

SUTAB PREP (procedure 9:30 AM and earlier)**General Guidelines:**

- If SUTAB preparation is not covered by your insurance, please use a coupon at <https://www.sutab.com/savings>
- If you have a **defibrillator**, are on **dialysis**, or are **significantly overweight (BMI>50)**, you must schedule your procedure at a hospital (not an outpatient endoscopy center).
- If you take certain diabetes or weight loss medicines including Ozempic, Rybelsus, Wegovy, Mounjaro, Adlyxin, Trulicity, Victoza, Saxenda, Byetta, or Bydureon, you must stop your medicine at least **8 days prior** to your colonoscopy.
- For 5 days prior to your colonoscopy, avoid fiber supplements, seeds, nuts, skins of fruits and vegetables, whole grain bread and bars.
- Iron, vitamin E, and NSAIDs (e.g. ibuprofen, naproxen, and diclofenac) should be stopped 3 days prior to your colonoscopy. Tylenol, aspirin, and multivitamins are permitted.
- If you take blood thinners or anti-platelet agents such as Coumadin, Eliquis, Xarelto, Pradaxa, Plavix, Effient or Brilinta, you must contact your **cardiologist/internist** to find out when to stop your medication.
- No marijuana 12 hours prior to the procedure.
- Due to the sedation for your procedure, you **must** be accompanied by a driver. No driving is permitted until the following day.

FOLLOW THESE INSTRUCTIONS (please disregard the manufacturer's instructions):**The day before the colonoscopy—all day:**

Follow a **clear liquid diet**. Do not eat any solid food (including breakfast). Drink as much fluid as you can throughout the day.

The day before the colonoscopy, at 5 PM:

1. Take 2 extra strength Gas-X (simethicone) 125mg soft gels or tablets).
2. Fill the container provided with SUTAB with 16oz of water (up to the fill line).
3. Open 1 bottle of 12 SUTAB tablets. Swallow each tablet with a sip of water from the container. Do not swallow the larger desiccant cylinder. **Finish all 12 tablets and the 16oz of water over 30 minutes**. To prevent nausea, do not take all 12 pills at the same time. If you become uncomfortable, consume the tablets and water at a slower pace and keep walking around to promote intestinal motility.
4. 30 minutes after completing the last tablet, refill the container with 16oz of water **two more times** and drink this entire amount (32oz) over 1 hour.

The day before the colonoscopy, at 10 PM:

Take the second preparation dose, repeating steps 1, 2, 3, and 4 above.

Optional: If you do not feel clear after completing the prescribed prep, take 3 capfuls of Miralax in 8oz of water. You may repeat this until the stool is clear. Do not take any additional Miralax within 3 hours of your procedure.

Do not drink any liquids (including Miralax) within 3 hours of your procedure or it may be cancelled.

Name: _____ Procedure Date: _____

REGISTER AT: _____ AM. PM. PROCEDURE AT: _____ AM. PM.

REPORT TO:

____ Florham Park Endoscopy Center, 195 Columbia Turnpike, Florham Park, NJ. 973-410-1800

____ Hanover Endoscopy Center of Northern NJ. 91 South Jefferson Rd, Suite 300 Whippany, NJ. 973-929-6800.

____ Cooperman Barnabas Medical Center, Cooperman Family Pavilion, Main Entrance, 94 Old Short Hills Rd, Livingston, NJ 07039. 973-322-5062

____ Morristown Surgical Center, 111 Madison Ave, 4th floor, Morristown, NJ 07960, 973-971-6970

____ Morristown Medical Center, 100 Madison Ave, Morristown, NJ 07960, Level D, Digestive Health Department/ Goryreb Children Hospital entrance 973-971-5088