

Bowel Preparation with Moviprep

- DO NOT EAT OR DRINK ANYTHING 4 HOURS BEFORE YOUR SCHEDULED ARRIVAL TIME.**
- You must be accompanied by a friend or relative to drive and/or assist you home. We WILL NOT discharge you to a cab, bus or other transportation service without a responsible party with you. You may not drive for 12 hours following your procedure.**

Materials You Will Need to Prepare For Your Procedure

- Prescription** for the **Moviprep** Bowel Prep which has been provided by our office
- Obtain** the **Moviprep** Bowel Prep from the **Pharmacy**
- Clear Liquid Diet Instructions** (see attached **Clear Liquid Diet Sheet**)

Special Instructions Regarding Medications

- Do Not** take **Iron supplements** for **one week** prior to the procedure date. Multivitamins are OK.
- Stop** taking **Coumadin/Plavix** _____ **days** prior to your scheduled procedure date.
- Diabetic patients:** _____
- Do Not** take **Lasix, HCTZ or Dyazide (water pill)** the **day of the procedure**
- Heart/Blood Pressure/ Thyroid/Seizure/Nerve Medications** can be taken **on the day of the procedure** with a sip of water.
- Stop Effexor** **one day** before the procedure
- Asthmatic patients** should bring their **INHALERS** with them on the day of the procedure
- Other** _____

The Day Before Your Exam

- DO NOT EAT ANY SOLID FOODS. YOU MAY ONLY HAVE CLEAR LIQUIDS UNTIL 4 HOURS BEFORE YOUR SCHEDULED ARRIVAL TIME.**
- Take all of your normal prescription medications, **unless advised otherwise.**
- You may go to work, but be home by 6 pm to begin your bowel prep.
- IMPORTANT NOTE: follow the instructions below, NOT the instructions on the Prep’s packaging.**
- Prepare your **Moviprep** solution in the morning. Empty 1 Pouch A and 1 Pouch B into the disposable container. Add lukewarm water to the top line of the container. **Mix to dissolve then refrigerate.**

PM Procedure

- The **Moviprep** container is divided by 4 marks.
- At 6 pm** – Begin drinking the **Moviprep** solution down to the next mark every 15 minutes.
 - Approximately **8 ounces** each time **until the entire solution is consumed.**
- Drink 16 ounces of Clear Liquids
- Mix Pouch A and B in container (same as above).
- At 6 am on the morning of your procedure** – Begin drinking the **Moviprep** solution down to the next mark every 15 minutes.
 - Approximately **8 ounces** each time **until the entire solution is consumed.**
- You must finish drinking this solution by 8 am**
- Drink 16 ounces of Clear Liquids
- WITH AN AFTERNOON PROCEDURE,** you may have **CLEAR LIQUIDS** up to 4 Hours **prior to your scheduled arrival time.**
- Other _____

- ⇒ Questions about symptoms or medications call 484-356-1050 between **7:30 am- 3:30 pm (Nurse Line)**
- ⇒ General or reschedule questions call 610-431-3122
- ⇒ If you reschedule, ask to see if you need new prep instructions.

Patient: Print Name

Signature

Date