

Obtain two (2) 1-1/2 fl. oz. Bottles
Fleet® Phospho-Soda (Ginger
Lemon Flavor or Regular) at any
pharmacy. Fleet Phospho-Soda is
also available in 2 larger sizes .3 fl.
oz. and 8 fl. oz.; if larger size
purchased,
do not exceed recommended
dosage,
as serious side effects may occur.
PMS06039



pharmacy

Available at grocery store or

FLEET'S PHOSPHO SODA BOWEL PREPARATION FOR COLONOSCOPY

The purpose of the following Instructions is to provide good bowel preparation for colonoscopy to enhance the quality and safety of the examination. Failure to comply with these Instructions may result in having to repeat the bowel preparation and reattempt colonoscopy at a later date. If questions arise regarding the bowel preparation, please do not hesitate to contact the office.

1. Avoid aspirin for one week prior to the examination aspirin may contribute to bleeding problems following biopsy or polyp removal.
2. Avoid other arthritis medications for 24/72 hours prior to the examination these agents may also increase the likelihood of bleeding, but the effect is reversible with avoidance of the medication for several hours. No ibuprofen, Aleve, Motrin, Daypro, Advil, Vioxx, Celebrex, Arava. Tylenol is okay.
3. If you are taking an iron preparation, please discontinue it two or three days prior to the scheduled examination.
4. Please continue all medications that you are taking with the exception of aspirin, Coumadin, and Arthritis medications as noted above. If you are taking Insulin or diabetes pills, please get special Instructions from Dr. Cook, Dr. Davis, or their nurse.
5. If you are taking Coumadin, discontinue dose on _____ and get lab drawn on _____
6. Since sedation is used during the examination it will be necessary for you to have a friend or family member drive you home after the exam.

BOWEL PREP

On _____ only clear liquids may be taken for breakfast, lunch, and dinner (clear liquids include water, coffee, tea, soda pop, clear fruit juices; apple, grape, bouillon, plain Jell o Gatorade, **Nothing red**. You must drink at least 6-8 ounce glasses of liquid. **NO SOLID FOODS, MILK OR MILK PRODUCTS ALLOWED.**

4 P.M. Add 1-1/2 ounces* of Fleet's Phospho soda to 1/2 glass of water (4 fl. oz.) and take. This can be followed by one glass (8 fl. oz.) water or other clear liquid. Chew 2 Mylanta Gas tablets.

Drink at least three (3) 8 fl oz portions of a clear liquid before retiring more if desired.

On _____ @ _____ add 1-1/2 ounces* of Fleet's Phospho soda to 1/2 glass of water (4 fl oz) and take. Chew 2 Mylanta gas tablets. This can be followed by one glass of water or clear fruit juice.

Only drink clear liquids prior to the exam. IF YOU TAKE HEART, LUNG, OR BLOOD PRESSURE MEDICATION IN THE MORNING, PLEASE BE SURE TO TAKE YOUR MEDICATION BEFORE YOU COME TO THE HOSPITAL/ENDO CENTER.

Appear for examination at _____

NOTE: IF YOU CANCEL YOUR PROCEDURE WITHIN 24 HOURS OF SCHEDULED TIME YOU WILL BE CHARGED \$100.00 CALL THE OFFICE IF UNABLE TO COMPLETE PREPARATION

*1-1/2 ounces = 1 Bottle