



PATIENT INFORMATION

Colonoscopy Explained

Endoscopy Unit

This information is for patients who are having a colonoscopy. It tells you what is involved and any significant risks which may occur. The test itself will last about 30-40 minutes and you will normally be able to go home approximately 2 hours later.

Patients Frequently Asked Questions

What is a colonoscopy?

A colonoscopy is an examination of your large bowel (colon). A thin, highly flexible tube (colonoscope) is passed gently into your back passage (anus) and manoeuvred around the bowel. This will give the doctor a clear detailed image of your bowel.

What does the examination involve?

- ❖ The endoscopist doing the examination will discuss it with you and ask you to sign a consent form confirming that you understand and agree to go ahead with it. You are free to ask for more information at any time.
- ❖ You will need to undress and wear a hospital gown along with a dressing gown. You will be offered disposable shorts to wear.
- ❖ You will receive a sedative and an analgesic injection for the test and you may be offered Entonox (gas and air). Then with you lying on your left hand side the endoscopist will gently insert the endoscope into your anus and up into the bowel. **This test may cause some discomfort** due to the bowel being gently inflated to expand it so that the lining can be seen clearly. We now use carbon dioxide (CO₂) instead of air to do this, and this has proved to be much more comfortable.

- ❖ A **biopsy** (a small sample of the bowel lining) may be taken during the colonoscopy to be sent off to the laboratory for further testing. You will not feel this being done.
- ❖ The nurse will be with you during your test.
- ❖ At the end of the test the colonoscope is easily removed.

How do I prepare for the test?

If you are diabetic or on Warfarin / Clopidogrel please inform the Endoscopy Unit on (01803) 654864 / 655955.

Jewellery and decorative piercing should ideally be removed. If you cannot remove your jewellery, it can be covered with tape, but please inform us when you see the nurse on the day of your procedure. Please inform us also of any coloured tattoos.

It is important for this test that your bowel is empty. In order to achieve this please read and follow the instructions below:

5 days before

If you take iron tablets or medications to control diarrhoea please stop taking them until after your examination. You should continue to take any other medication.

3 days before

Follow the advice on this form, continue to eat but avoid high-fibre foods and choose low-fibre alternatives.

2 days before

Continue your low-fibre diet. Drink plenty of fluids.

- ❖ For **morning** appointments: Take the full bottle of senna at **6pm** with a drink of water.

1 day before

- ❖ For **morning** appointments: Take the first sachet of Picolax at **8am** and the second at **4pm**.
- ❖ For **afternoon** appointments: Take the full bottle of senna with a drink of water at **8am** and then take the first sachet of picolax at **4pm (you will take your second sachet tomorrow morning)**.

Stir the contents of the sachet into a cup or glass of cold water. Once dissolved drink followed by a litre of clear fluid over the next 2 hours. Following this you will experience a period of frequent bowel actions and diarrhoea. You may find that applying a small amount of Vaseline / Sudocreme to your back passage (anus), prevents discomfort during the bowel preparation.

Stop all solid food **24 hours** prior to your appointment time.

For example, if your appointment is at 10.30am stop eating at 10.30am today.

You may continue to take fluids right up until your appointment time. Please avoid drinks containing milk or cream. Soups are allowed as long as they don't contain thickening agents.

Suitable clear fluids

Black tea / coffee	Apple juice	Honey & lemon
Lucozade	Cranberry/pomegranate	Oxo/Marmite/Bovril
Fruit / herbal teas	Grape juice (white)	Beer/white wine/spirits (in moderation as you are not eating)
All fizzy drinks	All squashes	

The day of your colonoscopy

For **afternoon** appointments: Take the second sachet of PicoLax at **8am**.

It is essential that you drink plenty of fluids (water / clear sugary drinks, eg lemonade) to avoid becoming dehydrated, right up until your appointment time. You are welcome to bring a bottle of soft drink to your appointment.

You may find this information helpful in choosing your diet during your preparation for your bowel examination:

Choose	Avoid
Cereals: Cornflakes, Rice Crispies, Ricicles, Sugar Puffs, Coco Pops	Wheat Bran, All Bran, Weetabix, Shredded Wheat, Oat Bran, Branflakes, Wheatflakes, Muesli, Ready Brek, Porridge
White bread (you may use butter / margarine)	Wholemeal, high-fibre white, soft grain or granary bread, oatbread
White pasta, white rice	Wholemeal pasta, brown rice
White flour	Wholemeal or granary flour, wheatgerm
Potatoes (no skin)	Fruit and vegetables
Savouries: Chicken, turkey, fish, cheese and eggs	All red meats
Puddings, pastries, cakes, etc: Milk puddings, mousse, jelly (not red), sponge cakes, madeira cake, Rich Tea, Marie or wafer biscuits	Those containing wholemeal flour, oatmeal, nuts, dried fruit, etc. Fruit cake, Ryvita, Digestives or Hobnob biscuits
Preserve and sweets: Sugar, jelly jam, jelly marmalade, honey, syrup, lemon curd. Fruit Pastilles, Wine Gums, Jelly Babies	Jam or marmalade with pips, skins and seeds, sweets and chocolates containing nuts and / fruit Muesli bars

Soups: Clear or sieved soups	Chunky vegetable, lentil or bean soups.
Miscellaneous: Salt, pepper, vinegar, mustard, gelatine, salad cream, mayonnaise	Nuts, Quorn, fresh ground peppercorns, houmous

What will happen when I arrive?

An endoscopy nurse will care for you from your arrival through to your discharge from the Unit. The nurse will explain the test to you and check your details including blood pressure and pulse.

What happens after the examination?

- ❖ You will be able to get dressed straight after the test.
- ❖ Your nurse will speak to you after the test but biopsy results will be reviewed within a few days. Please call your surgery for your results in approximately 3 weeks.
- ❖ You will be offered some refreshment and be discharged home as soon as you are ready to go.
- ❖ You will be given a copy of your report, which we will also send on to your GP.

How will I feel when I go home?

- ❖ You may have some discomfort for the rest of the day in the form of wind, bloating, and may have a little bleeding but this will pass.
- ❖ You may eat and drink as normal when you leave the Unit.

About sedation

A small plastic tube (cannula) will be placed in a vein in your arm in order to give you a sedative and a painkiller. This will be done just before the test starts.

Benefits

You will feel relaxed during the test and may or may not remember much about it.

Drawbacks

Sedation takes up to 24 hours to wear off and during this time you are **not safe to:**

- ❖ **Drive a vehicle or operate machinery**
- ❖ **Drink alcohol**
- ❖ **Sign legal documents or make important decisions**

It is not suitable for everybody as it can have adverse effects.

It is very important that you are not alone during the 12 hour recovery period, and that you do not use public transport, but are collected from the unit.

Are there any risks?

This examination is very safe, however, there is a small risk of:

- ❖ **Peritonitis:** It is possible to damage the large bowel lining by making a small hole. This allows bowel contents to escape so causing inflammation in the abdomen (peritonitis). An operation is nearly always required to repair the hole. The risk of this happening is approx 1 in every 1000 tests.
- ❖ **Bleeding:** If a polyp is found, this will need to be removed as some polyps can become cancerous if not treated. Removing them eliminates this risk. Polyps are removed using a small electrical current to burn through the base and separate it from the bowel wall.

When polyps are removed, there is a small risk of bleeding, approximately 1 in every 150. Bleeding can occur up to 7-10 days after polyp removal. Bleeding often settles without treatment, but if it continues it may be necessary to return to the hospital for reassessment.

Please speak to the endoscopist before the examination if you have any worries about these risks.

Useful contacts

If you have any further questions or concerns, please contact:

The Endoscopy Unit
☎ **Tel (01803) 654864/655955**
(8.00am - 5.00 pm, Monday to Friday)

If you have any urgent concerns outside of these hours
please phone the switchboard
☎ **Tel (01803) 614567**
and ask for bleep no **110**

Colonoscopy Explained/Gastroenterology/SDHCNHSFT/10.09/review date 10.11