

**NO Drug or Alcohol use including Marijuana the Day Before & the Day of the Procedure**  
**Colonoscopy Prep #16 Sutab**      **ANY QUESTIONS CALL Fairfield 203-292-9000**  
**Trumbull 203-452-1411**      **Bridgeport 203-333-3328**

Report to ( ) St. Vincent's Medical Center      ( ) The Endoscopy Center of Fairfield  
2800 Main St, Bridgeport, CT      425 Post Rd, Fairfield, CT  
Date \_\_\_\_\_ Arrive at \_\_\_\_\_ Procedure Time \_\_\_\_\_ Doctor \_\_\_\_\_

**Your Sutab prep kit will be ordered through your local pharmacy. Be sure to call our office if you have not received the prep within 4 days of your procedure**

**Do not follow instructions on the bottle, follow the instructions below:**



If you take any of the following medications call your Prescribing Doctor and let them know about your upcoming procedure. *Your Doctor may want to make changes.*

**Diabetic Medications:** Metformin, Actos, Glipizide, Insulin, etc.

**Blood Thinners:** *Ask your Doctor how long you can be off the following medications before your procedure:* Persantine, Plavix, Ticlid, Coumadin, Effient, Aggrenox, Pletal, Cilostazol, Pradaxa, Xarelto, Brilinta, Eliquis, prescribed non-steroidal anti-inflammatory, (Celebrex, Mobic, etc.)

**7 DAYS BEFORE THE PROCEDURE**



**Qysimia, Phentermine, Advil, Motrin, Aleve, Ibuprofen, Fish Oil, Iron and Vitamin E. Nuts, Seeds, Corn, Popcorn, Metamucil, Citrucel, and Flax Seed (TYLENOL is OK).**

**3 DAYS BEFORE THE PROCEDURE:**



**Do not take Jardiance (Empaglifozin) or Synjardy for 3 full days.**

**ONE DAY BEFORE PROCEDURE:**

1. **Do not take Vyvanse (lisdexamfetamine) today or tomorrow.**
2. **Drink Clear Liquids ONLY** (The more you drink, the better the prep will be) **NO FOOD.**
3. Beginning at 5 p.m., open one bottle of 12 Sutab tablets. Fill the provided container with 16 oz of water (up to fill line), Swallow each tablet with a sip of water TWO minutes apart, and drink the entire amount of water over 25 to 30 min. Follow with at least 2 more 16 ounces of water.  
**DO NOT TAKE MEDICATIONS WITH IN 1 HOUR OF PREP.**
4. At 7 pm fill the provided container again with 16 oz of water and drink entire amount over 30 min.
5. **YOU MUST** continue drinking clear fluids until bedtime. Place a towel under your buttocks at night when you are sleeping.

**ON THE DAY OF THE PROCEDURE:**      **Please do not wear fragrant products.**

1. Get up 6 Hours Before your procedure – Open second bottle of 12 Sutab tablets. Fill the provided container with 16 ounces of water (up to fill line), Swallow each tablet with a sip of water TWO minutes apart, and drink the entire amount of water over 25 to 30 min. Follow with at least 2 more 16 oz of water.
2. Take your morning medications. **DO NOT TAKE MEDICATIONS WITH IN 1 HOUR OF PREP.**
3. **3 Hours before -- STOP DRINKING. NO GUM CHEWING.**



**EXAMPLES OF CLEAR LIQUIDS (Please try to drink 4-6 oz every hour)**

Pedialyte, Gatorade, bouillon cubes, broth, consommé, apple juice, white grape juice, white cranberry juice, strained lemonade, crystal light, water, Italian ice, sorbet, popsicles, or Jell-O. You may have 8 oz of black coffee or tea per day, sugar is okay.

**DON'T HAVE:**

**ANYTHING RED or PURPLE**  
**MILK or CREAM**



**YOU WILL NEED A RESPONSIBLE RIDE HOME. NO DRIVING!!! Expect to be here for 90 minutes to 2 hours.**