



Atlantic Coast Gastroenterology, Associates, LLC

Bernard Aaron, M.D. F.A.C.P, F.A.C.G. * Steven Schneiderman, M.D., * William Basri, M.D., F.A.C.G.
Kenny P. Hui, M.D., * Matthew Tangorra, D.O., * Mark Cerefice, M.D. * Sandyha Shukla, M.D.
Phone # 732-458-8300 Fax# 732-548-7408

Date of Colonoscopy: _____
Facility: _____

Plenvu

SOMEONE MUST DRIVE YOU HOME FROM THE FACILITY THE DAY OF YOUR PROCEDURE!!!

****We do not have procedure times until the day prior to your scheduled test****

If your procedure is at **Ocean Medical Center**, our office will call you the day prior with your procedure time. If you are scheduled for a Monday, we will call you on the Friday before. If you do not hear from us the day prior by 3:00 pm, please call 732-458-8300 and ask for the surgical coordinator. They will give you the procedure time. The facility is located at 425 Jack Martin Blvd.

****When reporting to Ocean Medical Center, please use the free parking garage for patients and visitors, UNLESS you would like to use the free Valet Parking which is located on Jack Martin Blvd. Main Entrance (opened from 7am to 5 pm Mon-Fri) to report to the Same Day Surgery Unit go to Parking Lot C (by the parking garage) go through the double glass doors and give the receptionist your name and they will direct you where you need to be.**

If your procedure is at **SHORE OUPATIENT SURGERY CENTER (SOS)**, that facility will call you the day prior to inform you of the procedure time. If you have not heard from them by 1:00 pm, please call them at 732-942-9835. Their address is 360 Route 70, Lakewood, NJ, 08701. They are the same parking lot as STS Tire, across from Charlie Brown Restaurant.

If your procedure is at **SEASHORE SURGICAL INSTITUTE (SSI)**, that facility will call you the day prior to inform you of the procedure time. If you have not heard from them by 2:00 pm, please call 732-836-9800. They are located at 495 Jack Martin Blvd, Brick, NJ 08724.

If your procedure is at **JERSEY SHORE UNIVERSITY MEDICAL CENTER** that facility will call you the day before to inform you of your procedure time. If you have not heard from them, please call 732-776-4600. They are located at 1945 Route 33, Neptune, NJ 07753. When reporting to the hospital, report to the Mary V Black Pavilion across from the Hope Tower and give receptionist your name, they will direct you to where you need to be.

If your procedure is at **ADVANCE ENDOSCOPY (AE)**, that facility will call you the day prior inform you of the procedure time. If your procedure is on a Monday they will call you on Friday. If you have not heard from them by 2:00 pm, please call 732-935-0031. They are located at 142 Route 35, Suite 101, Eatontown, NJ, 07724

**IF YOU HAVE ANY QUESTIONS ABOUT YOUR PROCEDURE, PLEASE CALL 732-458-8300
ASK FOR THE SURGICAL COORDINATOR**

HOME INSTRUCTIONS FOR YOUR COLONOSCOPY

These instructions are to be followed prior to your scheduled procedure. Please follow them carefully.

AVOID for three (3) days prior: All roughage and high fiber foods, such as raw vegetables, whole grains or foods with seeds or skins.

Suggestions for three (3) days prior: Eggs, plain pancakes w/ syrup, white bread, plain bagel, chicken, fish, white rice, pasta with butter, mashed potato, inside of baked potato.

**IF YOU TEND TO HAVE CONSTIPATION THEN THE EVENING PRIOR TO YOUR COLONOSCOPY PREP ____, PLEASE TAKE TWO (2) DULCOLAX TABLETS (If dulcolax is not available, you may purchase Senokot) THIS CAN BE PURCHASED OVER THE COUNTER.

THE DAY PRIOR IS _____

The day prior to your colonoscopy, starting at 7 am in the morning until midnight the night before, you may have unlimited amounts of clear liquids. **NO SOLID FOODS, NO MILK OR MILK PRODUCTS.** Please see below for examples of clear liquids. DO NOT EAT OR DRINK ANYTHING AFTER MIDNIGHT UNTIL AFTER YOUR PROCEDURE IS COMPLETED.

CLEAR LIQUID EXAMPLES:

- Clear Fruit Juices (apple, white grape, white cranberry, etc.)
- Water (flavored water is ok, as long as it does not have food coloring)
- Plain Jell-O (NOT RED OR PURPLE)
- Ice Pops
- Hard Candy
- All types of Teas (hot or cold)
- Clear Soda (Sprite, Ginger Ale, 7-up, etc.)
- Gatorades (NOT RED OR PURPLE)
- Broth/ Bouillon

NO RED OR PURPLE

NO MILK OR MILK PRODUCTS

NO SOLID FOOD

FAILURE TO FOLLOW ALL OF THESE INTRUCTIONS MAY RESULT IN CANCELLATION OF YOUR PROCEDURE.

NEW PLENVU®

Powder for Oral Solution

PEG 3350, Sodium Ascorbate, Sodium Sulfate, Ascorbic Acid, Sodium Chloride, and Potassium Chloride

140g | 48.11g | 9g | 754g | 5.2g | 2.2g

2-Day Split-Dosing

If you're starting PLENVU® the evening before your colonoscopy,
Here's How to Prep

Date of colonoscopy: ____/____/____

Location of colonoscopy: _____

EVENING

PLENVU® Dose 1:

Date: ____/____/____

Day of Week: M T W Th F S Su

** ANY

Time: 4pm - 8 PM

MORNING

(Depending on arrival time)

PLENVU® Dose 2:

Date: ____/____/____

Day of Week: M T W Th F S Su

**

Time: 6-8 hours prior to arrival time

EVENING	MORNING
DOSE 1 MANGO FLAVOR	DOSE 2 FRUIT PUNCH FLAVOR
WAIT APPROXIMATELY 12 HOURS FROM THE START OF DOSE 1	
READY FOR COLONOSCOPY	

Note: actual solution is clear.

Stop drinking liquids at least 2 hours before your colonoscopy
 or as recommended by your healthcare provider.



Stay hydrated!

It's important that you drink clear liquids before, during, and after your prep.

TAKE DOSE 1

1. Use the mixing container to mix the contents of the Dose 1 pouch with at least 16 ounces of water by shaking or using a spoon until it's completely dissolved. This may take up to 2 to 3 minutes. Take your time—slowly finish the dose within 30 minutes.
2. Refill the container with at least 16 ounces of clear liquid. Again, take your time and slowly finish all of it within 30 minutes.

WAIT APPROXIMATELY 12 HOURS FROM THE START OF DOSE 1, THEN...

TAKE DOSE 2

1. Use the mixing container to mix the contents of Dose 2 (Pouch A and Pouch B) with at least 16 ounces of water by shaking or using a spoon until it's completely dissolved. This may take up to 2 to 3 minutes. Take your time—slowly finish the dose within 30 minutes.
2. Refill the container with at least 16 ounces of clear liquid. Again, take your time and slowly finish all of it within 30 minutes.

HELPFUL TIP: PLENVU® can be refrigerated. Use within 6 hours after it's mixed with water

INDICATION

PLENVU® (polyethylene glycol 3350, sodium ascorbate, sodium sulfate, ascorbic acid, sodium chloride, and potassium chloride for oral solution) is a prescription medication used by adults to clean the colon before a colonoscopy.

IMPORTANT SAFETY INFORMATION

- Do not take PLENVU® if you have a blockage in your intestine (bowel obstruction), an opening in the wall of your stomach or intestine

(bowel perforation), problems with food or fluid emptying from your stomach (gastric retention), a problem with food moving too slowly through your intestines (ileus), a very dilated large intestine, or an allergy to any of the ingredients in PLENVU®.

Please see additional Important Safety Information on back and accompanying full Prescribing Information, including Medication Guide and Instructions for Use.

FAILURE TO FOLLOW ALL OF THESE INTRUCTIONS MAY RESULT IN CANCELLATION OF YOUR PROCEDURE

You should have informed the office if:

- You are a diabetic
- You are on dialysis
- You have a defibrillator and/or pacemaker
- You have had Heart Valve Replacement, history of Heart Valve infection, Mitral Valve Prolapse
- You are taking any blood thinners

Please stop taking aspirin, iron supplements, multivitamins with iron, arthritis medications, Vitamin E, fish oil and ginkgo biloba seven (7) days prior to your scheduled procedure. If you have not done this, please call our office for reassurance. **Tylenol may be taken if needed.**

Please stop taking any blood thinners (Coumadin/Plavix/Pradaxa/Eliquis/Effient/Warfarin/Baby Aspirin) at least _____ days prior to your procedure. (Please check with the prescribing physician to obtain the medical clearance and his specific instructions for your date of when to temporarily discontinue these medications.) If you have not done this you can call our office for reassurance.

Please stop taking ALL DIURETIC MEDICATIONS, (Lasix, Furosemide, Spironolactone, Aldactone, Hydrochlorothiazide Etc.) the day prior to your procedure. **If your blood pressure medications contains a diuretic it is ok to take that.**

DO NOT STOP TAKING ANY HEART OR BLOOD PRESSURE MEDICATIONS PRIOR TO YOUR PROCEDURE. YOU ARE INSTRUCTED TO TAKE THEM THE MORNING OF YOUR PROCEDURE WITH A SMALL SIP OF WATER.

*Please call your insurance company so you are aware of any costs that you may be responsible for. All procedures are done on an OUTPATIENT basis. It is ultimately the patient's responsibility to be familiar with your own personal insurance policy information/benefits.

WARNING!!! ** NO LIQUIDS AT LEAST SIX (6) hours prior to your procedure.**

Liquids are not to be consumed within 6 hours prior to your approval time for your procedure. Failure to heed this warning could result in cancellation of your procedure by the anesthesiologist and/or gastroenterologist.

Please be aware: DO NOT WEAR ANY JEWELRY TO YOUR PROCEDURE. The facility is not responsible for any personal items that are misplaced/lost.

Make sure to bring a list of current medications with you on the day of your procedure as well as insurance cards and photo identification.

Call our office with any questions at 732-458-8300 and ask for the surgical coordinator.

*****PLEASE REMEMBER SOMEONE MUST DRIVE YOU HOME
AFTER YOUR PROCEDURE*****