

# DIGESTIVE DISEASE SPECIALISTS, INC.

Midwest City Office  
**Larry A. Bookman, MD**  
8121 National Avenue, Suite 303  
Midwest City OK 73110  
Ph: (405) 737-4464 Fax: (405) 737-7674

Name: \_\_\_\_\_

Date of Procedure: \_\_\_\_\_

Arrival Time: \_\_\_\_\_

Procedure Time: \_\_\_\_\_

## Procedure Location:

**1 Ambulatory Endoscopy Center / North**  
Building D, 3366 NW Expressway, Ste. 400  
Oklahoma City, OK  
*Check in at ADMISSIONS*

**2 Ambulatory Endoscopy Center / South**  
4201 South Western  
Oklahoma City, OK  
*Check in at ADMISSIONS*

**3 Midwest Regional  
Medical Center**  
2825 Parklawn Drive  
Midwest City, OK  
*Check in at DAY SURGERY*

**4 Edmond Medical Center**  
One South Bryant  
Edmond, OK  
*Check in at AMBULATORY CARE*

**5 St. Anthony Hospital  
Outpatient Center**  
1000 North Lee  
Oklahoma City, OK  
*Check in at Main Admitting*

## **Moviprep Instructions for Colonoscopy & EGD**

You will need to purchase enclosed prescription for MOVIPREP from your pharmacy prior to preparing for your procedure. FOLLOW THE FOLLOWING INSTRUCTIONS FOR MOVIPREP.

If you are taking **COUMADIN, PLAVIX OR ASPIRIN PRODUCTS**, you will need to **STOP** them three (3) days prior to your procedure.

If you are a diabetic and you are on oral medication, you will not take medication the day before or the morning of your procedure, but you will need to bring your medication with you.

Start a **CLEAR LIQUID DIET** on \_\_\_\_\_. You will remain on a clear liquid diet for the entire day. (**SEE ENCLOSED**) If your procedure is scheduled in the afternoon you may have a clear liquid breakfast before 8:00 a.m.

**You will need someone to drive you home after your procedure.** The doctor will not be able to sedate you if someone is not at the facility with you.

**\*\*\*\*IF YOU ARE A NEW PATIENT OR IF YOU HAVEN'T BEEN SEEN BY YOUR PHYSICIAN IN 1 YEAR, PLEASE DOWNLOAD THE FORMS FROM THE FOLLOING LINK: [Pre-Registration Forms](#). PLEASE FILL OUT THESE FORMS AND BRING THEM WITH YOU TO YOUR PROCEDURE. \*\*\*\***

If you have any questions or need more information, please feel free to contact my office at: (405)737-4464.

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## **Moviprep Instructions**

Your doctor will need a clear view of your colon, it is essential that the colon be completely free of stool. Therefore you must complete a bowel preparation regimen as follows:

**\*\*\*\*Once you have started your prep, remain near toilet facilities\*\*\*\***

- 1) Beginning the day prior to your procedure you will be restricted to a clear liquid diet. Clear liquids consist of water, coffee, tea, sodas, fruit juices (no orange juice), broth, Jell-O, (no red or purple), and popsicles.  
**No alcohol, solid food, milk, or cream.**
  
- 2) At \_\_\_\_\_ AM PM on \_\_\_\_\_ mix packets A and B in the 1 liter container. Drink 8oz of this solution every 15 minutes until gone.
  
- 3) After drinking this portion of your prep drink 16 oz of clear liquids of your choice.
  
- 4) At \_\_\_\_\_ AM PM on \_\_\_\_\_. Mix the second set of packets A and B into the 1 liter container. Drink 8oz of this solution every 15 minutes until gone
  
- 5) After drinking the final portion of your prep, drink 16 oz of clear liquids of your choice. Have nothing to drink after completing the final 16oz of clear liquids.

**\*\*\*If you experience problems during the bowel prep, please call the office at 737-4464. There is always a physician on-call after hours. \*\*\***

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## **Clear Liquid Diet**

### **Beverages**

Tea or coffee (no cream or milk)  
White cranapple, apple, white grape, or white cranberry juice  
Fruit flavored drinks  
Carbonated drinks

### **Desserts**

Jell-O  
Popsicles

### **Soups**

Fat-free chicken or beef bouillon  
Fat-free chicken or beef broth

### **Miscellaneous**

Salt  
Sugar, syrup, jelly, honey  
Plain hard candy in small amounts

## **NOTHING RED OR PURPLE**