

Jeff M. Williams, MD
Board Certified Gastroenterologist



Main Office
3320 Old Jefferson Road
Building 400
Athens, GA 30607
(706) 613-1625 Phone
(706) 613-1629 Fax

SUPREP INSTRUCTIONS

DAY BEFORE PROCEDURE: _____

1. Clear liquid diet all day: Examples - black coffee, tea, soft drinks, apple juice, Gatorade, broth (chicken, beef, or vegetable), Jell-O, popsicles, and hard candy.

****NO SOLID FOODS, NOTHING RED IN COLOR, AND NO MILK PRODUCTS!****

2. At 4:00pm:

- Pour one 6 oz bottle of Suprep liquid into the mixing container.
- Add water to the 16-ounce line on the container and mix.
- Drink all the liquid in the container.
- After completing dose, fill up mixing cup with water or a clear liquid of your choice (2 times) and drink before your next dose at 9 o'clock.

3. At 9:00pm:

- Pour one 6 oz bottle of Suprep liquid into the mixing container.
- Add water to the 16-ounce line on the container and mix.
- Drink all the liquid in the container.
- After completing dose, fill up mixing cup with water or your choice of clear liquid (2 times) and drink before you go to bed.

4. NOTHING TO EAT OR DRINK AFTER MIDNIGHT!

DAY OF PROCEDURE: _____

1. 1 ½ hour prior to arrival or leaving your house: DO ONE FLEET ENEMA (purchase over the counter).

2. Do not eat or drink anything, not even water. Nothing to eat, drink, smoke, or chew (no water, gum, or candy).

3. Special instructions for routine medications:

Blood pressure medicine	Take with a sip of water
Heart medicine	Take with a sip of water
Oral Diabetic medicine	Hold morning of the procedure
Blood thinner (Plavix, Eliquis, Brilinta, Xarelto)	Hold the morning of procedures
Aspirin or aspirin products	Hold 5 days before procedure
Iron preparations	Stop 5 days before procedure
Vitamin E	Stop 5 days before procedure
Insulin	Hold morning of the procedure
Coumadin	Talk to your medical provider

****If your prep is changed, please visit www.athensgastro.com click on For Patients. You will see Procedure Preparation in the middle of the page with a list of bowel prep instructions underneath. Please click the instructions that corresponds to the new prep you were given.**

*** If you are a diabetic,** please check your blood sugar prior to coming in for your procedure. If your blood sugar is low and you are having symptoms, drink 2-4 ounces of apple juice (this may delay your procedure).

***Please pick up your prep from the pharmacy at least 3-5 days before your procedure.** If your procedure is on a Monday, pick up from the pharmacy by the Friday before your procedure to avoid problems with receiving your prep due to cost, insurance, pharmacy availability, etc.

REPORT TO: _____

Arrival Time: _____ **Day:** _____ **Date:** _____

Lavonia
St. Mary's Sacred Heart
367 Clear Creek Drive
Suite 2007
Lavonia, GA 30553

Hartwell
Hartwell Family Practice
229 Athens St.
Hartwell, GA 30643

Madison
Morgan Medical Center
1740 Lions Club
Suite 100
Madison, GA 30650

Commerce
Northridge Specialty Clinic
209 Mercer Place
Commerce, GA 30529