Olympia Multi-specialty Clinic Ambulatory Procedure Center 3920 Capital Mall Drive Physician's Pavilion, Suite 300

Capital Medical Center 3900 Capital Mall Drive Emergency Room Area Outpatient Registration

Marshall McCabe III, M.D.

Your procedure is scheduled for \_\_\_

Darien Heap, M.D.

John Kuczynski, M.D.

Michelle Thompson D.O.

Marshall McCabe IV, D.O.

Check in at		Sutab Prep			
5 Days Prior	4 Days Prior	3 Days Prior	2 Days Prior	1 Day Prior	Procedure Day
□ Arrange for a ride □ If taking iron stop the medication now. You may take Tylenol or Tylenol products. □ If taking Coumadin or other blood thinners or need antibiotics prior to dental work, call our office for instructions. □ Go to your pharmacy and pick up your Sutabs.  ■ Begin Low Fiber Diet  No raw fruits or vegetables. No whole wheat or high fiber. No nuts or popcorn or food containing seeds. No Metamucil, Fibercon, bran or bulking agents □ Last chance to cancel appointment or you will be charged a CANCELLATION FEE of \$200.00	☐ If you are diabetic and take insulin, please check with your physician about your diabetic medications for the day before and the day of your procedure.	□Check with your driver and be sure they have read the drivers instructions.	□ Drink at least 8 (8 oz) glasses of water or clear liquids today  No solid Food after midnight.	Begin Clear Liquid Diet Strained fruit juices (no pulp):for example apple, white grape, broth, water, Gatorade, popsicles, Jell-O, coffee, and tea (no milk or cream) NO RED OR PURPLE    Drink at least 8 (8 oz) glasses of water or clear liquids throughout the day.    5 PM	□ You may take only necessary medications with sips of water. □ You may have clear liquids until 2 hours prior to your procedure  □ Open 2nd bottle of 12 tablets. Fill the provided container with 16 ounces of water. Swallow each tablet with a sip of water and drink the entire amount over 15 to 20 minutes. □ Approximately 1 hour after the last tablet is swallowed, fill the provided container a second time with 16 ounces of water and drink the entire amount over 30 minutes. □ 30 minutes later drink another 16 ounces of water over 30 minutes. □ No Gum, hard candy or chewing tobacco.

Due to the use of Sedation, you will be required to arrive with someone who can sign you out and drive you home. \*\*\*We cannot permit you to take a taxi, bus, or drive yourself home.

## **LOW FIBER DIET**

Type of food	OK to consume	Foods to Avoid
Breads, Cereal, Rice and Pasta	<ul> <li>White bread, rolls biscuits, croissants, melba toast</li> <li>Waffles, French toast, and pancakes</li> <li>White rice, noodles, pasta, macaroni and peeled cooked potatoes</li> <li>Plain crackers, saltines</li> <li>Cooked cereals: Farina, cream of rice</li> <li>Cold cereals: Puffed Rice, Rice Krispies, Corn Flakes and Special K</li> </ul>	<ul> <li>Breads or rolls with nuts, seeds or fruit</li> <li>Whole wheat, pumpernickel, rye breads and cornbread</li> <li>Potatoes with skin, brown or wild rice, and kasha (buckwheat)</li> <li>Oatmeal, grits</li> </ul>
Vegetables	Tender cooked and canned vegetables without seeds: carrots, asparagus tips, green beans, pumpkin, spinach and lima beans	<ul> <li>Raw or steamed vegetables</li> <li>Vegetables with seeds: okra, cucumbers, zucchini</li> <li>Sauerkraut</li> <li>Winter squash, peas, broccoli, Brussel sprouts, cabbage, onions, cauliflower, baked beans, peas, hominy and corn</li> </ul>
Fruits	<ul> <li>Strained fruit juice</li> <li>Canned fruit, except pineapple</li> <li>Ripe bananas, melons</li> </ul>	<ul> <li>Prunes and prune juice</li> <li>Raw or dried fruit</li> <li>All berries, figs, dates and raisins, fresh pineapple</li> </ul>
Milk and Dairy products	Milk, plain or flavored yogurts, custard, ice cream, cheese and cottage cheese	Yogurt with nuts or seeds
Meat, Poultry, Fish, Dry Beans, and Eggs	<ul> <li>Well-cooked tender beef, lamb, ham, veal, pork, fish, poultry, ground meats and organ meats</li> <li>Eggs</li> <li>Peanut butter without nuts</li> </ul>	<ul> <li>Tough, fibrous meats with gristle</li> <li>Dry beans, peas or lentils</li> <li>Peanut butter with nuts</li> </ul>
Fats, Snacks, Sweets, condiments, and Beverages	<ul> <li>Margarine, butter, oils, mayonnaise, sour cream and salad dressing</li> <li>Plain gravies</li> <li>Sugar, clear jelly, honey and syrup</li> <li>Spices, cooked herbs, bouillon, broth and soups made with allowed vegetables</li> <li>Coffee, tea, and carbonated drinks</li> <li>Plain cakes and cookies</li> <li>Hard candy</li> <li>Pretzels, plain snack crackers</li> <li>Gelatin, plain puddings, custard, ice cream, sherbet and Popsicles</li> <li>Chocolate</li> </ul>	<ul> <li>Nuts, seeds, and coconut</li> <li>Jam, marmalade, and preserves</li> <li>Pickles, olives, relish and horseradish</li> <li>All desserts containing nuts, seeds, dried fruit, coconut or made from whole grains or bran</li> <li>Candy made with nuts or seeds</li> <li>Popcorn, snack crackers with seeds</li> </ul>