PATIENT NAME: _____ **DOB:** _____

APPOINTMENT DATE: _____ **TIME:** _____ AM / PM

FACILITY:

☐ **CHARLESTON SURGICAL HOSPITAL** (1306 KANAWHA BLVD EAST, CHARLESTON, WV 25301) *YOU MAY PARK FREE IN THE LOTS LOCATED IN FRONT OR THE REAR OF THE HOSPITAL*
☐ **THOMAS MEMORIAL HOSPITAL** (4605 MACCORKLE AVE, SW, SO. CHARLESTON, WV 25309) *ENTER ON THE PAVILLION SIDE OF THE MAIN HOSPITAL, NEAR COFFEE SHOP*
☐ **BOONE MEMORIAL HOSPITAL** (701 MADISON AVE, MADISON, WV 25130) *ENTER THRU THE MAIN HOSPITAL TO REGISTRATION*

FLEXIBLE SIGMOIDOSCOPY

- **IF YOU ARE ON BLOOD THINNERS, FOLLOW THESE INSTRUCTIONS:** IF TAKING ELIQUIS, PLAVIX, XARELTO, COUMADIN, OR WARFARIN; STOP THESE MEDS 3 DAYS BEFORE PROCEDURE (DURING THOSE 3 DAYS, TAKE A BABY ASPIRIN, UNLESS CARDIO OR PCP SPECIFIES OTHERWISE)

- DO NOT TAKE EXENATIDE (BYDUREON), DULAGLUTIDE (TRULICITY), SEMAGLUTIDE (OZEMPIC OR WEGOVY), SEMAGLUTIDE (RYBELSUS), OR TIRZEPATIDE (MOUNJARO) 10 DAYS BEFORE YOUR PROCEDURE!

- **THE DAY BEFORE YOUR PROCEDURE:** EAT A LIGHT BREAKFAST. START CLEAR LIQUIDS AT 12:00PM. (JELLO, BROTH, LEMONADE (NO PULP), WHITE GRAPE JUICE, ITALIAN ICE, POPSICLES, SLUSHIES, TEA, 7UP, SPRITE, GINERALE, COFFEE AND KOOL AID.) DO NOT EAT OR DRINK ANYTHING RED OR ORANGE!

- USE A FLEETES ENEMA 1 HOUR BEFORE BEDTIME AND ANOTHER ONE 1 HOUR BEFORE LEAVING HOME TO COME TO THE HOSPITAL FOR YOUR PROCEDURE. (YOU CAN GET THESE AT ANY PHARMACY). NOTHING TO EAT OR DRINK AFTER MIDNIGHT THE NIGHT BEFORE THE TEST!

- **THE DAY OF YOUR PROCEDURE:** THE DAY OF YOUR PROCEDURE, DO NOT TAKE EXENATIDE (BYERRA) OR LIRAGLUTIDE (VICTOZA OR SAXENDA).

DO NOT EAT OR DRINK ANYTHING, NO SMOKING, NO VAPING, NO SNUFF, NO CHEW TOBACCO 12 HOURS BEFORE THE PROCEDURE

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

!!ABSOLUTELY NO DRIVING!!
YOU <u>CANNOT</u> DRIVE AFTER THE PROCEDURE. YOU MUST BE ACCOMPANIED BY AN ADULT (OVER 18YRS OF AGE).
IF THIS REQUEST IS NOT FOLLOWED, YOUR PROCEDURE MAY BE CANCELED OR RESCHEDULED!!