
Colonoscopy Bowel Preparation Instructions (Miralax)

Patient Name: _____ Date of Procedure: _____

7 Days Prior to Your Surgery

You must be off Aspirin/NSAIDS for 7 days and other blood thinners as indicated. Coumadin/Warfarin for 5 days, Plavix/Clopidogrel for 5 days, Xarelto for 3 days, Eliquis for 3 days, and Lovenox for 24 hours prior to the procedure. Tylenol is ok to take.

- Please purchase the following at your pharmacy (No prescription needed):

- **Miralax Powder 8.3 oz (238g) bottle**
- Four Dulcolax laxative Tablets containing 5 mg of bisacodyl each (NOT Dulcolax stool softener)
- 64 oz bottle of Gatorade (NOT red). G2, Powerade or Powerade Zero are also acceptable.
- **Additional Miralax powder (at least 51g)**

1 Day Prior to Your Surgery

Have a *light* breakfast (one boiled or poached egg; white toast-no butter, plain bagel). Do not eat vegetables, fruits, **nuts, seeds**, butter, milk, cheese, beef, pork, lamb, or whole grain cereals.

Clear liquid diet after breakfast. No solid food until after surgery..

- You may drink clear liquids such as apple juice, cranberry juice, Gatorade, clear broth, tea, coffee, soda, popsicles, and Jello-O (avoid any red or green Jell-O due to artificial dyes)
- Do not have any milk products, citrus juice, or solid food
- Make sure to drink plenty of water throughout the day
- **Diabetics:** Take only half of your diabetes medication the day prior to your procedure

Step 1: 12 PM NOON (Day prior to procedure/surgery)

- Take four Dulcolax tablets
- Mix 64 oz of Gatorade with 8.3 oz of Miralax and place in refrigerator (do not add ice)

Step 2: 4 PM (Day prior to procedure/surgery)

- Drink an 8oz glass of the Gatorade/Miralax mixture every 15-20 min until gone

Remember:

You may take your regular medications at your regular time with a tiny sip of water except blood thinners or aspirin

Vaseline or Desitin are good skin protectants to be applied prior to starting prep

Day of Surgery:

- *5 hours prior to procedure, Mix 3 scoops (51g) of Miralax in 16 oz of any **clear** liquid and drink*
- **4 hours prior to procedure: Stop drinking clear liquids, including water. Nothing by mouth.**

Arrive at: _____ **Check-in Time:** _____

*Please be advised that your check in time is tentative. You will be called the business day prior to your procedure to confirm the time. You **must have someone drive you home** with any outpatient/same-day procedure due to the medications given. Uber/Lyft/Taxi are NOT acceptable.*