

David H.Y. Lin, M.D.
905 San Ramon Valley Blvd. Ste 206
Danville, CA 94526

Telephone: (925) 831-9200

Fax: (925) 831-9317

COLONOSCOPY PREP

You are scheduled for a Colonoscopy on _____ at _____

Check in no later than _____

Please report to: **ASPEN SURGERY CENTER**

PLEASE ARRANGE FOR A FAMILY MEMBER OR FRIEND TO DRIVE YOU HOME AFTER THE PROCEDURE. NO TAXI, UBER OR LYFT IS ALLOWED. You will be sedated during the procedure and will not be allowed to drive afterwards. The procedure takes approximately 1 hour. You should allow for 1 hour recovery time. **Due to the sedation, you should not drive until the following day.**

Before your procedure: Purchase 4- 10 ounce bottles of LEMON FLAVOR Magnesium Citrate Soda. It can be purchased at your local drugstore in the laxative section.

The day before the procedure: you may have **ONLY CLEAR LIQUIDS** for breakfast, lunch, and dinner. **CLEAR LIQUIDS** consist of water, fruit juice without pulp (apple, white grape), beef broth, chicken broth (non fatty, or cloudy in appearance), Yellow colored Jell-O only, clear sodas, coffee, tea (no cream, sugar is ok). Any of the following that are **NOT COLORED RED OR PURPLE:** Gatorade, Propel, Kool-Aid (or other fruit flavored drinks), iced popsicles. **ABSOLUTELY NO ALCOHOL. AT 3PM** the day before your procedure, drink your first 10 oz bottle of Magnesium Citrate Soda. Repeat this step at **5PM** and **7PM** (total of 3 bottles that day). Follow each bottle with as much clear liquids that can be tolerated. **THE MORE WATER YOU DRINK, THE CLEANER YOUR COLON WILL BE. BEFORE RETIRING, DRINK AT LEAST 5 MORE (8 OUNCE) GLASSES OF WATER.** The morning of your procedure drink the 4th bottle of Magnesium Citrate Soda **4 hours** prior to your check- in time.

THE PREP IS CONSIDERED ADEQUATE ONLY IF THE OUTPUT IS CLEAR AS DILUTE URINE OR TAP WATER. You may have clear liquids only on the day of the exam up to **2 hours** prior to your check-in time.

Take your regular medication on the day of the procedure. However, do not take iron supplements for at least 5 days prior to the procedure **UNLESS OTHERWISE INSTRUCTED.** On the day before your procedure and on the day of your procedure, do not take Levsinex, Librax, Bentyl or NuLev. Please notify the office if you are taking Coumadin or blood thinners. **If Dr. Lin has already given you instructions, please follow his directions.**

We will bill your insurance for Dr. Lin's fee for the procedure. The hospital or surgical center will bill you separately for the facility and pathology services, if biopsies are taken.

IT IS YOUR RESPONSIBILITY TO VERIFY YOUR INSURANCE COVERAGE AND BENEFITS. OUR OFFICE WILL OBTAIN AUTHORIZATION FOR THE PROCEDURE IF NEEDED.

Doctor Lin has a financial interest in Laser Surgery Center and San Ramon Endoscopy Center. If such an interest is of concern to you, please feel free to discuss this with Dr. Lin or the office staff.

If you have any questions or need to reschedule your procedure, please call our office at (925) 831-9200. To avoid a late cancellation fee of \$100, please notify our office 48 hours prior to your procedure to cancel or reschedule. Thank you.