

Etowah Gastroenterology Associates, PC

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VIPULT. AMIN, M.D.

COLONOSCOPY MIRALAX PREPARATION-2 DAY

Name:	Date:
Hospital:	_ THE FACILITY WILL CALL THE DAY BEFORE WITH TIME.
PLEASE NOTIFY THE OFFICE 48 HOURS PRIO	R IF YOU NEED CHANGE THIS DATE
PURCHASE AT THE PHARMACY: (6)-Dulcolax laxativ Magnesium Citrate (over the counter)	ve tablets, (1) bottle 255gm of Miralax (Rx) & (1) bottle of
take any Aspirin, Bufferin, Advil, Ibuprofen, Aleve, Napromedication/ blood thinners for (5) days prior to your proprocedure.	nd heart medication prior to your procedure. Please DO NOT osyn, Indocin, Lodine, Coumadin, or any other arthritic ocedure. If you take fish oil please stop 7 days prior to effore the procedure. DO NOT take insulin the day of test.
TWO DAYS BEFORE THE PROCEDURE:	ulcolax tablets. You can take these at any time during the
 lemonade/ limeade. NO RED, PINK, ORANGE of Desserts: Water Ices, Italian ice, popsicles, or jel Take (2) Dulcolax tablet at 10 AM and (2) Du In early afternoon, mix the whole bottle of I Shake the solution until dissolved. Drink 8 of finished. 	llo
On day of the procedure: Nothing to eat or drink. (NO SMOKING, MINTS, OR GUN 1. If you take blood pressure or heart medicat your procedure.	n) ions, you may take them with a small sip of water before
NO DRIVING! You must have a driver the day of	procedure.

PLEASE CALL THE OFFICE WITH ANY QUESTIONS 256-467-4477

GADSDEN REGIONAL OUTPATIENT 1007 GOODYEAR AVE GADSDEN AL 35903 256-494-4462 GADSDEN ENDOSCOPY (RIVERVIEW) 820 GOODYEAR AVE GADSDEN, AL 35903 256-492-4284 CHEROKEE MEDICAL CENTER 400 NORTHWOOD DR CENTRE, AL 35960 256-927-1326