

**MAGNESIUM CITRATE
PREPARATION FOR ILEOSCOPY**

Please read these instructions carefully and call the office if you have any questions
Idaho Gastroenterology Associates, Boise office 343-6458, Meridian office 887-3724

PURCHASE AT THE PHARMACY:

1 Bottle of Magnesium Citrate (10 ounces)

FIVE DAYS PRIOR TO YOUR PROCEDURE:

- All aspirin and anti-inflammatory medications including ibuprofen, motrin, aleve, naproxyn, naprosyn, sulindac, piroxicam, feldene, indomethacin, diclofenac, and voltaren **are to be continued**. Tylenol (acetaminophen) is also safe to continue.
- If you are taking coumadin, plavix (clopidogrel) or other blood thinners please contact our office to determine if and when you need to stop these medications
- Stop all fiber supplements including Metamucil, Citrucel, Benefiber, FiberChoice and flax seeds
- If you are diabetic and use insulin, please contact our office for insulin instructions
- PLEASE call our office if you have any questions about which medications you should or should not take

ONE DAY PRIOR TO YOUR PROCEDURE:

- Take only clear liquids by mouth. This includes clear juices (apple, grape, strained orange, strained lemonade), tea, coffee (no milk or creamer), soft drinks, sports drinks (Gatorade, Powerade), clear broth or bouillon, jello, Popsicles
- Avoid red drinks, red jello, and dairy products
- Consume large amounts of fluids to avoid hunger and dehydration
- Drink 1 bottle of Magnesium Citrate between 5 p.m. and 7 p.m. This is a laxative preparation designed to clean out your small bowel
- You may continue consuming clear liquids until 4 hours prior to your procedure

THE DAY OF THE PROCEDURE:

- DO NOT drink or eat anything by mouth for 4 hours prior to your procedure except medications (see below)
- Take your usual prescribed medications with small sips of water. If you are on anti-inflammatory medications or blood thinners please see instructions above.

Please bring a list of your current medications and correct dosage to your appointment

NO DRIVING – Because of the sedatives that you will be given you cannot drive for the remainder of the day. You may use a taxi after the procedure. You must have someone present to drive you home after the procedure or we may cancel your exam.

You are scheduled with Dr. _____ Date: _____ Check in time: _____

_____ Boise Endoscopy Center, 425 West Bannock Street, Boise
_____ Meridian Endoscopy Center, 2235 Gala Street, Meridian
_____ St. Luke's Boise Regional Medical Center (Admitting), 190 E. Bannock St., Boise-Hospital
_____ St. Luke's Meridian Regional Medical Center, 520 S. Eagle Rd., Meridian-Hospital

Please check with your insurance company regarding pre-certification. Bring all insurance cards with you.