

INSTRUCTIONS FOR PATIENTS UNDERGOING COLONOSCOPY

PLENVU Prep Instructions



Preparation: If you are getting an EGD & Colonoscopy, please follow the Colonoscopy Instructions.

A colonoscopy is an examination of the colon (large intestine) with a flexible tube about the thickness of your pinkie finger, which transmits a live color image onto a television screen. For the procedure to be successful, your colon must be completely clean. If it is not adequately prepared, the procedure will need to be rescheduled.

Items you will need:

1. Fill your PLENVU prescription at your pharmacy. **Do not wait until the day before your procedure to get this prescription filled as some pharmacies may need to order the medication.**

Medications

Please provide us with an updated medication list at least 14 days prior to your procedure.

Please continue to take prescription medications unless instructed to stop by your doctor.

For 1 week prior to your colonoscopy

- Obtain any medical clearances prior to scheduling procedure, if applicable.
- Stop Iron, Alka-Seltzer, all non-steroidal anti-inflammatories (NSAIDS), Percodan, Empirin, Ibuprofen, Motrin, Advil, Aleve, Excedrin, Medipren, Nuprin, Naproxyn, Naproxen, Suldinac, Celebrex, Piroxicam, Feldene, Indomethacin, Indocin, Diclofenac, and Voltaren for **5 full days prior to procedure. Tylenol (acetaminophen) is ok to take.**
- BLOOD THINNERS will also need to be held prior to your procedure. Because the timing varies depending on the drug, please discuss with your Gastroenterologist AND Cardiologist prior to scheduling your procedure. These medications include, but are not limited to, Coumadin, Warfarin, Eliquis, Brilinta, Aspirin, Plavix, Clopidogrel.
- **Important: Stop Phentermine or any GLP-1 agonist medications (e.g. Tirzepatide, Mounjaro, Zepbound, Semaglutide, Ozempic, Liraglutide, Victoza, Saxenda, Dulaglutide, Trulicity, Exenatide, Bydureon) for 7 full days prior to procedure.**

For 3 days prior to your colonoscopy

- **Hold SGLT2 Inhibitors (e.g. Canagliflozin (Invokana), Dapagliflozin (Farxiga), Empagliflozin (Jardiance), Ertugliflozin (Steglatro), & Sotagliflozin (Inpefa))**
- Stop all vitamins and supplements
- Avoid all beans, peas, corn, popcorn, nuts, tomatoes, cucumbers, pickles, sesame seeds, strawberries, watermelon, oatmeal, kiwi, and grapes (foods containing small seeds or skins).

The day before your colonoscopy

- **Hold oral GLP-1 medications (e.g. Rybelsus, Metformin & Glyburide)**

From the minute you wake up, you are to have **CLEAR LIQUIDS ONLY (NO FOOD)** and drink as much as you can

- Soups: clear chicken, beef, or vegetable broth
- Sports drinks: Gatorade, Powerade, Propel
- Juices: White cranberry, white grape, apple, limeade, strained lemonade
- Beverages: BLACK coffee or tea, iced tea, Kool-Aid, Sprite, seltzer, ginger ale, boost breeze, and water
- Desserts: Italian ice, popsicles, Jell-O

ABSOLUTELY NO RED OR PURPLE DYE, DAIRY PRODUCTS, ORANGE JUICE, TOMATO JUICE, GRAPEFRUIT JUICE, ALCOHOL, OR ANYTHING THAT HAS A CREAM BASE.

If you have any questions about your prep, contact the nurse line associated with the location of your procedure.

Columbia/Cascades (410)913-1666 Olney (301)347-8780 Annapolis (410)913-1164

Riverdale (410)913-0061 Timonium (443)367-1144 Rockville (227)241-6377



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STEP 1: EVENING BEFORE COLONOSCOPY (BEGIN STEP 1 APPROXIMATELY AT 5 PM)

1. Pour packet labeled Dose 1 into the container provided in the kit.
2. Add drinking water to the fill line marked on the container and mix (close lid and shake or you may stir the solution).
3. Drink **ALL** the liquid in the container.
4. Once you have finished Dose 1, fill container with drinking water to the fill line and drink the 16-ounces of water within the next 30 minutes.

CONTINUE DRINKING AS MANY CLEAR LIQUIDS AS YOU CAN ONCE THE ABOVE IS COMPLETED BUT **NOTHING BY MOUTH AFTER MIDNIGHT EXCEPT THE SECOND DOSE OF THE PREP**

STEP 2: FIVE HOURS PRIOR TO YOUR COLONOSCOPY ARRIVAL TIME

1. Pour packets labeled Dose 2 Pouch A and Dose 2 Pouch B into the container provided.
2. Add drinking water to the fill line marked on the container and mix (close lid and shake or you may stir the solution).
3. Drink **ALL** the liquid in the container.
4. Once you have finished Dose 2, fill container with drinking water to the fill line and drink the 16-ounces of water within the next 30 minutes.

DO NOT EAT OR DRINK ANYTHING 4 HOURS BEFORE YOUR PROCEDURE ARRIVAL TIME.

Nothing to eat/drink after PLENVU AM dose until after the procedure.

NO GUM, MINTS, OR HARD CANDY.

You may brush your teeth but do not swallow.

Please take your AM prescribed medications UNLESS other specified by your doctor 4 hours before your procedure with a sip of water.

Report to the endoscopy facility as directed by the office.

A nurse will call you within 1 week prior to your procedure to review the prep and any questions.

TRANSPORTATION POLICY

Please arrange for transportation home from the procedure. You cannot drive or operate machinery for the rest of the day. You must have a friend, family member, or arranged medical transport to drive you home after the procedure. Total time in office for a procedure is about 2 - 2 ½ hours. Your ride does not need to stay. Please provide us with their phone number and we will contact them about 20-30 prior to discharge. **Uber, Lyft, and taxis are not allowed** to be used for post procedure transportation due to medical regulations. Your procedure will be canceled if you do not have adequate transportation, this is the surgery center policy. If you need a medical transportation service, you can contact our office or scan the QR code for information.

CANCELLATION POLICY

Please contact the office a minimum of 2 business days prior to the procedure to cancel or reschedule. Cancellations made less than 2 business days in advance will result in a \$200.00 fee.

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