

SUTAB / MOM

This exam requires careful preparation!

Read through these instructions carefully at least 7 days prior to your procedure.

Call office at 601-355-1234 with questions.

PATIENT NAME _____

PATIENT ID _____

DOCTOR _____

Date: _____ Check-in Time: _____ ☐ AM ☐ PM

☐ Flowood Endo Center: 2510 Lakeland Drive, Flowood

☐ Vicksburg Endo Center: 1815 Mission 66, Vicksburg

☐ Madison Endo Center: 106 Highland Way, Madison
(St. Dominic, Highland Medical Arts Bldg)

☐ Other: _____

A WEEK BEFORE your procedure, you will need to:

- ☐ Purchase a small bottle of Milk of Magnesia.
- ☐ Purchase Simethicone (Gas-X), 125 mg – 6 tablets.
- ☐ Pick up your bowel preparation (SUTAB) from the pharmacy.
- ☐ Purchase items for low-residue/low-fat diet and clear liquids (see additional sheet for details).
- ☐ Five (5) days before your scheduled procedure, stop taking all iron supplements.

☐ You are taking _____. You should take the last dose on _____.

THREE DAYS BEFORE your procedure, start a low-residue diet (guidelines included).

- Stop eating seeds, popcorn, nuts, corn, whole grains, salads, and other forms of roughage or fiber.

TWO DAYS BEFORE your procedure

6:00 PM: Take 3 tablespoons of Milk of Magnesia.

After this, start a clear liquid diet. DO NOT eat any solid or soft foods or dairy until your procedure is completed.

- Clear liquids include water, clear juice, black coffee, tea, broth, Jello, soft drinks, and popsicles (nothing red, no dairy products, no orange juice, no alcohol). Drink all the clear liquids you want. **Stay hydrated.**

Please follow these instructions for the prep, NOT the instructions listed on or included in the prep box.

ONE DAY BEFORE your procedure, continue a clear liquid diet. No solid food or dairy.

6:00 PM – Dose 1

Step 1: Open bottle of 12 tablets of Sutab. Remove and discard desiccant.

Step 2: Fill the provided container with 16 ounces of water (up to the fill line). **Take** each tablet with a swallow of water every 1-2 minutes. Finish taking the 12 tablets and the entire 16 ounces of water within 20 minutes.

Step 3: Approximately one hour after taking the last tablet, fill the provided container a second time with 16 ounces of water and **drink** the entire amount over 30 minutes.

Step 4: Approximately 30 minutes after finishing the second container of water, fill the container again with 16 ounces of water, and **drink** the entire amount over 30 minutes.

Step 5: Take 3 Simethicone tablets with the last cup of water. You may continue to have clear liquids tonight.

*** **Note: If you take Lovenox, do not take your evening dose or your dose on the morning of your procedure.** ***

THE DAY of your procedure

AM – Dose 2 (six hours before arrival time). Timing is essential. You may need to start in the middle of the night.

Repeat Steps 1 through 5 above. Take the second bottle of 12 tablets the same as dose 1 from previous evening.

- You may continue to have clear liquids until 3 hours before arriving and then **NOTHING to EAT or DRINK.**
- **Take** blood pressure, heart, and seizure medication(s) at least 3 hours before your arrival time.
- **Use** respiratory inhalers, as directed, on the day of your procedure and bring inhaler(s) with you.
- **DO NOT take** your diabetic medications (pills and/or insulin). If on an insulin pump, continue just basal rate.
- **Bring** your medication list with dose and strength, insurance card(s), and identification or driver's license.
- **DO NOT** wear jewelry/watch or bring valuables. We are not responsible for broken or lost items.

_____ (3 hours before arriving) **NOTHING to EAT or DRINK! NOT EVEN A SIP OF WATER!**

