starlix (nateglinide)</li> <li>• Victoza, Amaryl (glimepiride)</li> <li>• Avandaryl</li> <li>• DiaBeta</li> <li>• Glynase</li> <li>• Duetact (pioglitazone &amp; glimepiride)</li> </ul> | <p><b>DO NOT TAKE</b></p>           | <p><b>DO NOT TAKE</b></p>          | <p><b>DO NOT TAKE</b></p>           |
| <ul style="list-style-type: none"> <li>• Lantus</li> <li>• Levemir</li> </ul>  | <p><b>Take your usual dose.</b></p> |                                    | <p><b>Take your usual dose.</b></p> |

# MEDICATIONS: DAY PRIOR TO PROCEDURE (Preparation Day)



| If you take   | Morning   | Lunch/<br>Dinner  | Bedtime |
|---|---|---|---------|
| <ul style="list-style-type: none"> <li>Humalog</li> <li>Novolog</li> <li>Regular Insulin or NPH Insulin</li> </ul> <p>If you use insulin sliding scale, then you may continue using it.</p> | <p>Take ½ the usual amount if you take a fixed dose<br/>– OR –<br/>Cover your carbs with your usual carb ratio.</p> | <p>Take ½ the usual amount if you take a fixed dose<br/>– OR –<br/>Cover your carbs with your usual carb ratio.</p> |         |
| <p>Premixed insulin; 75/25,<br/>Novolin 70/30<br/>Novolog Mix 70/30</p>   | <p><b>TAKE ½ THE USUAL DOSE AT BREAKFAST</b></p>  | <p>Take ½ the usual dose at dinner.</p>   |         |

**If you have a question about a specific medication not listed, please call us at 505-999-1600**

# MEDICATIONS: DAY OF PROCEDURE



Follow the clear liquid described above and adjust your medications as follows:

| If you take  | Morning                             | Lunch/<br>Dinner                                | Bedtime                              |
|--|-------------------------------------|---|--------------------------------------|
| <ul style="list-style-type: none"> <li>• Glucophage(metformin)</li> <li>• Januvia</li> <li>• Janumet</li> <li>• Byetta,Tradjenta</li> <li>• Onglyza</li> <li>• Invokana</li> <li>• Avandia</li> <li>• Avandamet</li> <li>• Actos (pioglitazone)</li> <li>• ACTOplus Met (pioglitazone &amp; metformin)</li> <li>• Farxiga</li> </ul>   | <p><b>DO NOT TAKE</b></p>           | <p><b>DO NOT TAKE</b></p>                       |                                      |
| <ul style="list-style-type: none"> <li>• Glucotrol</li> <li>• Glucotrol XL</li> <li>• Micronase (glyburide)</li> <li>• Glucovance (glyburide and metformin)</li> <li>• Jardiance</li> <li>• Metaglip (glipizide&amp; metformin HCl)</li> <li>• Prandin (repaglinide)</li> <li>• Starlix (nateglinide)</li> <li>• Victoza, Amaryl (glimepiride)</li> <li>• Avandaryl</li> <li>• DiaBeta</li> <li>• Glynase</li> <li>• Duetact (pioglitazone &amp; glimepiride)</li> </ul> | <p><b>DO NOT TAKE</b></p>           | <p><b>Resume your usual dose if eating.</b></p> |                                      |
| <ul style="list-style-type: none"> <li>• Lantus</li> <li>• Levemir</li> </ul>  | <p><b>Take ½ the usual dose</b></p> |   | <p><b>Resume your usual dose</b></p> |



# MEDICATIONS: DAY OF PROCEDURE



Do not make up or “double up” on any missed medication after the procedure

| If you take   | Morning     | Lunch/<br>Dinner                 | Bedtime |
|---|-------------|----------------------------------|---------|
| <ul style="list-style-type: none"> <li>Humalog</li> <li>Novolog</li> <li>Regular Insulin or NPH Insulin</li> </ul> <p>If you use insulin sliding scale, then you may continue using it.</p> | DO NOT TAKE | Resume your usual dose if eating |         |
| <p>Premixed insulin; 75/25,<br/>Novolin 70/30<br/>Novolog Mix 70/30</p>   | DO NOT TAKE | Resume your usual dose if eating |         |

If you have a question about a specific medication not listed, please call us at 505-999-1600

## If you take GLP-1 medications

|  |   |
|--|---|
| <ul style="list-style-type: none"> <li>Dulaglutide (Trulicity) (weekly)</li> <li>Exenatide extended release (Bydureon bcise) (weekly)</li> <li>Semaglutide (Ozempic) (weekly)</li> <li>Tirzepatide (Mounjaro) (weekly)</li> </ul>      | <p>These medications should be stopped the week prior to your procedure</p> |
| <ul style="list-style-type: none"> <li>Exenatide (Byetta) (twice daily)</li> <li>Liraglutide (Victoza, Saxenda) (daily)</li> <li>Lixisenatide (Adlyxin) (daily)</li> <li>Semaglutide (Rybelsus) (taken by mouth once daily)</li> </ul> | <p>These medications should be stopped 1 day prior to your procedure</p>    |