

BASSAM HAFFAR,MD
117 7TH AVE SO. CHARLESTON, WV 25303
PH: 304-345-2255 OR 304-395-3332
FAX: 304-470-4366

PATIENT NAME: _____ DOB: _____

APPOINTMENT DATE: _____ TIME: _____ AM / PM

FACILITY: _____

CAPSULE ENDOCOSCOPY INSTRUCTIONS

- YOU MUST START CLEAR LIQUIDS ONLY THE DAY BEFORE YOUR PROCEDURE!!
(THIS INCLUDES: JELLO, BROTH, LEMONADE (NO PULP), WHITE GRAPE JUICE, ITALIAN ICE, POPSICLES, SLUSHIES, TEA, 7UP, SPRITE, GINERALE, COFFEE AND KOOL AID. NOTHING RED, BLUE OR PURPLE!)
- AT 8:00AM TAKE 2 DULCOLAX TABLETS (LAXATIVE TYPE)
- AT 4:00PM TAKE 2 MORE DULCOLAX TABLETS (LAXATIVE TYPE)
- AT 2:00PM, MIX 238GM OF MIRALAX IN 64 OUNCES OF CLEAR LIQUIDS (THIS INCLUDES: JELLO, BROTH, LEMONADE (NO PULP), WHITE GRAPE JUICE, ITALIAN ICE, POPSICLES, SLUSHIES, TEA, 7UP, SPRITE, GINERALE, COFFEE AND KOOL AID. NOTHING RED, BLUE OR PURPLE!) SHAKE UNTIL THE SOLUTION IS DISSOLVED. CONTINUE DRINKING CLEAR FLUIDS UNTIL BEDTIME.

DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT THE NIGHT BEFORE YOUR PROCEDURE!

DO NOT SMOKE, VAPE, OR CHEW TOBACCO 12 HOURS BEFORE YOUR PROCEDURE!

IF YOU HAVE ANY QUESTIONS, PLEASE CALL MY DIRECT LINE AT 304-720-3635!

THANK YOU,
KELSEY, MA