



GASTROENTEROLOGY ASSOCIATES

Consultative Gastroenterology, Hepatology and Gastrointestinal Endoscopy

Flexible Sigmoidoscopy Prep

Patient Name: _____ Date of Flexible Sigmoidoscopy: _____

Arrival Time: _____ which is _____ before your procedure.

Place: Gastroenterology Associates - East
Suite 205W
801 St. Mary's Dr.
(812)477-6103

Deaconess
Main Lobby
Patient Registration
(812)450-3095

Gastroenterology Associates – West
Suite 407
611 Harriet St.
(812)477-6103

St. Mary's
Main Lobby
Patient Registration
(812)485-4806

Preparing for your Flexible Sigmoidoscopy:

You must have clear liquids for breakfast the day of your procedure and may continue clear liquids until two (2) hours before your procedure. (Sample clear liquid diet below)

Take two (2) fleets enemas one right after the other approximately one hour before leaving home for your appointment. (Please note enemas may be purchased over the counter at your local pharmacy.)

You may take your regular morning medication the day of this procedure.

**** Please note: Some insurances do require outpatient precertification. It is your responsibility to notify us if precert is required for your procedure.**

Clear Liquid Diet:
This diet has little food value, is nutritionally inadequate, and should be used for a limited time only.

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|-----------------------------------|--|
| Soups: fat free broth or bouillon | Beverages: gingerale, hot tea, coffee, postum without milk or cream, kool-aid, carbonated beverages, clear fruit juices, Hi-C, Boost Breeze. Please avoid milk, orange and tomato juices and anything that contains a red dye. |
| Desserts: plain gelatin desserts | |

IF YOU HAVE ANY QUESTIONS PLEASE CALL 477-6103

Thank You