

HAMPSHIRE GASTROENTEROLOGY ASSOCIATES, LLC
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PRACTICE LIMITED TO GASTROENTEROLOGY AND LIVER DISEASE
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SPLIT COLONOSCOPY PREPARATION USING *MILK OF MAGNESIA*

TWO DAYS before the test: Avoid raw fruits, raw vegetables, raw or cooked corn, salads, red Jell-O, beets, granola, nuts, and seeds.

***At least two days before test:**

You will need to obtain the following items:

- A package of **DULCOLAX**(*Bisacodyl*) tablets (**you should get the stimulant, NOT the stool softener**)
- A small package of **GAS-X**
- A large bottle of **MILK OF MAGNESIA**. You may want to buy the flavored Milk of Magnesia to better tolerate the chalky taste.

At bedtime, take 2 tablespoons of MILK OF MAGNESIA

DAY BEFORE EXAM

For breakfast you may have a light meal such as eggs and toast, coffee, tea, and milk. *After 10am, clear liquids only.* Clear liquids include water, Gatorade, clear bouillon, broth, popsicles, strained fruit juices, soft drinks, Kool Aid, Jell-O, coffee, and tea, but NO milk or non-dairy creamer. NO RED OR PURPLE LIQUIDS.

After breakfast OR at 10am: take 2 DULCOLAX tablets AND 4 tablespoons of MILK OF MAGNESIA.

From 10am to Noon, drink at least two 8oz glasses of clear liquid.

At 12:00pm, take 2 DULCOLAX tablets with 8oz water or juice, AND 4 tablespoons of MILK OF MAGNESIA.

From 2pm to 4pm drink at least two 8oz glasses of clear liquid.

At 5:00pm, take 2 DULCOLAX tablets with 8oz water or juice AND 4 tablespoons of MILK OF MAGNESIA.

From 6pm to 8pm drink at least two more glasses of clear liquid.

Be sure to sleep close to the bathroom, because you may need to move your bowels urgently during the night.

EXAM DAY

Five hours before you leave your home for your procedure, take 2 DULCOLAX tablets with 8oz water or juice AND 4 tablespoons of MILK OF MAGNESIA, AND 3 chewable Gas-Ex tablets with 8 ounces of water.

****Continue drinking clear liquids until 5 hours prior to the appointment time, then stop. ****

Please avoid all gum or hard candy 4 hours prior to the exam

PLEASE NOTE: In order for this procedure to be performed, **MUST have a ride home**. You will not be discharged from the Endoscopy Unit unless you are accompanied by a responsible adult who will either drive you home or accompany you home by taxi or bus.

REPORT TO: ___ Cooley Dickinson Hospital, Endoscopy unit (Emergency Entrance)
 ___ Valley Medical Group, 31 Hall Drive, Amherst (Ambulatory Surgical Center Main Floor)

***DO not take any Advil or Aleve
the morning of the procedure**

PROCEDURE DATE: _____

à ARRIVAL TIME: à _____

***STOP Coumadin on:** _____