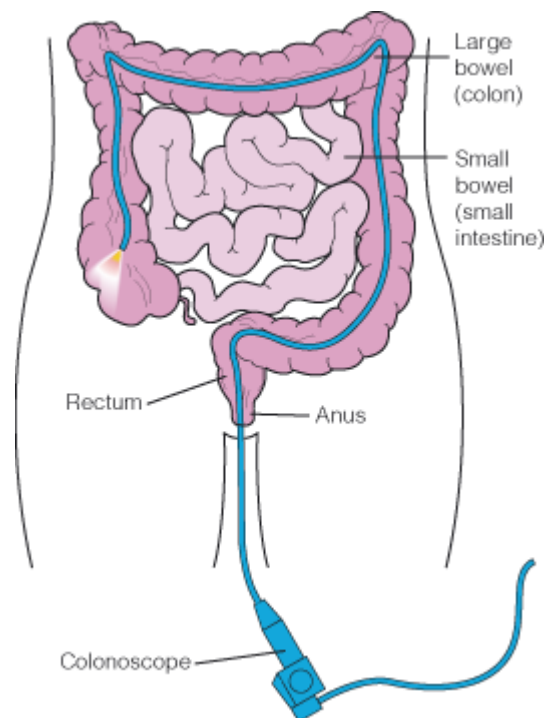




Patient Information Having a Colonoscopy

What is a colonoscopy?

A colonoscopy is an examination of the whole of the large bowel (colon) using a flexible telescope with a camera within its tip (endoscope). By examining the bowel the cause of your symptoms may be found and sometimes we are able to treat them. The test usually takes between 15 and 45 minutes.



What are the alternatives?

A barium enema or CT Pneumocolon can be used instead of a colonoscopy. It does not provide such detailed pictures of the lining of the bowel and treatment or biopsies cannot be performed at the same time. Both of these tests will require a limited camera test (Flexible Sigmoidoscopy) of the rectum first. You may still need a colonoscopy.

What are the risks?

The major risks and complications include damage to the lining of the bowel, a tear in the bowel (perforation) which may require an operation and bleeding. It is also important to know that there is a small chance despite having a colonoscopy serious problems (including cancer) may not be picked up. Incomplete colonoscopy occurs if the test is abandoned due to technical difficulty or because it was causing you distress. You may then require an alternative procedure to examine your bowel.

How do I prepare for the procedure?

You will have received some bowel preparation (laxatives) to take. Please follow **Eastwood's** detailed written instructions for taking the laxatives. Please remember to drink plenty of fluids throughout to prevent dehydration.



It is important to re-read your information leaflets the week before your test as your diet will need to be restricted.

If you are on **blood thinning tablets i.e. Warfarin or Clopidogrel please continue with the medication and inform the Endoscopy Centre .**

If you have diabetes please contact your Diabetic Nurse or Doctor for instructions regarding diabetic medication.

What should I expect?

On arrival in the Endoscopy department please give your name to the receptionist.

Prior to your test you will be seen by a qualified nurse who will go through the pre-assessment with you. A doctor/nurse will speak to you in a private area of the endoscopy department, before your procedure this will give you the opportunity to ask any questions.

Before the test, you will be asked to change into a hospital gown and a cannula (needle) will be put into your arm or hand, if required.

Consent

Your written consent will be needed prior to the test and it is important that you read the information about the procedure **BEFORE** coming on the day of the test. This will ensure that you have had time to understand the test. The Endoscopist will go through the procedure with you including the risks and you will be given the time to ask any questions.

If you provide written consent then change your mind at any time, even during the procedure, you are entitled withdraw your consent.

What happens in the procedure room?

You will be asked to confirm your name, date of birth and any allergies.

Once in the procedure room the nurses will do all they can to make you feel comfortable.

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You will be asked to lie on your left-hand side, on a trolley and a monitor will be attached to your finger to record your pulse rate and level of oxygen – your blood pressure will also be monitored. A pair of small prongs will be inserted into your nostrils to supply oxygen throughout the procedure. You will be given an injection in the needle in your arm or hand of sedation and painkiller to make you relaxed. If you are having Entonox then the nurse will explain to you how to use it. There is a nurse at your side at all times to reassure you.

The endoscopist may examine your rectum with his/her finger prior to passing the camera into your bowel. The endoscope will be gently inserted into your bowel and air will be slowly introduced into the bowel to allow the tube to passed along more easily and enable the endoscopist to get the best possible views of the bowel lining. There may be some mild to moderate discomfort (wind like pain).This occurs as the scope is introduced and the bowel inflated with air.

You may also get the sensation of wanting to go to the toilet, but as the bowel is empty, this will not happen. You may pass some wind, this may be embarrassing for you, but the staff do understand what is causing it and it will relieve discomfort.

The endoscopist may take some biopsies (tissue samples) during the procedure but this will not cause you any pain.



What happens after the procedure?

You will be transferred to our recovery and will rest quietly on a trolley cared for by the nurses until the main effects of the sedation have worn off. You may feel a little bloated but this will settle quickly. Your blood pressure, pulse and oxygen levels will continue to be monitored for a short while. You will then get dressed, your needle will be removed and you will be able to have a hot or cold drink and biscuits. The doctor / nurse will explain the results of the procedure and give you written discharge information. You will need to have a responsible adult collect you and stay with you for 24 hours because of the lasting effects of the sedation.

If you have Entonox you should be able to go home about 30 minutes after the procedure if you don't feel dizzy or nauseous.

If biopsies were taken during your procedure or if we refer you for another investigation to your local hospital then you will receive a letter from the Eastwood Endoscopy Centre informing you of the results.

Who do I contact if I have any questions or concerns?

Please contact the Endoscopy Unit on 01702 524984

Opening hours Monday – Saturday 8am to 6pm excluding Sundays and Bank Holidays

During these hours a clinician or nurse will be available to speak to you.