



**SWE**

# Upper Endoscopic Ultrasound (EUS) Prep

**Location: Hospital**

**Please see the Procedure Location Letter**

*Please call to confirm appointment 505-999-1600 EXT 1631*

**NO SHOW FEE:** Any patient who fails to keep their scheduled procedure will be charged a \$50.00 physician fee through our practice. Please note, the hospital may charge a separate fee not related to our practice. Our fee must be paid prior to rescheduling any appointments.

The following instructions are your physician's specific instructions. Please follow the instructions carefully to ensure a successful prep.

**Cancellations:** Must be made 4 business days prior to your scheduled procedure. Any cancellation made less than 4 business days.

PLEASE REVIEW THE INSTRUCTIONS **AT LEAST 1 WEEK PRIOR** TO THE PROCEDURE. USE THESE PREPARATION INSTRUCTIONS **AND NOT ANY INCLUDED WITH THE POLYETHYLENE GLYCOL 3350 OTC or MIRALAX BOTTLE.**

**It is important that you follow these directions carefully and complete the entire preparation to ensure the most effective cleansing.**

- If you are taking any blood thinners **AND** this was **NOT** discussed with your doctor's office at the time of scheduling the procedure, **please call us at least 5 days BEFORE starting the preparation.** These include, but are not limited to, Coumadin- (Warfarin), Plavix- (Clopidogrel), Xarelto- (Rivaroxaban), Pradaxa- (Dabigatran), Eliquis- (Apixaban), Arixtra- (Fondaparinux), Effient- (Prasugrel).
- If you are taking any insulin **AND** this was **NOT** discussed with your doctor's office at the time of scheduling the procedure, **please call your prescribing physician at least 5 days BEFORE** starting the preparation.
- You must **stop any iron supplements** (including in multivitamins) for **7 days BEFORE the procedure.**
- If you are taking any of the following **GLP-1 medications:** Dulaglutide- (Trulicity), Liraglutide- (Saxenda), Exenatide- (Byetta, Bydureon Bcise), Tirzepatide- (Mounjaro, Zepbound), Semaglutide- (Ozempic, Wegovy, Reybelsus), Lixisenatide- (Adlyxin), Albiglutide- (Tanzeum), **you must be on clear liquids ONLY the entire day prior to your scheduled procedure as the prep indicates. Failure to follow this instruction will result in your procedure being cancelled and all cancellation fees being charged.**
- **IF YOU ARE DIABETIC, DO NOT** take your diabetic pills the evening prior or day of the colonoscopy.
- **YOU MUST CONTINUE TO TAKE ALL** your other medications every day prior to the colonoscopy. It is **OK to take them with a small sip of water** on the day of your colonoscopy.
- You can continue aspirin, Tylenol and any NSAIDS (Ibuprofen, Motrin, Aleve, Naproxen, Celebrex, Mobic).
- Please plan to have someone drive you home after the procedure. **You will not be allowed to drive yourself home.** You **cannot take an Uber, Lyft, taxi, or public transportation home** from your procedure without an adult companion.

## 7 days prior to your procedure

### Special Notes:

Let us know if you are on any of the following blood thinners: Plavix, Coumadin, Effient, Pradaxa, Eliquis, Xarelto or other blood thinning medications.

### **STOP:**

Iron supplements or vitamins that contain iron

### **STOP:**

Fish oil, krill oil or shark oil supplements.

## Morning procedure

### **NO SOLID FOODS**

### **NO ALCOHOL**

### **Clear liquids only**

from the time you wake up until after your procedure.

**Take** your medications at least 2 hours prior to your procedure with a small sip of water only.

**Do not** *have anything to eat or drink (no liquids) after midnight the night before your procedure.*

**Do not** skip heart, blood pressure or seizure medications.

## Afternoon procedure

You may have a clear liquid breakfast. **No solid foods, milk or milk products.**

### **Alcohol is not permitted**

### **"CLEAR LIQUIDS" INCLUDE:**

- Strained fruit juice without pulp (apple, white grape, lemonade)
- Water, tea, coffee (without milk or non-dairy creamer)
- Clear broth or chicken, beef or vegetable bouillon
- Plain jello or ice popsicles

**Do not** have anything solid to eat or drink (no liquids) for **8 hours** prior to your procedure.

**No** gum, mints, candy or tobacco products.

## Clear Liquid Diet Details: **NO RED** or **PURPLE**. **NO DAIRY**

### Approve

- Sodas, coffee, tea clear juices, fitness waters.
- Popsicles without pulp.
- Chicken, vegetable, and beef broth, Gelatin.

### Avoid

- No milk/dairy
- No juices with pulp
- No RED or PURPLE



**You will need your current insurance card, picture ID and copayment.**