ARIZONA DIGESTIVE HEALTH

3815 E Bell Rd Suite 1250, Phoenix, AZ 85032 (602) 493-3030

9250 N. Third St. Suite 4035 Phoenix, AZ 85020 (602) 279-3575

•				(002) 217-331.
Flex Sigmoidoscopy				
Procedure Date:	Proced	dure Time:	Check- In Time: _	
North Vall	ley Endoscopy Center 40 th St Bldg. 8 Ste 157		Health JCL NM Hospital Ounlap (Main Entrance ~Info	ormation Desk)

1. MEDICATIONS AS INSTRUCTED BELOW (2 to 7 days before your procedure)

- Hold GLP-1's such as: Ozempic, Trulicity, Mounjaro, Byetta, Bydureon, Victoza, Adlyxin, Rybelsus.
 - If weekly injectables, hold 1 week prior to your procedure.
 - If daily dosing, hold the day of your procedure.
- Blood Thinners including:
 - Discontinue 5 days before your procedure: Plavix, Coumadin/Warfarin, Clopidogrel, Effient, Prasugrel and Aggrenox.
 - Discontinue 2 days before your procedure: Brilinta Eliquis, Xarelto/Pradaxa.
- If not sure medications you are taking are blood thinners, CONSULT your Physician/Pharmacist

2. One (1) day before your procedure:

The evening before the procedure, take four (4) tablespoons of Milk of Magnesia.

3. Day of your procedure:

- You will need to perform two (2) Fleet Enemas (green and white box)
 - 1. Two (2) hours before leaving your home to go to the facility. Insert the first enema. Hold for five (5) minutes or longer and then evacuate it.
 - 2. Immediately thereafter, insert the second enema. Hold this for five (5) minutes or longer then evacuate it.
 - 3. If your procedure is scheduled for the morning, eat a light dinner the night before and nothing to eat or drink the morning of the procedure.
 - 4. If your procedure is scheduled in the afternoon, you may have **CLEAR LIQUIDS** for breakfast but **NOTHING** after 9:00am.

IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT OUR OFFICE.