

THE ENDOSCOPY CENTER

7402 York Road, Suite 101
Baltimore, Maryland 21204
410-494-1846

THE ENDOSCOPY CENTER AT BEL AIR, LLC

620 W. MacPhail Road, Suite 104
Bel Air, Maryland 21014

**COLONOSCOPY instructions with 1-DAY MAGNESIUM CITRATE
for patients who have had colon removed**

Your colonoscopy is scheduled on _____, _____

LOCATION:

- The Endoscopy Center – York Road
- The Endoscopy Center – at Bel Air
- Franklin Square Outpatient
- St. Joseph’s DDC
- Good Samaritan DDC

Arrival Time: _____ am/pm

Procedure Time: _____ am/pm

PLEASE arrive at your scheduled ARRIVAL TIME or your procedure may be postponed or cancelled.

**PURCHASE NOW:
1 Bottle Magnesium Citrate**

In preparation for your procedure, we ask that you observe the following instructions:

THE DAY BEFORE

- **DRINK ONLY** clear liquids for the entire day before the procedure.
- **TAKE 1 BOTTLE OF MAGNESIUM CITRATE** about 1 p.m.

******NO SOLID FOODS****NO MILK OR MILK PRODUCTS****NO RED/PURPLE DYES*******

Clear liquids include:

- Water
- Strained fruit juices without pulp (apple, white grape, lemonade)
- Coffee or tea (NO MILK)
- Clear broth or bouillon (No fats)
- Carbonated and non-carbonated soft drinks (7-UP, Sprite, Ginger Ale, Coke, Gatorade (NO RED OR PURPLE)
- Kool-Aid or fruit flavored drinks (NO RED OR PURPLE)
- Plain Jello (NO RED OR PURPLE & no added fruits or toppings)
- Ice Popsicles (NO RED OR PURPLE)

**TAKE HEART, BLOOD PRESSURE AND SEIZURE MEDICATIONS
IN THE EARLY MORNING**

- You may drink up to 8 oz of water, 7-UP, Sprite, Ginger Ale, or White Grape Juice 2 hours prior to your procedure.
- Do not take diuretics (fluid pills), insulin or other diabetic agents! **Diabetics:** bring your medication with you.

- You must have someone with you to pick you up after the procedure is over. If not, your procedure will be cancelled. This is for your safety!
- You cannot drive a car, operate machinery, drink alcohol, or make any legal decisions for the entire day or your procedure.

REMEMBER:

- **TAKE HEART, BLOOD PRESSURE AND SEIZURE MEDICATIONS AS DIRECTED ABOVE.**
- **FOLLOW DIRECTIONS CAREFULLY.**
- **ARRIVE PROMPTLY AT SCHEDULED ARRIVAL TIME.**
- **SOMEONE MUST DRIVE YOU HOME.**
- **BRING YOUR MEDICATIONS OR A LIST OF MEDICATIONS AND DOSAGES WITH YOU TO RECORD IN YOUR CHART.**

If you encounter any problems with these instructions or have any questions regarding the procedure, please do not hesitate to call. We are always happy to answer any questions for you.

If you are having difficulty with the prep: *Vomiting
*Prep is not clearing the bowel, OR.....

If you need to cancel your appointment, please contact both:

Your physician at (410) 494-1846 (answered 24 hours/day)

AND: The Endoscopy Center where you are having your procedure at:

Towson: (410) 494-0156...(7 am to 4 pm)

Or

Bel Air: (410) 836-5087...(7 am to 3 pm)

Your return appointment is on _____ at _____ am/pm.

At:

- **TOWSON** Office
- **WHITESQUARE** Office
- **BEL AIR** Office

- No follow-up appointment is scheduled
- Schedule follow-up with your physician