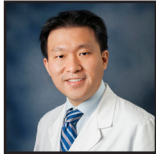


Participating Physicians



Carmelo Herrero, MD
Gastroenterology
Ponce School of Medicine



Roger Hsiung, MD
Colon & Rectal Surgeon
George Washington University



Albert Mason, MD
Gastroenterology
Albert Einstein College of Medicine of Yeshiva University



Bipin Saud, MD
Gastroenterology
University Hospital, Syracuse, New York



Jonathan Ricker, DO
Gastroenterology
Lake Erie College of Osteopathic Medicine



Preparations for Your Screening

It is important for the bowel to be completely cleaned out prior to having a colonoscopy. This will allow your physician to clearly view the walls of the colon and provide the highest quality diagnostic results. The bowel prep requires temporary dietary changes and medications and is typically started one day before the procedure. A nurse will phone you and review the bowel prep instructions prior to the procedure.

Approximately one week prior to your screening colonoscopy, you will receive an important phone call from our pre-op nurse. During this call, the nurse will take your medical history, answer any questions that you may have. Keep this brochure handy so you can follow the preparation instructions step by step.

An important note for all patients: Many medications can thin the blood. These include aspirin, Ascriptin, Ecotrin, Bufferin, Excedrin, NSAIDs such as Ibuprofen, Motrin, Advil, Naprosyn, Naproxen, Aleve, and prescription medications such as Plavix (clopidogrel), Pradaxa, and Coumadin (Warfarin). The pre-op nurse will advise you whether or not to stop these medications prior to your exam. Be sure to have a complete list of your medications available when speaking with the nurse.

If you take diabetic medications, the day before your procedure, take only half of the prescribed dosage and on the day of your procedure, do not take any at all. If you are on high blood pressure medication, please continue to take your medication as prescribed even on the morning of the procedure.

You must have a responsible adult to drive you home from your procedure. Due to sedation, you will be unable to drive for the remainder of the day.

Your Procedure is Scheduled for: _____

At: _____

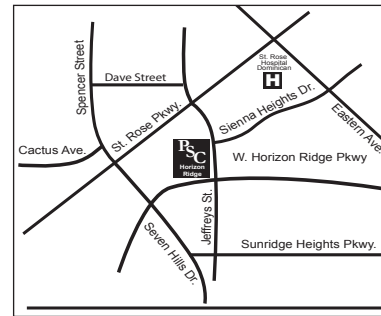
About the Surgery Center

Every Day Giving Excellence

Our mission is to provide first-class surgical services in a safe, welcoming environment; one in which we would be happy to treat our own families. Parkway Surgery Center is accredited by The Joint Commission and has a 97% Patient Satisfaction rate.

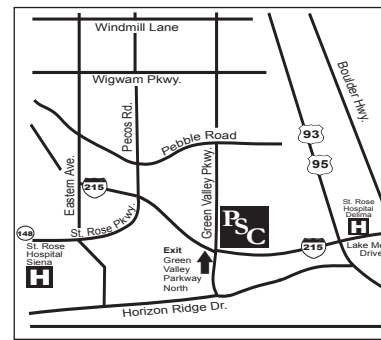


A joint Venture with St. Rose Dominican and United Surgical Partners



Horizon Ridge Location

10561 Jeffreys Street, Ste 130 | Henderson, NV 89052
Phone 702-724-8900 | Fax 702-982-8854



Green Valley Location

100 N. Green Valley Pkwy, Ste 125 | Henderson, NV 89074
Phone: 702-616-4954 | Fax: 702-269-0428

www.parkway-sc.com

early screening
saves lives



A joint Venture with St. Rose Dominican and United Surgical Partners

10561 Jeffreys Street, Ste 130 | Henderson, NV 89052
Phone 702-724-8900 | Fax 702-982-8854

100 N. Green Valley Pkwy, Ste 125 | Henderson, NV 89074
Phone: 702-616-4954 | Fax: 702-269-0428

www.parkway-sc.com



Direct Screen Colonoscopy Program™

PREPARATION INSTRUCTIONS

Preparation for Colonoscopy - NuLytely/ TriLyte/ GoLytely (MORNING)

1. Please start a low residue/low fiber diet 3 days prior to your procedure. The day prior to your procedure, you may continue to follow the low fiber diet until 2 P.M.
 - After 2 P.M start a clear liquid diet.
- Clear liquids you may have include: beef or chicken broth, Jell-O and popsicles (*no red, purple, or orange*), tea and coffee (*plain, no cream or sugar*), Sprite, 7-Up, ginger ale apple juice, water.

You must not have anything by mouth 2 hours prior to your scheduled exam.

2. Please mix your preparation with water the morning before your exam and refrigerate. 8:00 P.M: Begin drinking the first 2 liters of you prep, 8oz every 15 minutes. Drink the last 2 liter 4 hours prior to your scheduled exam.

Your exam is scheduled on _____
at _____ am/pm
At _____

Please arrive no later than _____ am / pm
****YOUR PROCEDURE TIME MAY CHANGE DUE TO ANESTHESIA/CANCELLATION****

- Please contact your insurance company to verify co-payment information for this procedure.
 - If you have additional questions regarding your procedure or you are unable to keep this appointment, please call the office at 702-616-4954

Preparation for Colonoscopy - NuLytely/ TriLyte/ GoLytely (AFTERNOON)

1. Please start a low residue/low fiber diet 3 days prior to your procedure. The day prior to your procedure, you may continue to follow the low fiber diet until 2 P.M.
 - After 2 P.M start a clear liquid diet.
- Clear liquids you may have include: beef or chicken broth, Jell-O and popsicles (*no red, purple, or orange*), tea and coffee (*plain, no cream or sugar*), Sprite, 7-Up, ginger ale apple juice, water.

You must not have anything by mouth 2 hours prior to your scheduled exam.

2. Please mix your preparation with water the morning before your exam and refrigerate. 5:00 A.M: Begin drinking the first 2 liters of your prep, 8oz every 15 minutes. 10:00 A.M: Begin drinking the last 2 liter of your prep.

Your exam is scheduled on _____
at _____ am/pm
At _____

Please arrive no later than _____ am / pm
****YOUR PROCEDURE TIME MAY CHANGE DUE TO ANESTHESIA /CANCELLATION****

- Please contact your insurance company to verify co-payment information for this procedure.
 - If you have additional questions regarding your procedure or you are unable to keep this appointment, please call the office at 702-616-4954

SuPrep Split-Dose Regimen (MORNING)

Purchase list:

- Suprep Bowel Prep Kit (17.5g/3/13g/1.6g) per 6 oz

1. Please start a low residue/low fiber diet 3 days prior to your procedure. The day prior to your procedure, you may continue to follow the low fiber diet until 2 P.M.
 - After 2 P.M start a clear liquid diet.
- Clear liquids you may have include: beef or chicken broth, Jell-O and popsicles (*no red, purple, or orange*), tea and coffee (*plain, no cream or sugar*), Sprite, 7-Up, ginger ale apple juice, water.

You must not have anything by mouth 2 hours prior to your scheduled exam.

2. The Day BEFORE your colonoscopy at 8:00 pm begin DOSE 1 of SuPrep.
 - Pour One (1) 6 ounce bottle of SUPREP liquid into the mixing container.
 - Add cool drinking water to the 16 ounce line on the container and mix. Make sure solution is diluted
 - Drink ALL the liquid in the container.
 - IMPORTANT-You must drink two (2) more 16 ounce container of water over the next hour

The MORNING OF your colonoscopy, 4 hours prior to your procedure begin DOSE 2 of SuPrep and follow instructions above.

SuPrep Split-Dose Regimen (AFTERNOON)

Purchase list:

- Suprep Bowel Prep Kit (17.5g/3/13g/1.6g) per 6 oz

1. Please start a low residue/low fiber diet 3 days prior to your procedure. The day prior to your procedure, you may continue to follow the low fiber diet until 2 P.M.
 - After 2 P.M start a clear liquid diet.
- Clear liquids you may have include: beef or chicken broth, Jell-O and popsicles (*no red, purple, or orange*), tea and coffee (*plain, no cream or sugar*), Sprite, 7-Up, ginger ale apple juice, water.

You must not have anything by mouth 2 hours prior to your scheduled exam.

2. The MORNING OF your colonoscopy at 5:00 am begin DOSE 1 of SuPrep.
 - Pour One (1) 6 ounce bottle of SUPREP liquid into the mixing container.
 - Add cool drinking water to the 16 ounce line on the container and mix. Make sure solution is diluted
 - Drink ALL the liquid in the container.
 - IMPORTANT-You must drink two (2) more 16 ounce container of water over the next hour

The MORNING OF your colonoscopy, at 10:00 am begin DOSE 2 of SuPrep and follow instructions above.

SPECIAL NOTE

Arrange to take the day off of work since anesthesia will be administered. You must have a responsible adult driver present to take you home, as you will be unable to drive yourself. You will not be released to a cab or bus. Important: If you did not have transportation home or If you have had anything by mouth within 2 hours of your exam, the exam will have to be rescheduled at a different date.

Please remove all body piercings prior to the exam.

MEDICATION MODIFICATIONS

1. Stop Aspirin and Coumadin 5 days prior to the procedure.
2. Stop Pradaxa, Xarelto, Eliquis 2 days prior to the procedure.
3. Stop Plavix 7 day prior to the procedure.

4. Stop any anti-inflammatory medication 1 day prior to the procedure (including ibuprofen).
5. Stop any arthritis medication 1 day prior to the procedure.
6. Do Not Take insulin or any oral diabetic medication the morning of the procedure. Be sure to check your blood sugar 4 hours prior to appointment time. If your blood sugar is low, drink a glass of apple juice.

7. Continue to take any other prescription medications that are not listed above, at 2 hours prior to your procedure with a small amount of water. Please be aware that If you do drink anything within 2 hours of your scheduled time your procedure will be delayed or rescheduled.