

Dr. Katz, 732-246-1028

SUTAB

Date of Colonoscopy: _____

LOCATION

- St. Peter's University Hospital, 254 Easton Avenue, New Brunswick, NJ 08901, 2nd Floor endoscopy unit, 732-745-8600 (NPI # 1114924834)
- Endo Surgical Center of Old Bridge, 42 Throckmorton Lane, Old Bridge, NJ 08857, 732-679-8808 (NPI # 1801987805)
- Somerset Ambulatory Surgical Center, 1 US-206, Somerville, NJ 08876, 908-393-8360 (NPI # 1669895512)

FAILURE TO CANCEL YOUR PROCEDURE WITH IN 24 HOURS OR NOT SHOWING UP TO YOUR PROCEDURE MAY RESULT IN A 100\$ OUT OF POCKET CHARGE.

TIME OF PROCEDURE

The Center will call you 1 business day before your Colonoscopy date with the time you need to arrive. If you do **NOT** hear from the center **by 3 p.m.**, call my office promptly! The confirmation email/call from the office is not the correct time.

TRANSPORTATION

BY law SOMEONE 18 YEARS OR OLDER MUST DRIVE YOU HOME FROM THE PROCEDURE.

You are not able to take an Uber or Taxi.

MEDICATIONS

Iron Pills: Do NOT take your Iron pills for 5 days before the procedure.

Diabetic/Weight Loss Medications: It is best to call your endocrinologist if you have an insulin pump or take insulin/Lantus daily. Do NOT take your ORAL diabetic medication 3 days before and the day of the procedure and check finger sugars 3 TIMES the day of prep and the morning of the colonoscopy. Examples: Canagliflozin (Invokana), Canagliflozin and Metformin (Invokamet), Dapagliflozin (Farxiga), Xigduo XR Dapagliflozin and Metformin extended release, or Empagliflozin (Jardiance).

If you are taking a once weekly GLP-1 injectable it should be held for **14 full days** before your scheduled procedure. **Daily injectables or Oral GLP-1 medications** should be held 24 hours before your procedure. **Please make the office aware.** (ex. Ozempic, Rybelsus, Victoza, Wegovy, Trulicity, Saxenda, Byetta, Bydureon, Mounjaro Zepbound Phentermine.)

Aspirin, Plavix & Coumadin: Do NOT stop taking your Aspirin, Plavix, or Coumadin before your procedure unless told to do so by my office or the prescribing doctor. VERY IMPORTANT – On the day of your procedure, tell your nurse and anesthesiologist if you are taking Plavix or Coumadin.

All Other Medications: On the day of your procedure, take all your medications (except ORAL Diabetic, Iron medications) with a small sip of water at 5 a.m.

ONLY IF CHECKED BY THE DOCTOR – PLEASE FAX TO 732-246-1045

☐ **MEDICAL/CARDIAC CLEARANCE:** If you have a significant medical history (i.e. Cardiac, Diabetes) or are taking Coumadin or Plavix, you will be asked to get medical/ cardiac clearance to proceed with your procedure and an EKG within 6 months before procedure date. If you have an internal Defibrillator, or Sleep Apnea machine please inform the office. Our fax # is 732-246-1045.

COLONOSCOPY PREP

***Purchase SUTAB at the pharmacy** (Please call your pharmacy after your appointment to ensure the pharmacy receives the e-prescription. If it is not covered by your insurance and you do not want to pay out of your pocket, please call the office for an alternative.)

DO NOT FORGET TO GIVE THE PHARMACY THE COUPON THAT WAS GIVEN TO YOU IN THE OFFICE.

DO NOT follow the instructions in/on the SUTAB box.

Please follow the instructions below:

The ENTIRE day before the procedure:

1. You may have PLAIN EGGS of any type (fried, hard boiled or scrambled) coffee or tea without milk for breakfast and lunch **up until 1pm.**
2. **AFTER 1pm,** you may only consume CLEAR liquids (anything you can see through such as Jello, chicken or vegetable broth, Ginger ale, yellow Gatorade and water. (NOTHING RED OR PURPLE) until after completing Dose #2.

DOSE #1

STARTING AT 6pm the night before your procedure, take the first bottle of 12 tablets.

- Fill the provided container with 16oz. of water.
- Take one tablet every 5 minutes until completing ALL 12 tablets.
- After your last pill, fill the provided container with 16oz. of water and drink the entire amount over 30 minutes.

DOSE #2

6 HOURS BEFORE YOUR ARRIVAL TIME take the second bottle of 12 tablets.

- Fill the provided container with 16oz. of water.
- Take one tablet every 5 minutes until completing ALL 12 tablets.
- After your last pill, fill the provided container with 16oz. of water and drink the entire amount over approximately 30 minutes.

DO NOT EAT OR DRINK ANYTHING AFTER YOU COMPLETE.
DOSE #2 UNTIL AFTER YOUR PROCEDURE.