

Plenvu Preparation

Please read all instructions thoroughly. After reading if any questions please call our office.

IF YOU ARE TO BE SEDATED, A RESPONSIBLE DRIVER MUST REMAIN IN THE FACILITY THROUGHOUT YOUR APPOINTMENT. NO EXCEPTIONS.

Pick-up the following prescription:

- **Plenvu Prep** – the prescription has been sent to your pharmacy. Follow mixing instructions provided with product. Do not mix until the day before your procedure.

Note: If the pharmacy has not received the prescription, please call our office.

IF YOU ARE TAKING GLP MEDICATION FOR DIABETES OR WEIGHT LOSS PLEASE READ:

- IF INJECTABLE GLP MEDICATION YOU MUST NOT TAKE THE MEDICATION SEVEN (7) DAYS PRIOR TO YOUR PROCEDURE.
- IF ORAL GLP MEDICATION YOU MUST NOT TAKE THE MEDICATION ONE (1) DAY PRIOR TO YOUR PROCEDURE.

Starting SEVEN (7) Days BEFORE Your Procedure:

- STOP injectable GLP medication for diabetes or weight loss.

Starting THREE (3) Days BEFORE Your Procedure:

- Do NOT eat any nuts, seeds, corn, or anything that contains these items.

The Day BEFORE Your Procedure:

- Twenty-four (24) hours prior to your procedure STOP any oral GLP medication for diabetes or weight loss.
- You will be on a clear liquid diet all day. This includes breakfast, lunch, and dinner. **Clear liquids include** water, sports drinks, black coffee, tea, soda (light or dark), broth, Jell-O, popsicles, and juice without pulp. **NOTHING RED, ORANGE OR PURPLE. No dairy products. No solid food.** Drink plenty of **CLEAR LIQUIDS** throughout the day. Stay hydrated.
- At **4PM** as outlined below.
 - STEP 1** – Empty DOSE 1 into the mixing container, fill to line with water (at least 16 ounces) and mix with a spoon or place lid on container and shake until completely dissolved.
 - STEP 2** - Drink entire contents of mixing container over 30 minutes.
 - STEP 3 - IMPORTANT:** Rinse mixing container and refill to line with clear liquids and drink entire contents of mixing container over 30 minutes.
- Between **6PM – 8PM** (must be at least 2 hours after Dose 1) continue prep as outlined below.
 - STEP 4** – Empty Dose 2 Pouch A and Dose 2 Pouch B into the mixing container, fill to line with water (at least 16 ounces) and mix with a spoon or place lid on container and shake until completely dissolved.
 - STEP 5** – Drink entire contents of mixing container over 30 minutes.
 - STEP 6 – IMPORTANT:** Rinse mixing container and refill to line with clear liquids and drink entire contents of mixing container over 30 minutes. You may have additional clear liquids during this time.
- A soothing ointment (Desitin, Vaseline) may be applied to the anal area to prevent discomfort and skin breakdown.
- After **12AM** (midnight), you may have nothing by mouth. This includes water, gum, mint. Otherwise, the procedure may be cancelled due to safety precautions.

The Day of Your Procedure:

- Take your regularly scheduled blood pressure, heart, and seizure medications with a sip of water at least two (2) hours before you arrive.
- If you smoke, please **do not smoke** the day your procedure is scheduled.

Medications:

- If you have an inhaler, please bring it with you.

Diabetics:

- Test your blood sugar before coming in for your procedure and bring the reading with you.
- If you take oral medication or insulin, **DO NOT** take it the morning of your procedure.
- Bring your insulin with you.
- Please contact the physician that manages your diabetic care if you have any questions regarding your oral medication or insulin dosages.

Blood Thinners:

- If you are taking blood thinners, such as Coumadin, Warfarin or Plavix, call your prescribing physician and ask if you may stop taking the medication 3-7 days prior to your procedure if you have not received instructions.
- If a biopsy needs to be taken during your procedure and you **HAVE NOT** discontinued for 3-7 days, the procedure may have to be repeated.
- You may continue taking aspirin, ibuprofen and other anti-inflammatory medications.

Bring with you:

- Photo ID, insurance card(s) & completed paperwork forms that were sent to you.
- List of all medications, vitamins, and supplements you are taking (include dosage and last date and time each medication was taken before your arrival).

Financial:

- Be prepared to pay any out of pocket at check-in. Call your insurance company to verify your benefits and estimated responsibility.
- **Wear a loose fitting, short sleeve shirt.**
- **Leave all valuables at home.**

You will receive appointment reminders with the date, time, and location of your procedure. Please make sure your cell phone and email address are on file with our office.

Call our office with any questions.

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Preop Patient Prep

A Checklist from Your GI Crew



DO NOT

- Take diabetic medication
- Take blood thinners by doctor's direction
- Take anything by mouth – gum, candy
- Smoke
- Wear jewelry

DO

- Take blood pressure medication accordingly
- Bring a sweater/blanket
- Wear loose fitting clothing
- Bring entertainment

Please note your ride must stay, and you may have longer wait times.

Parking tips: Willis Knighton North/Albert Bicknell Drive/Day Surgery/GI lab Entrance