



# Mountain West Gastroenterology

## MoviPrep Instructions

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|--|---|--|
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| <input type="checkbox"/> Christopher C. Canale, M.D. | <input type="checkbox"/> D. Ravhurn Moore, M.D. |  |

### YOU ARE SCHEDULED FOR A:

- COLONOSCOPY       FLEXIBLE SIG       EGD/COLON       EGD/FLEX

**7 DAYS PRIOR TO YOUR EXAM:** You should stop taking Aspirin or Ginkgo Biloba      **DATE/TIME** \_\_\_\_\_  
**3 DAYS PRIOR TO YOUR EXAM:** You should stop taking Ibuprofen, or any anti-inflammatory products. Tylenol is ok to take. **If you are taking Coumadin, have diabetes, or have been instructed not to stop any medications by your physician, contact our office to determine that dose schedule.** Please continue all other medications as ordered.

### MoviPrep – PM/AM Split Dose

#### **Colon Prep Instructions follow these instructions, not instructions on MoviPrep box**

You may mix the solution ahead of time and refrigerate prior to drinking. The solution once mixed, must be used within 24 hours. Empty 1 pouch A and 1 pouch B into the disposal container. Add lukewarm drinking water to the top line of the container. Mix to dissolve.

**On the day before** your colonoscopy, take clear liquids only. No red liquids, no red, orange or purple dyes! **No solid foods.** At **6PM** start the MoviPrep prep. The MoviPrep container is divided by 4 marks. Every 15 minutes, drink the solution down to the next mark (approx. 8 ounces), until the full liter has been completed. Over the course of the evening, drink a half liter (16 ounces) of additional clear liquid. Mix the second liter of MoviPrep solution and refrigerate.

**The day of your colonoscopy – 4 hours before the procedure (For example if you procedure is at 8 AM, start at 4 AM)** Drink the second liter, following the same process completed the evening before: Every 15 minutes, drink the solution down to the next mark (approx. 8 ounces) until the liter has been completed. Time to complete = 1 hour. Drink additional half liter (16 ounces) of water. **This needs to be completed 3 hours before your procedure. No food or drinks until after colonoscopy. Stop drinking 3 hours before your scheduled arrival time. You may apply zinc oxide, Vaseline or Aloe Wipes to the anal area to prevent irritation.**

### YOUR PROCEDURE IS SCHEDULED AT THE FOLLOWING TIME AND PLACE:

- Mountain West Endoscopy Center, 6360 South 3000 East, Ste 320, SLC, UT 801-944-3166**  
If not contacted by the day before your procedure, call to pre-register.
- Intermountain Medical Center, 5121 South Cottonwood Drive, Murray, UT 801-507-3262**  
Check in at the Eccles Outpatient Building, Level 2. Free Valet Parking Available.  
Call the day before your procedure to pre-register, 801-442-8600 or toll free 888-269-8674
- Davis Hospital & Medical Center, 1600 Antelope Drive, Layton, UT 801-807-7034** Use the ER entrance
- Lakeview Hospital, 630 E Medical Dr, Bountiful, UT 801-299-4657** South entrance, same day surgery registration
- Lakeview Endoscopy Center, 620 E Medical Dr, Suite 200, Bountiful, UT 801-299-6760**  
Call the day before your procedure to pre-register
- LDS Hospital, 8th Avenue & C Street, SLC, UT. ~Dr. Batista Only~ 801-408-1057**  
Entrance West Wing of Hospital. Call the day before your procedure to pre-register, 801-442-8600 or toll free 888-269-8674. Free Valet Parking Available.
- Riverton Hospital, 3741 West 12600 South, Riverton, UT** Riverton Hospital will call you prior to your procedure.

**Please bring someone with you to drive you home, as you will be sedated for the exam.** The doctor will talk to you after the exam and will give you recommendations for diet, medication, follow up care, etc. Wear comfortable clothing; bring your glasses, hearing aids, insurance card(s) and completed information form. For your safety, no jewelry should be worn **anywhere on your body** the day of your procedure. No valuables should be brought to the center. We are not responsible for patient valuables. We will expect payment of co-pays, coinsurance and deductibles at the time of service. If your insurance requires a referral, you should contact your primary care physician to arrange for us to receive the referral prior to the procedure. If you have any questions, please call (801) 944-3141 or additional information can be found on our website [www.mwgi.com](http://www.mwgi.com).

You may receive **THREE** separate bills for this procedure: **1-Physician, 2-Facility, 3-Pathology**

**Questions – Call** \_\_\_\_\_

**MAP ON REVERSE SIDE**