WHAT TO EXPECT:
Upon arrival, staff members will ask you to state and spell your name and date of birth many times. There will be multiple forms for you to sign.

After changing into a hospital gown, an intravenous (IV) catheter will be placed. An anesthesiologist will review your medical history. Your doctor will explain the procedure in more detail including any risks, and answer any questions you have. You will then sign consent.

You will be brought into the procedure room and equipment to monitor your heart, breathing, and blood pressure will be attached. You will receive oxygen through your nose. You will be administered anesthesia through your IV, which will make you fall asleep. A scope will be used to move through the entire length of your colon. If polyps are identified, they will be removed and other abnormalities will be biopsied. The procedure should be comfortable and painless.

AFTER YOUR PROCEDURE: In the recovery room
You will wake up in the recovery room. Some people may feel bloated or have stomach cramps after a colonoscopy. This is normal and goes away by passing gas. Once you are fully awake, your nurse will remove your IV. Your doctor will then discuss your procedure results. Your nurse will explain your discharge instructions before you go home.

AT HOME:
If you had a biopsy, you may notice a few drops of blood coming from your rectum. This is normal after a biopsy. Please refrain from drinking alcoholic beverages for 24 hours after your procedure. Avoid carbonated beverages, raw fruits and salads at your post-procedure meal. You may resume your normal diet and activities the next day.

CALL YOUR DOCTORS OFFICE IF YOU HAVE:
- A temperature of 101° F (38.3° C) or higher
- Severe stomach pain or increasing size and firmness of your abdomen
- Heavy bleeding from your rectum that lasts more than 24 hours
- Weakness, faintness, or nausea/vomiting
IMPORTANT PLEASE READ DIRECTIONS CAREFULLY AT LEAST 10 DAYS BEFORE YOUR PROCEDURE!

ARE YOU TAKING ANTI-PLATELET MEDICATION or BLOOD THINNERS?
Depending on your clinical situation, you may be advised to stop these medications for 1-10 days before your procedure. Please discuss these medications with your gastroenterologist.

<table>
<thead>
<tr>
<th>EXAMPLES of commonly prescribed medications:</th>
<th>warfarin (Coumadin®)</th>
<th>dalteparin (Fragmin®)</th>
<th>tinzaparin (Innohep®)</th>
<th>enoxaparin (Lovenox®)</th>
</tr>
</thead>
<tbody>
<tr>
<td>clopidogrel (Plavix®)</td>
<td>cilostazol (Pletal®)</td>
<td>dabigatran (Pradaxa®)</td>
<td>apixaban (Elequis®)</td>
<td>rivaroxaban (Xarelto®)</td>
</tr>
<tr>
<td>aspirin/dipyridamole (Aggrenox®)</td>
<td>prasugrel (Effient®)</td>
<td>ticagrelor (Brilinta®)</td>
<td>edoxaban (Savaysa®)</td>
<td>Heparin</td>
</tr>
</tbody>
</table>

DO YOU HAVE AND AICD* or CURRENT/HISTORY OF CARDIAC ISSUES
A clearance letter from your cardiologist is required at least 2 days before the procedure

*AICD stands for Automatic Implantable Cardioverter Defibrillator. We will need to know the make and model of the device.

Cardiac issues are events such as chest pain, trouble breathing that is new or worse, or you have fainted in the past 6 weeks.

DO YOU HAVE DIABETES or HYPERTENSION?
We may need to adjust your medication before your procedure

Diabetics taking insulin or oral hypoglycemic pills should check with their doctor about this medication. Ask the doctor who prescribes your diabetes medication what you should do the day before and the morning of your procedure. Tell your doctor you will be drinking a sugar-free clear liquid diet the day before your procedure.

Blood pressure medication should be taken as usual on the day of the exam with a sip of water except diuretics (water pills), which should not be taken on the day of the exam.

ARE YOU TAKING ASPIRIN, IBUPROFEN, NARCOTICS (opioids) or ANY OTHER MEDICATION DAILY?
You may need to stop these medications 5-7 days before your procedure.

Examples of Narcotics (opioids): fentanyl, morphine, hydrocodone (Vicodin®, MSContin®), oxycodone (Oxycontin®, Percocet®

If you need to take a pain reliever within 5 days before your procedure, please use acetaminophen (Tylenol)

If you have any questions about the preparation instructions, please call:

| Division of Gastroenterology and Hepatology Tel: 646-962-4800 Tel: 646-962-4000 | Jay Monahan Center for Gastrointestinal Health Tel: 212-746-4014 | Jill Roberts Inflammatory Bowel Disease Center Tel: 212-746-5077 | Center for Liver Disease Tel: 646-962-4040 Tel: 646-962-5483 | WCM: Lower Manhattan Hospital Tel: 646-962-5110 |
BEGINNING 5 DAYS BEFORE YOUR PROCEDURE

Avoid taking iron supplements (or multivitamins containing iron), Vitamin E, Fish Oil/Omega 3, black cohosh, ginseng, ginkgo biloba, St. John’s wort, or other herbal preparations until after your procedure. Avoid whole kernel corn, seeds (such as poppy, sesame, raspberries, strawberries, sunflower seeds), quinoa, and nuts. These foods are hard to digest, do not easily clear out of your colon and will make it difficult for your doctor to adequately visualize the colon.

THE DAY BEFORE YOUR PROCEDURE

You will be on a CLEAR LIQUID DIET for the entire day. From the moment you wake up, you must avoid all solid food. You may only have light or clear-colored liquids, liquids that you can see through; nothing red or purple in color. Be sure to drink plenty of water throughout the day.

5:00PM
Take two (2) Dulcolax laxative tablets with 8oz of water or other clear liquid

5:30pm
Add the entire contents of the 238-gram bottle of MiraLAX into a large pitcher and fill with at least 64oz of clear liquid, such as Gatorade (not red or purple in color) and mix thoroughly
- Begin drinking 8oz of the mix every 10 to 15 minutes until finished (all 64oz/2 liters)
- It is important that you finish the entire prep to make sure that the colon is cleansed. If you feel nauseous, go slowly or stop until the feeling is resolved, and then continue the prep until finished

Although it varies from person to person, you will begin having liquid stools usually around 2 hours after you have taken the prep. The diarrhea often lasts for about 4 to 5 hours, or until the colon is empty. Cramping is normal and can occur throughout the prep process.

THE DAY OF YOUR PROCEDURE

You may drink clear liquids-only [water, tea (no milk), black coffee (no milk or cream), clear broth] up until 4 hours before your procedure. Any approved medications (as advised by your doctor) may be taken with a sip of water. You may brush your teeth before the procedure.

<table>
<thead>
<tr>
<th>6hr Before Procedure:</th>
<th>Six hours before your procedure, please drink the entire 10oz bottle of magnesium citrate along with 8oz of water (mixed together or drink separately)</th>
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<td></td>
<td><em>Note: If you have an early morning procedure, you will be ingesting this in the middle of the night</em></td>
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</tbody>
</table>

| 4hr Before Procedure: | Please stop drinking completely 4 hours before your procedure time. You are to be “NPO” nothing by mouth. This includes gum, mints or candy in the mouth. Note: If you drink or eat anything your procedure will be cancelled |