

**MEMORIAL SURGERY CENTER
OCEAN SPRINGS
SuTAB with Miralax**

Please complete preop labs and Covid test 5-7 days prior to your procedure. Ocean Springs Labcorp Monday-Thursday 8-3 and Friday 8-12

You have been scheduled for a Colonoscopy on _____ with Dr. _____ at the Memorial Surgery Center in Ocean Springs, MS.

If you were not given a date and/or time for your procedure at the doctor's office, please call the clinic where you had your office visit to schedule your procedure appointment.

Memorial Digestive Health Clinic **Biloxi** 228-374-7949

Memorial Digestive Health Clinic **Ocean Springs** 228-872-6291

Memorial Digestive Health Clinic **Pascagoula** 228-769-1035

- If you were given a time at the doctor's office, this is a **tentative appointment time and may change**. A staff member from Memorial Surgery Center will be calling you prior to your procedure with your arrival time. If you have not heard from them by 9 AM the day before your procedure, call (228) 872-6290.
- Notify the nurse if you are taking any of the following medications. You may be required to stop these medications eight (8) days before your procedure or as instructed by your doctor.

Advil	BC Powder	Eliquis	Plavix	Fish Oil
Aleve	Brilinta	Goody's	Pradaxa	
Alka Seltzer	Celebrex	Heparin	Vanquish	
Ascriptin	Coumadin	Iron Supplement	Vitamin E	
Aspirin	Effient	Mobic	Xarelto	

If you have any questions or you need to cancel/reschedule your procedure, please call your doctor's office.

Day Before Procedure

- You will need to fill your prescription for SuTAB and Miralax. Purchase two (2) fleets enemas over the counter. You will also be given a prescription for Phenergan or Zofran which may be used to prevent nausea and vomiting during the prep.
- You may have a light breakfast before 9:00 a.m. on the day before your procedure. After breakfast, clear liquids only (i.e., chicken broth, Jell-O, Popsicles, Sprite, Gatorade, water, etc.)
- Do NOT eat or drink anything that is red, purple, or green or any milk products.
- Drink one (1) bottle Citrate of Magnesium at 6 p.m.
- Do not take any diabetic medications, by mouth or injection, the day before your procedure.
- Drink at least 8 oz of clear liquids every hour. THIS SHOULD INCLUDE PLENTY OF CLEAR GATORADE AND/OR POWERADE.
- Preparations schedule:

First Dose: Start SuTAB prep at _____ AM/PM by following steps 1-4 on the side of the box and as outlined below:

Open 1 bottle of 12 SuTAB tablets.

Fill the provided container with 16 oz of water (up to the fill line). Swallow 1-2 tablets with a sip of water until you have taken all 12 tablets and completed the entire 16 oz of water over 15-20 minutes. All 12 tablets need to be taken within this 15–20-minute time frame for the prep to work appropriately.

Approximately 1 hour after the last tablet is swallowed, fill the provided container a second time with 16 oz of water (up to the fill line) and drink the entire amount over 30 minutes.

Approximately 30 minutes after finishing the second container, fill the provided container with 16 oz of water (up to the fill line) and drink the entire amount over 30 minutes.

IF YOU HAD A DIFFICULT TIME TOLERATING THE FIRST DOSE OF YOUR SUTAB TABLETS, YOU WILL NEED TO MIX 1 (ONE) 255 GM BOTTLE OF MIRALAX IN 64 OZ OF CLEAR GATORADE AND BEGIN DRINKING AT 8:00 P.M. DRINK THE ENTIRE MIXTURE OVER A 2 HOUR PERIOD AT LEAST ONE 8 OZ GLASS EVERY 15 MINUTES.

Second Dose: Start second dose of SuTAB at _____ AM/PM by repeating the steps 1-4 with the remaining 12 SuTABS.

Open 1 bottle of 12 SuTAB tablets.

Fill the provided container with 16 oz of water (up to the fill line). Swallow 1-2 tablets with a sip of water until you have taken all 12 tablets and completed the entire 16 oz of water over 15-20 minutes. All 12 tablets need to be taken within this 15–20-minute timeframe for the prep to work appropriately.

Approximately 1 hour after the last tablet is swallowed, fill the provided container a second time with 16 oz of water up to the fill line and drink the entire amount over 30 minutes.

Approximately 30 minutes after finishing the second container, fill the provided container with 16 oz of water up to the fill line and drink the entire amount over 30 minutes.

DO NOT EAT OR DRINK ANYTHING AFTER YOU COMPLETE YOUR SECOND DOSE OF SUPREP.

Day of Procedure

The surgery center will call you with your arrival time approximately one week prior to your procedure date.

Tentative arrival time: _____

- Tap water or fleet enema per rectum until the stool is clear.
- Take blood pressure and/or heart medications with a sip of water.
- Do not take diabetic medications- by mouth or injection.
- If you have a partial or full dental plate, please do not use adhesive. Your plate will be removed during your procedure.
- **Your driver MUST be present at check-in and must stay on the premises until your procedure is completed and you are discharged. Otherwise, your procedure may be cancelled. This is for your safety; you will be placed under general anesthesia during your procedure.**
- Please bring your current insurance card, picture ID, and any applicable co-pay to check in. Your procedure may be cancelled without these items. Please call (228) 872-7670 if you have questions.
- If the patient is under the age of 18, he/she must be accompanied by a parent/legal guardian.
- If the patient is a minor child who has been adopted or is in foster care, you must bring the court order giving you authorization to seek medical care.
- You will be required to talk to your doctor after the procedure. Please be aware that the wait could be up to 1 hour.

Memorial Surgery Center

3882 Bienville Blvd.

Ocean Springs, MS 39564

Main Phone	(228) 872-6290
Scheduling Department	(228) 818-5522
Insurance Pre-Cert Coordinator	(228) 872-2220
Billing Department	(228) 818-5524
MS Anesthesia	(800) 208-6014