



## NULYTELY/GOLYTELY/GAVILYTE/PEG 3350 SPLIT DOSING INSTRUCTIONS

Procedure Location: \_\_\_\_\_

Procedure Date: \_\_\_\_\_

Arrival Time/Location: \_\_\_\_\_

### **THE DAY BEFORE THE PROCEDURE**

You may have regular breakfast and lunch until 1:00pm then remain on clear liquids the remainder of the day. Clear liquids DO NOT include ALCOHOL. Any of the following clear liquids are OK:

- Water
- Strained fruit juices (without pulp) including apple, white grape, or white cranberry
- Gatorade (NO RED, ORANGE, OR PURPLE)
- Diet and regular soft drinks (NO RED, ORANGE, OR PURPLE)
- Coffee or tea (DO NOT use any dairy or non-dairy creamer)
- Chicken broth and/or Beef broth
- Jell-O (NO RED, ORANGE, OR PURPLE) and Popsicles (NO RED, ORANGE, OR PURPLE)

### **FOLLOW THESE PREP INSTRUCTIONS ONLY – DO NOT FOLLOW THE INSTRUCTIONS ON THE PREP BOX/CONTAINER!**

1. At **1:00 pm** – you will need to take two (2) Bisacodyl 5 mg (also known as Dulcolax laxative) tablets. Purchase these over the counter at your pharmacy. If you have some at home, please feel free to use what you have.
2. At **5:00 pm** – start Nulytely/Golytely/Gavilyte/Peg3350 solution. Add water to the fill line on the container and mix. After mixing, drink (1) 8 oz glass every 15-20 minutes until you have completed a **total of (6) 8 oz glasses**. You will need to save the rest of the solution for tomorrow and may refrigerate it overnight if you wish.
3. Continue drinking approved clear fluids at your own pace throughout the evening. *We recommend you drink as much clear fluids as you can tolerate for better cleansing and to keep you hydrated.*

### **THE MORNING OF YOUR PROCEDURE**

1. You will need to start drinking a **total of (4) 8 oz glass** of the Nulytely/Golytely/Gavilyte/Peg 3350 solution. **You will start at \_\_\_\_\_ and finish by \_\_\_\_\_.** Please note that you will have some remaining – please throw it away.
2. After finishing the prep, you must drink at least 16 oz of an approved clear fluid and continue drinking approved clear fluids at your own pace until 4 hours prior to your procedure.
3. You **may NOT have anything by mouth 4 hours prior to your procedure except pre-approved medications** or your procedure will be canceled! This includes chewing gum, hard or soft candy, tobacco, etc. **You must be done with the entire prep including clear fluids by \_\_\_\_\_.**
  - Take only pre-approved medications with a sip of water. Patients scheduled at the hospital should follow the facility's medication instructions when provided.
  - Bring insurance card(s). Leave valuables at home.
  - **YOU MUST HAVE an adult family member or friend available to take you to, remain on premises during, and take you home after the procedure.**
  - **YOU ARE NOT PERMITTED TO DRIVE 12 HOURS FOLLOWING YOUR PROCEDURE.**

SURGICAL & COLONOSCOPY PROCEDURES CANCELED OR RESCHEDULED WITH LESS THAN 5 BUSINESS DAYS NOTICE WILL INCUR A \$100 FEE.