

If you have questions regarding your preparation for colonoscopy please call the office during business hours (M-F 9-430) at 415-821-8000

San Francisco Endoscopy Center

3468 California Street, Ground Floor

San Francisco, CA 94118

415-345-0100

(Between: Laurel St & Locust St; Across from Laurel Village)

Date & time of colonoscopy: _____

Please arrive to pre-register at: _____ **Approximate pick up time:** _____

The facility requires you to bring your insurance card/s, valid photo ID, name & phone number of the responsible adult taking you home, name & phone number of your emergency contact, and your medication list to your scheduled appointment. If someone has a Power of Attorney, they must bring it with them.

The facility staff will NOT dress or undress patients, lift patients on and off gurney. It is OK for patients who need this assistance to come to SFEC IF family or others come to perform these tasks.

Due to sedation received during your procedure, you will not be permitted to take a cab/bus, or to walk home unaccompanied. You must have someone drive or accompany you home. You are not allowed to drive or operate machinery for 12 hours following your procedure.

- **Absolutely nothing to eat or drink after** _____ **the morning** of your procedure unless otherwise instructed by your doctor.
- **Important-** If you are on a blood thinner such as: Aspirin, Coumadin, Pradaxa, Plavix, Xarelto, Eliquis, and Aggrenox, we require you to stop it 5 days before your surgery. Please check with your primary care physician and/or cardiologist to see if it is safe to do so. Please notify our office with any changes.
- **Billing-** If you have an unmet deductible or co-insurance with your insurance policy, expect a call from our billing office prior to surgery for payment. For more info on billing and fee related questions, our billing office can be reached at 415-821-8000.
- **Cancellation Policy-** If you are unable to keep your scheduled appointment, please contact our office immediately during regular business hours. Failure to call 72 hours prior may result in a rescheduling fee.

SUPREP Bowel Preparation - (Two Day Prep)

Please pick up prescription one (1) week prior to your procedure

IMPORTANT:ON _____ All Day

You **MUST** be on a **clear liquid diet starting** the calendar day before your colonoscopy **until 3 hours before** your **colonoscopy**.

** Bowel preparation begins the day before your procedure, **as soon as you wake up** and consists of a **CLEAR LIQUID DIET**, for the entire day.**

EXAMPLE OF CLEAR LIQUID DIET:

Clear broth or consommé
Black coffee or tea (sugar is ok, but no milk)
Juices without pulp (apple, white cranberry, and grape, seven up, ginger ale, Gatorade, Plain Jell-O (any color is ok, **BUT NOT RED OR PURPLE**))

NOTE: You may not have anything that is RED OR PURPLE colored since the color may stain your colon.

YOU MAY NOT HAVE: Dairy products
Solid foods
Alcoholic beverages

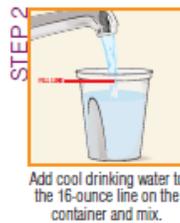
Step 1: **AT 5:00 PM**
• Pour one (1) of the 6 ounce bottle of SUPREP into the mixing container.

Step 2:
• Fill water up to the 16 ounce red line of the container.
• Mix the solution with a spoon.

Step 3:
• Be sure to drink ALL of the solution in the container.

Step 4:
• Drink an additional two (2) more 16 ounce containers of water over the next hour.

Step 5: **AT**
• 5 hours before your procedure, repeat steps 1-4 above with the remaining 6 ounce bottle of SUPREP



DO NOT EAT OR DRINK ANYTHING 3 HOURS PRIOR TO YOUR PROCEDURE