

**WAKE ENDOSCOPY CENTER  
MOVIPREP –EVENING BEFORE PREP (ONE DAY)  
PREPARATION FOR COLONOSCOPY**

You will need to drink a laxative solution called MoviPrep to clean your colon. You must complete the entire prep to ensure the most effective cleansing.

**PRIOR TO YOUR PROCEDURE YOU WILL NEED TO PURCHASE:**

- 1-MoviPrep Kit (prescription enclosed)
- 1-Reglan tablet (Metoclopramide) optional (prescription enclosed)
- 2-Dulcolax (Bisacodyl) Tablets (over the counter; no prescription required)

**\*BE SURE TO LET THE NURSE KNOW IF YOU ARE ON COUMADIN, WARFARIN, OR PRADAXA AS SOON AS POSSIBLE**

- \*\*5 Days prior to you procedure: Stop oral iron supplements; please avoid sesame seeds and nuts.
- \*\*\*Diabetic medication adjustment: Day before procedure: take your normal am insulin and or oral medication; take ½ of pm insulin dose, no oral diabetic medications. Day of procedure: do not take any diabetic medications until after the procedure.

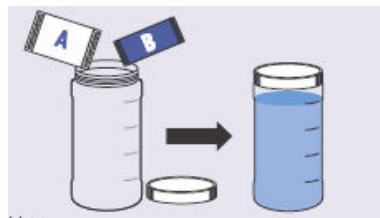
**DAY BEFORE PROCEDURE:** \_\_\_\_\_

Drink clear liquids only for all snacks and meals. No solid food or milk products. **Clear Liquid Diet:** coffee, tea, soft drinks, Jell-O, clear broth, popsicles, clear fruit juice, Gatorade, water, lemonade, Snapple, powdered fruit drinks. Avoid red and purple liquids.

\*\*\*Important note: staying well hydrated during this prep is extremely important. Force fluids all day prior to and after beginning the bowel prep.

**Morning:** Prepare your MoviPrep solution

1. Empty 1 pouch A and 1 pouch B into the disposable container
2. Add lukewarm water to the top line of the container. Mix to dissolve. Refrigerate.  
\*\*You do not have to mix the solution ahead of time if you do not wish to refrigerate prior to drinking.
3. **At 2 pm:** Take both Dulcolax tablets
4. **At 4:30 pm:** Take Reglan tablet (optional) the prep may cause nausea and sometimes vomiting. Reglan taken in advance of the prep should reduce nausea and vomiting.
5. **At 5 pm:** The MoviPrep container is divided by four marks. Every 15 minutes, drink the solution down to the next mark (approximately 8 ounces), until the full liter is complete.
6. Drink 16 ounces of the clear liquid of your choice.
7. **Prepare** the second container of MoviPrep and refrigerate.



\*Do not plan to go out anywhere after you have started drinking the prep. The prep will cause diarrhea to cleanse your bowel for the procedure. You may start going to the bathroom after only a couple of glasses, but be sure to drink **ALL** of the solution.

\*You may wish to use diaper rash cream or Vaseline to protect your rectum as the prep makes you have many bowel movements.

\* You may have clear liquids until midnight.

8. **At 8 pm: Repeat steps 5 and 6 above.** You may continue to drink fluids until midnight.

**NOTHING TO EAT OR DRINK AFTER MIDNIGHT**

Please take all regularly scheduled morning medications with a small amount of water.

\*\*If you use inhalers, please bring them with you\*\*

\*\*If you use a CPAP or VPAP machine, you are required to bring it with you\*\*

**YOU WILL BE SEDATED FOR THIS PROCEDURE AND WILL REQUIRE AN ADULT TO DRIVE YOU HOME. YOUR DRIVER WILL BE REQUIRED TO STAY AT THE FACILITY DURING YOUR PROCEDURE.**

Your procedure is scheduled with Dr. \_\_\_\_\_

Date of Procedure \_\_\_\_\_ Location \_\_\_\_\_

Arrival Time \_\_\_\_\_ Procedure Time \_\_\_\_\_

If you have any questions, please call \_\_\_\_\_ at (919) 783-4888.

## **IMPORTANT REMINDER TO ALL PROCEDURE PATIENTS**

### **If you are having an Upper Endoscopy, Colonoscopy, and/or ERCP:**

Please arrive for your procedure at the scheduled arrival time. If you are unable to keep your appointment, please call our office as soon as possible to reschedule. We reserve the right to charge for missed appointments or appointments cancelled less than 72 hours in advance.

**You will be sedated and will require an adult (18 years or older) to drive you home. Your driver will be required to stay at the facility during your procedure.**

**The facility at which are scheduled has the right to delay or cancel your procedure in the event that you do not have an adult with you when you arrive for you appointment.**

Do not plan to drive, go to work, sign any legal documents or participate in any activities that require concentration during the remainder of the day.

If your procedure is scheduled at:

**RALEIGH MEDICAL GROUP/WAKE ENDOSCOPY CENTER** take the elevator to the second floor, see enclosed map for directions. Do not use GPS.

**REX HEALTHCARE-** please use the Main Entrance and go the Patient Registration

**DUKE HEALTH RALEIGH HOSPITAL-**please use the entrance which reads “Admitting Entrance”

**WAKEMED CARY-**check in at admission/business office

**JOHNSTON AREA MEDICALCENTER-**please use the Main Entrance and go to Patient Registration

If you have any questions, please call:

Raleigh Office: (919) 783-4888 or 1-800-491-7236

Cary Office (Dr. Gumber, and Dr. Reddy): (919) 858-0892

Clayton Office (Dr. Whitt): (919) 783-4888

Dr Hutzenbuhler’s Office: (919)787-7226



