

# BOWEL PREPARATION MORNING PROCEDURE

Procedure: \_\_\_\_\_

Date: \_\_\_\_\_ Please report to the admission desk at: \_\_\_\_\_

**NEW REFERRAL REQUIRED BEFORE PROCEDURE YES / NO (Send to practice not hospital)**

Location: \_\_\_\_\_

Your doctor is: \_\_\_\_\_

Your anaesthetist is: \_\_\_\_\_

If you have any questions or to discuss out of pocket expenses your anaesthetist may charge please ring: \_\_\_\_\_

**2 DAYS PRIOR TO YOUR PROCEDURE**

***If you are having day surgery you will not be able to drive home, please arrange for someone to drive you home after your procedure. It is essential you have a responsible adult present for the next 24 hours***

**DAY PRIOR TO YOUR PROCEDURE**

Please eat only a **LOW FIBRE DIET** this day (**See DIET page for low fibre diet options**)

You may have **LOW FIBRE DIET** until **9am**

Then commence with **CLEAR FLUIDS** (**See DIET page for clear fluid options**)

*The aim of the preparation is to clean the large bowel thoroughly. You will probably find that diarrhoea will begin one to two hours after commencement of the laxative solutions. At completion of the preparation, liquid bowel actions may be light brown, green or yellow in colour with a small amount of debris – this is satisfactory.*

## **AT 5.00 PM:**

Add the contents of one sachet of PicoLax to 250mls of water, stir until fizzing stops, then drink. Followed by 4 glasses (250mls) of water/clear fluids over the next hour.

## **AT 7.00 PM:**

Add the contents of one sachet of PicoLax to 250mls of water, stir until fizzing stops, then drink. Followed by 4 glasses (250mls) of water/clear fluids over the next hour.

*Continue to drink at least a glassful of clear fluid every hour while you are awake.*

**DAY OF YOUR PROCEDURE**

You may drink **CLEAR FLUIDS** until \_\_\_\_\_ (6 hours before admission time)

You may continue **WATER** (250ml per hour) until \_\_\_\_\_ (2 hours before admission time)

***And then nothing by mouth until instructed by hospital staff this includes lollies, chewing gum and smoking***

# DIET

## LOW FIBRE DIET

- White bread – fresh or lightly toasted
- Butter / margarine
- Vegemite, honey
- Yoghurt – low fat, plain or vanilla
- White cheese ie cottage, feta, ricotta
- Eggs – scrambled, poached or boiled
- Chicken – skinless
- Fish – skinless.
- Potato – peeled and cooked
- Pumpkin – peeled and cooked
- Plain biscuits – Jatz, Arrowroot

**Milk is allowed including milk substitutes**

## CLEAR FLUID DIET

(yellow, orange, brown colourings only)

- Water
- Clear broth, stock cubes in water
- Cordial
- Fruit juice – strained, without pulp or seeds ie clear apple
- Teaspoon of Bonox or Vegemite in hot water
- Black tea, herbal tea or coffee
- Sugar, honey or artificial sweeteners are allowed
- Plain jelly – without fruit
- Clear ice blocks – lemon sorbet
- Sports drinks or gastrolyte.
- Soda water, mineral water, lemonade
- You may suck on barley sweets or other hard travel sweets

**No milk, milk substitutes or dairy products are allowed**

# MEDICATIONS

**PLEASE TAKE ALL YOUR REGULAR MEDICATIONS **except** for the following:**

- **Clopidogrel (Plavix, Iscover, Clopidogrel Plus, Coplavix, Duo Cover)**
- **Dabiatran (Pradaxa)**
- **Rivaroxaban (Xarelto)**
- **Apixaban (Eliquis)**
- **Other anticoagulants need to be addressed specifically with your doctor**

\_\_\_\_\_ **STOP ON** \_\_\_\_\_ **LAST DOSE ON** \_\_\_\_\_

**Aspirin** should be stopped **10 days** prior to your procedure, unless otherwise instructed by your doctor.

**All natural remedies** / medications should be stopped **7 days** prior to your procedure

**Fish oil**

**Krill oil**

**Glucosamine**

**Iron** should be stopped **5 days** prior to your procedure, if colonoscopy is also being performed.

**Warfarin** should be stopped **4 days** prior to your procedure unless otherwise instructed by your doctor.

**Non-steroidal anti-inflammatory drugs** should be stopped **2 days** prior your procedure

**Nurofen/Ibuprofen**

**Indocid**

**Celebrex**

**Mobic**

**Voltaran**

**Diuretics** should not be taken on the morning of your procedure

**Frusemide**

**Spirolactone**

If you have **diabetes** please refer to the **DIABETIC MEDICATION** pages for instructions.

**Please take all your other regular medications as per normal**

PLEASE PURCHASE FROM YOUR CHEMIST  
TWO (2) SACHETS OF PICOLAX  
(Sodium picosulfate oral powder preparation)  
and follow the instructions sent to you for the  
procedure.

Peter **Hewett**  
Andrew **Luck OAM**  
Darren **Tonkin**  
Elizabeth **Murphy**  
Chris **McDonald**  
Chris **Lauder**

Lister House  
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North Adelaide SA 5006

Should PICOLAX SACHETS be unavailable please substitute with  
PICOPREP SACHET and follow the instructions sent to you for  
the procedure

Telephone 08 8267 3355  
Facsimile 08 8361 8822

[www.colorectalsurgery.com.au](http://www.colorectalsurgery.com.au)

