



**Wyoming Endoscopy Center @ IMG**

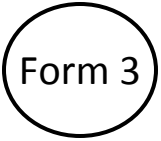
2301 House Avenue, Suite 306

Cheyenne, WY 82001

Fax 307-432-3871

Phone 307-635-4141

www.imgwy.com



Your appointment for a \_\_\_\_\_ has been scheduled for \_\_\_\_\_ at \_\_\_\_\_.  
Type of Procedure Date of Procedure Time

Please arrive 40 minutes prior to this scheduled appointment time to complete required paperwork.

Please remember to bring your insurance cards and photo ID to your appointment.

## Nulytely AM

***Follow these instructions for colonoscopy preparation. Failure to take the prep as indicated below may result in a poorly cleansed colon and possible cancellation of the procedure.***

A responsible person accompanying you will be asked to sign the After Care Instructions at the time of discharge. It is preferable that your driver remain in the ASC waiting area until you are discharged. Allow yourself two (2) hours for procedure, however average time is 45min to 1 hour.

Please do not wear perfume, cologne, after shave, scented lotions, or lipsticks.

Please remove ALL jewelry (including piercings) prior to arriving for your procedure. IMG is not responsible for any lost or misplaced items.

If you take any of the following medications, you must stop taking them **five days** prior to your procedure unless otherwise specified:

- Aspirin or other medications containing Aspirin
- Arthritis medication
- Fish Oil
- Omega 3
- Omega 369
- Flax Seed (Omega 6 fatty acids)
- Vitamin E
- Iron Supplements
- Blood Thinners

If you are Diabetic, follow instructions that were given by scheduler.

No Smoking, Gum Chewing or Tobacco Chewing after Midnight

***Special Instructions From Your IMG Physician:*** \_\_\_\_\_



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### 3 days before your procedure:

- Do not eat foods high in fiber such as whole grain breads and cereals, fruits, nuts, popcorn or vegetables (cooked or raw).

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### The day before your procedure:

**Step One:** Begin a clear liquid diet as soon as you wake up. Continue clear liquids for the entire day. Acceptable clear liquids are listed below:

**Clear Liquids include:**

- *Water, Carbonated Beverages, 7-up, Sprite or Gingerale*
- *Coffee without cream, decaffeinated coffee, tea, decaffeinated tea*
- *Fruit flavored drinks (CLEAR kool-aid)*
- *Clear juices (apple, white grape, white cranberry, lemon)*
- *Clear fat-free broth, chicken or beef*
- *Clear flavored gelatin (JELLO) - Yellow or Green*
- *Fruit ice, popsicles - Yellow or Green*
- *Sugar, honey, syrup, sugar substitutes, hard candy*
- *Energy drinks (Gatorade, Exceed) - Yellow or Green*

*DO NOT eat anything red, or containing red dye.*

*AVOID flavors such as: strawberry, cherry, watermelon, peach, grape and orange*

*NO solid food, NO milk products, NO orange juice*

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### Prep:

**Step Two:** Night before your procedure from 5 – 7 PM, drink half of the Nulytely Prep (half of the gallon).

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### Morning of your procedure:

**Step Three:** Starting at \_\_\_\_\_ (4 hours prior to Procedure) drink the other half of the Nulytely Prep over a 2 hour period. You will need to be finished drinking the Prep two hours prior to your Procedure. You must finish drinking Nulytely by \_\_\_\_\_.

You may have clear liquids until 2 hours before procedure then Nothing by Mouth.



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Form 3

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## **Frequently Asked Questions**

**Where do I go for my procedure?** Please check in at IMG Front Desk with completed paperwork.

**Why do I need someone to drive me home?** A driver is required due to the sedation that is administered. It is preferable that your driver remain in the ASC waiting area until you are discharged. If you have any questions, please call 307-432-3911.

**How can I prevent irritation?** You may use clear A & D Ointment on external rectal area for any discomfort you may experience. You may also use flushable wet wipes.

*Please remember that if your insurance requires PRE-AUTHORIZATION, it is YOUR RESPONSIBILITY to take care of this in advance. Pre-Authorization DOES NOT guarantee payment in full by your insurance. You will be responsible for any unpaid balance.*

**IMG IS A NON-SMOKING FACILITY**