

Instructions for Colon Prep – Kidney Failure
Robert W. Herring, Jr., M.D.

Patient Name: _____

Exam Date: _____ Time: _____ Location: _____

WE CANNOT GUARANTEE THE AMOUNT OF TIME YOU WILL BE IN OUR FACILITY.
PLEASE ASSUME IT WILL BE MOST OF THE DAY.

1. Please bring a list of all medications with correct/current dosages.
2. Any regular medication, especially heart, lung, seizure, or blood pressure medication **SHOULD BE TAKEN THE DAY OF THE TEST.**
3. Remove all nail polish. Remove artificial nails, if possible.
4. You will not be able to drive/operate machinery until the next day because you will be legally intoxicated (drunk) after the procedure.
5. **Peritoneal dialysis patients:** Drain all dialysis fluid prior to arriving.
6. If you wear dentures, please do not glue them in.
7. If you have sleep apnea, please bring your CPAP machine.

Bring 1 or 2 people **only** (due to limited space) with you the day of the test. Your memory will be affected by the medication we give you. Therefore, it is best to bring a relative or good friend to drive you home. Due to time constraints, Dr. Herring will only tell the results of the test to the person who is in the waiting room when called. Family/friends who choose to leave a phone number for patient pick-up will receive results from the nurse and they will be written down.

The medications you need are:

- One (1) metoclopramide (Reglan) tablet
- Six (6) Dulcolax tablets
- One (1) Simethicone tablet
- One (1) gallon Nulytely or Colyte

7 days before your test. Date:

- a. Do not take any aspirin products or iron supplements. You may take Tylenol.
- b. Stop eating any raw vegetables.

2 days before your test. Date:

- a. Beginning when you wake up, you may have mostly clear liquids with no red food coloring in them. You should be able to see through a glass of clear liquid. Examples are: water, tea, carbonated sodas, coffee, clear bouillon, consommé, apple juice, Gatorade, Jell-O, or Kool-Aid. Low fat milk is okay. Drink as much fluid as possible unless you are on dialysis, in which case drink your normal amount. You may also eat sherbet; be sure it does not contain red food coloring or chunks of fruit.
- b. **If You Are a Diabetic:** Monitor your blood sugar during the two days prior to your test if you know how. Do not eat or drink all sugar-free products or your blood sugar will get too low. If you have questions about how to maintain your blood sugar during this time, please call the office at 615-832-5530.
- c. **At 8:00 a.m.** Take the 6 orange Dulcolax tablets.
- d. Refrigerate one gallon of water.

1 day before your test. Date:

- a. Continue to stay on a liquid diet.
- b. **At 1:00 p.m.** Take the Reglan (metoclopramide) tablet. Mix your Nulytely with one gallon of water. Taste is improved by using ice water and adding Kool Aid-like products and sweetener. You may also purchase pre-flavored Nulytely. Please disregard the information on the Nulytely package that says, "Do not add any other ingredients, flavors, etc." To add these flavorings you will not affect the action of the Nulytely. Except, please do not add any red food coloring.
- c. **At 2:00 p.m.** Begin to drink the Nulytely, 8-12 oz. glasses every 15-20 minutes. Some cramping is normal. You must drink the entire gallon of Nulytely in order to have good testing. If you cannot drink the Nulytely because of severe nausea or vomiting, stop the Nulytely for thirty minutes to 1 hour and then try again.
- d. **If you cannot finish the Nulytely,** call the office for instructions. To have the best test, you must drink all of the Nulytely.
- e. **At bedtime:** Chew one Simethicone tablet. (If you swallow it, it will not dissolve and, therefore, will be ineffective.)

The Day of the Test.

- a. **If you are a diabetic: Do not take any regular insulin. Take one-half (1/2) of other types of insulin. Do not take any diabetes pills that lower blood sugar.**
- b. If your test is scheduled before noon, do not eat or drink anything after midnight the night before your test except a small amount of water to take your regular medication.
- c. If your test is scheduled after noon, you may have clear liquid breakfast before 7:00 a.m., but after 7:00 a.m., you should have nothing to eat or drink until after your test except a small amount of water to take your regular medications.

Please call and leave a message for the nurse at 615-832-5530 Monday through Friday, 8:00 a.m. to 4:00 .m., if the following applies to you:

1. **You have heart valve disease or an artificial heart valve or have had rheumatic fever with heart damage.**
2. **If you are on any blood thinners: For example, Toradol, Heparin, Warfarin, Coumadin, Panwarfin, antithrombin-K, Anisindione, Miradion, dihydroergotamine mesylate, DHE, dipyridamole, Persantine, Agrylin (Anagrelidel), Plavix (Clopidogrel), Pletal (Cilostazol), Ticlid (Ticlopidine Hydrochloride), or Trental (Pentoxifyline).**
3. **If you have any questions.**

**** Calls may be returned in the evening unless it is an emergency situation. ****

Instructions for Colonoscopy Prep
Robert W. Herring, Jr., M.D.

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1. Please bring a list of all medications with correct/current dosages.
2. Any regular medication, especially heart, lung, seizure, or blood pressure medication **SHOULD BE TAKEN THE DAY OF THE TEST.**
3. Remove all nail polish. Remove artificial nails, if possible.
4. You will not be able to drive/operate machinery until the next day because you will be legally intoxicated (drunk) after the procedure.
5. **Peritoneal dialysis patients:** Drain all dialysis fluid prior to arriving.
6. If you wear dentures, please do not glue them in.
7. If you have sleep apnea, please bring your CPAP machine.

Bring 1 or 2 people **only** (due to limited space) with you the day of the test. Your memory will be affected by the medication we give you. Therefore, it is best to bring a relative or good friend to drive you home. Due to time constraints, Dr. Herring will only tell the results of the test to the person who is in the waiting room when called. Family/friends who choose to leave a phone number for patient pick-up will receive results from the nurse and they will be written down.

The medications you need are:

1. One (1) three ounce bottle of Fleet Phosphosoda or generic equivalent (lemon flavor is suggested).
2. Twelve (12) 5 mg Dulcolax tablets or generic equivalent (bisacodyl).
3. Four (4) bottles Magnesium Citrate (sometimes called Citrate of Magnesium).
4. One (1) simethicone tablet.

***The total cost of these medications is approximately \$14.00 at Deal Drugs. (Phone: 834-1398)*

Dialysis patients should not have Magnesium Citrate or Fleet Phosphosoda. If you are a dialysis patient, call the office in the morning for instructions.

7 days before your test: Date: _____

1. Do not take any aspirin products, arthritis medicine, or iron supplements. You may take Tylenol.
2. Stop eating any raw vegetables.

2 days before your test: Date: _____

1. Stay on a clear liquid diet all day. You should be able to see through a glass of clear liquid. Examples are: water, tea, carbonated sodas, coffee, clear bouillon, consommé, apple juice, Gatorade, Jello, or Kool-Aid. Low fat milk is okay. Drink as much fluid as possible unless you are on dialysis, in which case drink your normal amount. You may also eat sherbet; be sure it does not contain red food coloring or chunks of fruit.
2. If you are a diabetic: Monitor your blood sugar during the two days prior to your test if you know how. Do not eat or drink all sugar-free products or your blood sugar will get too low. If you have questions about how to maintain your blood sugar during this time, please call the office at 615-832-5530.
3. Drink 1 large glass of water every two hours today.
4. At 8:00 a.m., take 6 Dulcolax (bisacodyl) tablets.
5. At lunchtime, drink one-half bottle (3 tablespoons) of Fleet Phosphosoda.
6. At dinnertime, drink 2 bottle Magnesium Citrate.

1 day before your test: Date: _____

1. Stay on a clear liquid diet all day.
2. Drink 1 large glass of water very two hours today.
3. At 8:00 a.m., take 6 Dulcolax (bisacodyl) tablets.
4. At lunchtime, drink one-half bottle (3 tablespoons) of Fleet Phosphosoda.
5. At dinnertime, drink 2 bottle Magnesium Citrate.
6. At bedtime, chew one (1) simethicone tablet.

The day of your test:

1. **If you are a diabetic: Do not take any regular insulin. Take one-half (1/2) of other types of insulin. Do not take any diabetes pills that lower blood sugar.**
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3. **If you have any questions.**

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Brochures in your kit are:

1. NGS, Inc. Patient Information.
2. Colonoscopy.
3. Important Information: Endoscopy Centers