COLONOSCOPY

INFORMATION SHEET & INSTRUCTIONS

SHAMINDRA DIREKZE
GASTROENTEROLOGIST & HEPATOLOGIST

WHAT IS A COLONOSCOPY ?

Procedure Code 455

A Colonoscopy is a procedure that allows the Consultant to look at the lining of the large bowel (Colon). It allows the Consultant to check the bowel for any abnormalities such as inflammation, polyps etc. A long flexible tube/scope, with a light and a camera inside, is passed through the rectum into the bowel.

The procedure can take 20-30 minutes. A biopsy may be taken, if indicated. This will cause you no pain. Removing polyps increases the risk of the procedure but reduces the risk of bowel cancer in the years ahead. Removing polyps may lengthen the time of the procedure.

Risks

Complications of this procedure are rare, however, include perforation (tear) haemorrhage (bleeding) or reactions to medications. These complications may require urgent medical treatment or even surgical intervention (operation) and can carry risk to life and health. It is important to remember that, although a colonoscopy is the best test for detecting bowel polyps and cancer, no test is perfect and even with complete examination, serious disease can be missed in up to 5% of cases.

MEDICATIONS

Continue all prescribed medications.
If you are taking anticoagulants such as **Warfarin, Plavix, Aspirin, Eliquis, Edoxaban or Pradaxa**, please advise our office.
Iron tablets should be stopped two weeks before examination.
Please let us know if you are diabetic.

SEDATION:

You will be sedated for this procedure, but you will be conscious. It will not be a general anaesthetic. Please arrange for a family member or friend to collect you (4-5 hours post admission), as you will not be allowed to drive for 24 hours following the procedure, or to leave the hospital unaccompanied. You should be accompanied until the following morning.

SPECIAL REQUREMENTS:

If you use a wheelchair or have a physical or any other disability, please contact us to let us know in advance so that we can ensure you receive the appropriate supports.

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PREPARATION FOR YOUR COLONOSCOPY

FASTING INSTRUCTIONS:

No food from 1.00pm the day before your colonoscopy.

You may drink water, tea, coffee (NO MILK), herbal and fruit teas (no red colourants), soft drinks and juices (without bits and no red colourants), clear soup (Bovril, Consomme) up to four hours prior to admission.

ONE WEEK BEFORE YOUR COLONOSCOPY:

PLEASE NOTE: It is advised that, for the week before your procedure, you do not ingest iron supplements, multivitamins, seeds, tomatoes, corn, beetroot, Ribena, blackcurrant or raspberry cordial.

TWO DAYS BEFORE YOUR COLONOSCOPY:

Drink plenty of fluids, try to drink 2 litres (8 to 10 glasses) in a day.

Stop taking regular laxatives for constipation or any medication for diarrhoea, unless directed..

Have smaller meals (see table)

Avoid foods containg fibre (fruit, vegetables, pulses and grains, wholemeal bread and cereals.

ON THE DAY BEFORE YOUR COLONOSCOPY:

Eat low fibre breakfast and lunch (see table on following page).

Drink plenty of water to prevent dehydration. This will help the prep work well.

Glucose tablets can be sucked through the day until around 8.00 p.m.

Start the laxative prep (Moviprep / Plenvu / KleanPrep)

Please carefully follow the fasting instructions and instructions for taking the Prep, Prescription and instructions attached.

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You can eat or drink Low Fibre Foods :	**Do not eat or drink High Fibre Foods :**
Lean ham, veal, pork, shellfish, poultry White rice, noodles, white pasta, white bread or toast Cereals – cornflakes, crisped rice cereals, not bran Rich tea or other plain biscuits Eggs (boiled or poached) Butter, cheese, milk, cream, cottage cheese Potatoes without skins (boiled, mashed, baked) Soya or tofu Sugar or sweeteners Clear jelly Water, cordial, fizzy drinks, clear soup (no red colourants)	Fruit, including fresh, dried and canned Red meat, sausages, rashers Brown rice or brown pasta High fibre multi seeded bread High fibre breakfast cereals (including porridge oats) Baked beans, pulses or lentils Vegetables Nuts or seeds Roasted or deep fried potatoes Crisps Alcohol Jam Red Jelly Red cordials or fruit juice

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THE PROCEDURE

A nurse will be will be with you at all times.

You will be asked to lie on your left side.

An intravenous injection (sedation and pain-relieving medication) is given through the vein to make you feel relaxed and sleepy, but not unconscious.

A monitor will be placed on your finger to assess heart rate and oxygen levels. Your blood pressure will be measured every few minutes using a blood pressure cuff on your arm.

The doctor will pass the scope through your rectum and into your bowel.

Air will be passed into the bowel via the scope which can cause some cramping but this usually passes quickly.

FOLLOWING THE EXAMINATION

You will be observed in the day ward until the effects of the sedation have worn off. The canula will be removed from your arm before you go home.

If you have not received sedation, you may go home as soon as follow up instructions have been given, and resume all normal activities immediately.

Further tests may be requested by the Consultant. These tests may be completed on the day of your examination or at a future appointment

When you have sufficiently recovered you will receive a light snack.

DISCHARGE INFORMATION

You may experience minor discomfort, such as cramps or bloating, post procedure. These symptoms normally settle within 24 hours.

Your nurse will advise you of further instructions or follow up pre-discharge.

Your doctor may prescribe pain killers following your procedure, if required.

If you have had sedation, you must not you must not drink alcohol or drive for 24 hours

IMPORTANT:

Seek medical attention from the Day Unit immediately if :

- you begin to vomit, have black bowel motions, or rectal bleeding
- you develop severe nausea, vomiting or abdominal pain