**SUTAB PREP INSTRUCTIONS**

**Patient Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Patient DOB \_\_\_\_\_\_\_\_\_\_\_\_ RX sent to your pharmacy

**Date of Colonoscopy:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time: \_\_\_\_\_\_\_\_\_\_\_\_\_ **MUST** Arrive at: \_\_\_\_\_\_\_\_\_\_\_

⃝ Methodist Charlton Medical Center: 3500 W Wheatland Rd- Outpatient center 214-947-5450

⃝ Methodist Midlothian Medical Center: 1201 East US-287 – Outpatient center 469-846-6100

⃝ Methodist Mansfield ASC Center: 252 Matlock Road Ste 430 POB 2 at the hospital- 817-242-3600

⃝ Methodist Mansfield Medical Center: 2700 East Broad Street – Outpatient center 682-242-2000

⃝ Endoscopy Center at Redbird Square: 3107 W Camp Wisdom Rd Ste 189- 214-331-2922

**\*COVID pretesting is required 3 days prior to this procedure date for all Methodist locations.**

**Charlton patients call 214-947-6189 to schedule your covid pretest.**

**Mansfield patients call 682-242-2000 to schedule your covid pretest.**

**Midlothian patients a nurse will call you to schedule. {If needed their # is 469-846-6100}**

**THE DAY BEFORE YOUR PROCEDURE**:

1. Follow the clear liquid diet from the time you get up until midnight.

**FIRST DOSE**: Begin step 1 at **6:00 pm** the evening before your procedure.

* **Step 1:** Open one bottle of 12 tablets.
* **Step 2:** ADD cool drinking water to the 16 ounce line on the container and start to swallow each tablet while drinking the water. Fill cup up 2 more times and drink.
* **Step 3:** 1 hour after last tablet taken drink one more (16oz) cup of water.
* **Step 4:** 30 min later drink one more (16oz) cup of water.
* **You are still on clear liquids until midnight tonight.**

**SECOND DOSE:** Begin step 1 again at **\_\_\_\_\_\_\_ (6 hours prior to your arrival time)**. For this dose, you repeat steps 1 through 4 using the second bottle of tablets included in your prescription. You have 2 hours to have step 1-4 complete. NPO 4 hours prior to arrival.

1. Do not eat or drink anything else after midnight except the 2nd dose of prep. This includes chewing gum. **If you eat, your procedure will be cancelled.**
2. You will be sedated for this procedure so you must have someone drive you.

***NO uber/taxi/bus allowed***. If you do not have approved transportation your test will be cancelled.

1. If you are not clear by morning, please call the office 214-948-8856.

Patient Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_