

# MGB GASTROENTEROLOGY

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## SUTAB PREP

**SUTAB** is a split-dose (2-day) regimen. A total of 24 tablets are required for complete preparation for colonoscopy. You will take the tablets in two doses of 12 tablets each. **Water must be consumed with each dose of SUTAB, and additional water must be consumed after each dose.**

### **THE DAY BEFORE YOUR PROCEDURE:**

- You may have a low-residue breakfast: eggs, toast, cottage cheese, yogurt, black coffee or tea.
- You may have clear liquids such as water, coffee, tea, broth, sodas, apple juice, Gatorade, Jell-O, popsicles, etc.

### **PLEASE AVOID:**

- Dairy or soy products, red or purple liquids, alcohol, and juices with pulp or sediment.
- Do not take other laxatives while taking SUTAB.
- Do not take oral medications within 1 hour of starting each dose of SUTAB.
- If taking tetracycline or fluoroquinolone antibiotics, digoxin, chlorpromazine, or penicillamine, take these medications at least 2 hours before and not less than 6 hours after administration of each dose of SUTAB.

### **DOSE 1 – THE DAY BEFORE YOUR PROCEDURE: 4:00PM**

#### **Take the tablets with water**

**STEP 1** - Open 1 bottle of 12 tablets

**STEP 2** - Fill the provided container with 16 ounces of water (up to the fill line). Swallow each tablet with a sip of water, and drink the entire amount of water over 15 to 20 minutes.

#### **Drink additional water**

**STEP 3** – Approximately 1 hour after you take the last tablet, fill the provided container again with 16 ounces of water (up to the fill line), and drink the entire amount over 30 minutes.

**STEP 4** – Approximately 30 minutes after finishing the second container of water, fill the provided container with 16 ounces of water (up to the fill line), and drink the entire amount over 30 minutes.

**IMPORTANT: If you experience prep-related symptoms (nausea, bloating, or cramping), pause or slow the rate of drinking the additional water until your symptoms lessen.**

### **DOSE 2 – THE DAY OF YOUR PROCEDURE:**

-The morning of your colonoscopy (5 to 8 hours prior to your colonoscopy), open the second bottle of 12 tablets.

-Repeat **STEP 1** to **STEP 2** from **DOSE 1**.

**IMPORTANT: You must finish taking all SUTAB tablets and required water at least 6 hours before your colonoscopy. \*\*\*NOTHING BY MOUTH 4 HOURS PRIOR TO PROCEDURE\*\*\***

**PLEASE NOTE:** In order for this procedure to be performed, you **MUST have a ride home**. You will not be discharged unless you are accompanied by a responsible adult who will either drive you home or accompany you home by taxi or bus.

**REPORT TO:** \_\_\_\_\_ **Cooley Dickinson Hospital, 30 Locust Street, Northampton, North Entrance**

**\*You will be receiving a blocked call from Assessment at CDH, please answer when called\***

\_\_\_\_\_ **Valley Medical Group, 31 Hall Drive, Amherst**

\_\_\_\_\_ **Pioneer Valley Surgicenter, 3550 Main Street, Springfield, Suite 103**

**\*\*ALL PIERCINGS, JEWELRY AND CONTACT LENSES MUST BE REMOVED PRIOR TO PROCEDURE\*\***

**\*Do not take any Advil or Aleve the morning of the procedure**

**PROCEDURE DAY:** \_\_\_\_\_

**PROCEDURE DATE:** \_\_\_\_\_

**\*BLOOD THINNER Instructions:**

**ARRIVAL TIME:** \_\_\_\_\_

**\*DIABETIC Instructions:**