SIGMOIDOSCOPY INSTRUCTIONS

Date of Pro	cedure:			
Location:	Pt. Jefferson Office 331-7200	Mather 476-2715		St. Catherine 862-3000
You will nee local pharma	ed to purchase (2) Fleet energecy.	nas (green and w	hite box, water o	enema) at your
** Use the fi	erst enema (2) hours prior to	your procedure	time.	
**Use the se	cond enema (1) hour prior t	o procedure time	e.	
***You may	adjust the time based on tra	aveling time.		

DO NOT EAT OR DRINK ANYTHING TWO HOURS PRIOR TO YOUR SCHEDULED APPOINTMENT.

We will call you up to one week prior to your procedure for your appointment time.

If you have any questions, please call the office at 331-7200, Ext. 236, Kathleen.