

TWO-DAY COLON PREP USING MAGNESIUM CITRATE AND HALF-LYTELY

Things to purchase: Two bottles of Magnesium Citrate (only the green bottle) OTC and prescription Half-Lytely Prep Kit from your pharmacist. Your doctor will give you a prescription.

DISCONTINUE any aspirin, ibuprofen or Advil products, blood thinners (Coumadin, Plavix, Aggrenox, Ticlid, Persantine) 7 days prior to your procedure. Tylenol may be used as needed. Your other necessary medications are OK to take.

Day One:

Upon waking two days prior to your colonoscopy you will begin a clear liquid diet. Do not eat any solid food. Follow a clear liquid diet carefully to ensure adequate preparation of the colon. **Avoid anything red or purple.** Do drink plenty of water to stay hydrated.

That morning at 7:00 a.m. you will need to fill the Half-Lytely container to the line with water. You may add one Crystal Lite lemonade packet to enhance the flavor. Please place the container in the refrigerator to cool down. **You will not take the one Bisacodyl tablet in the Half-Lytely kit. Please discard it.**

That evening at 7:00 p.m., begin drinking the Half-Lytely solution. You will drink one 8 oz glass of solution every 15 minutes **UNTIL YOU HAVE CONSUMED A TOTAL OF FOUR GLASSES.** You will then place the container back in the refrigerator with the remaining solution. **Please continue to drink clear fluids.**

Day Two:

That morning at 7:00 a.m., drink the remaining Half-Lytely solution. You will again drink one 8 oz glass of solution every 15 minutes until you have consumed all of the solution. **Please continue to drink clear fluids throughout the day.**

At 7:00 p.m., drink one bottle of Magnesium Citrate followed by 8 oz of clear liquids. **Please continue to drink clear fluids.**

Morning of the Procedure:

On the morning of your procedure, three hours prior to your colonoscopy arrival time, you will drink the second bottle of Magnesium Citrate followed by 8 oz of clear fluids. *You may not have any more fluids once you complete this portion of your colonoscopy prep.*

Your procedure is scheduled at Woodburn Endoscopy Center on _____ at _____. This is located at 3301 Woodburn Road, Suite 109, Annandale, VA.

Report to the Center one hour prior to your scheduled procedure time.

There is a **\$250.00 LATE CANCELLATION FEE** for procedures not cancelled at least **SEVEN (7) DAYS** prior to your procedure date. Your insurance will not cover this fee, you are responsible for payment. If you must cancel, do not call the facility where your procedure is scheduled **call our office at 703-876-0437.**