NHS Forth Valley
Endoscopy Department

Colonoscopy

Information for Patients
& Consent Form
Introduction

It has been found necessary for you to undergo procedure colonoscopy to try to find the reason for your symptoms or as part of Bowel Cancer Screening Programme.

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 (rectum) and manoeuvred around the bowel. This will give the Endoscopist a clear image of your bowel.

Preparing for the investigation

Consent

This booklet contains all the information you need to enable you to give your informed consent. The consent form is a legal document. Once you have read and understood all the information, including the potential risks/complications, and you agree to undergo the procedure, please sign and date the consent form.

You are free to ask for more information at any time. If you have further questions, either speak to your GP or bring the information booklet along with the unsigned consent form to your appointment where you can speak to the Endoscopist before the procedure.

If you have read all the information and do not wish to go ahead with the procedure please discuss with your GP and inform us as soon as possible so that the appointment is not wasted.
If you have a Power of Attorney appointed for medical reasons, an up-to-date copy of this document should be brought in on the day of the procedure. The person who holds ‘Power of Attorney for Medical Reasons’ must be contactable at the time of the appointment to discuss reasons for the procedure and the potential risks. We will need their telephone number if they are not accompanying you.

**Sedation and comfort**

The colonoscopy involves manoeuvring the colonoscope around the entire length of your large bowel. Air is gently passed into the bowel. There are some bends that naturally occur in the bowel and negotiating these may be uncomfortable for a short period of time but the sedation and analgesia will minimise any discomfort. The sedation and painkiller will be administered into a vein in your hand or arm just before the procedure which will make you slightly drowsy and relaxed but not unconscious. A nurse will stay with you during your test to monitor you and record your general condition. Oxygen will be given to you through a nasal sponge.

We may take some specimens from the lining of the bowel for examination. If there are small polyps or growths found we may try to remove them or take a biopsy. This is a painless sample taken from the lining of the bowel for examination in the laboratory.

**Medications**

Routine medication should be taken as usual but do not take any medication within an hour before or after your Bowel Preparation (see enclosed “Moviprep/Picolax/Fleet”), as the effects of your medications may be reduced.

It would be helpful if you could bring a list of all medications with you on day of your appointment. If you have diabetes, please bring these medications with you.

**Important - Specific medications:**

- **Diabetic medicines:** If you take Insulin you should preferably have a morning appointment, please telephone the Endoscopy Secretaries if you need to change your appointment on: 01324 566630 or 01324 566340. For other information relating to your diabetes please read enclosed leaflet or telephone the Diabetes Team on 01324 566929.
• Iron preparations: you must stop these one week prior to your appointment.

• Stool bulking agents: eg. Fybogel or Regulan, you must stop these one week prior to taking the bowel preparation.

• Warfarin and Rivaroxiban: continue to take as prescribed unless you have been told otherwise.

• Clopidogrel (Plavix): continue to take as prescribed unless you have been told otherwise.

• Oral Contraceptives: You should use additional precautions during the week following administration of the “Moviprep/Fleet/Picolax” as it can reduce the effectiveness of the “Pill”.

• Essential Medications (ie.Epilepsy medications) should be taken at least an hour before or after the bowel preparation as the effects of your medication may be reduced. Patients with unstable epilepsy may require admission for bowel prep. Please discuss this with your GP.

• If you take Hydrocortisone for adrenal insufficiency (Addisons disease) or because of a pituitary problem, please let us know as you will need an injection just before your procedure. Please double your usual dose of hydrocortisone the day before, on the day of your procedure and the day after (3 days in total).

How long will I be in the Endoscopy Department?

This largely depends on whether you have sedation and how busy the department is. Some patients opt not to have sedation so that they can drive home, but normally some light sedation and/or painkiller is required. Your appointment time is the start time for the process and will not usually be the time you are taken for your procedure. The department looks after emergencies and these can take priority over outpatient lists. The test itself takes 30-45 minutes but you will be in the department for 2-3 hours. It is difficult to predict how long each procedure will take, so we apologise if there is any delay before your procedure is carried out. Some of your time will be before the procedure so you may wish to bring something to read.

• We recommend you do not bring any valuable items with you to the hospital.
You will need to clean out your bowel before the procedure by drinking the enclosed Bowel Preparation “Moviprep/Picolax or Fleet”, starting the day before your test - See enclosed Bowel Prep instructions. Please discuss with your GP BEFORE starting your bowel preparation if you have serious heart, kidney or liver disorders. He/she will need to check your up-to-date kidney function results before you start your bowel preparation.

Please inform us before your appointment, if you think you may be pregnant.

If you have an implanted electronic device such as a Cardiac Pacemaker or Implantable Cardiac Defibrillator (ICD), please inform the Endoscopy Unit as we may need to contact the cardiac devices clinic to check your device after the procedure.

What will happen in the Endoscopy Department?

An Endoscopy Nurse will explain the test to you, take your blood pressure and pulse, give you a gown to wear and rest you upon a procedure trolley. He/she will ensure that you understand the procedure and confirm consent. You will have a small cannula inserted into the back of your hand or arm to enable us to give you sedation and a painkiller for the procedure.

Once the Endoscopist is ready for you, you will be wheeled upon the trolley to the procedure room. At this point you will meet the Endoscopist who will give you the sedation and painkiller into your cannula, this will make you slightly drowsy and relaxed but not unconscious. The procedure will be performed by or under the direct supervision of a trained Doctor or Nurse Endoscopist.

With you lying on your left hand side, the Endoscopist will gently insert the endoscope into your bottom and up into the bowel.

A biopsy (a small sample of the bowel lining) may be taken during the procedure to be sent off to the laboratory for further testing. This is not painful.

We may try to remove polyps (small growths), as it is thought that polyps can turn cancerous over many years if left in the bowel. This can be done painlessly at the time of Colonoscopy (unless your blood clotting is abnormal).
Following the procedure you will have your blood pressure, pulse and oxygen levels monitored until within normal limits. This can normally take up to 1 hour but occasionally can take longer. Once recovered, you will be given tea/coffee and biscuits before discharge. Rarely, you may be kept for overnight admission.

You will need someone to collect you, drive you home and take care of you for at least 4 hours. Mobiles often do not work within the hospital, if you bring a contact number for your driver, the nurses will telephone them when you are ready for discharge. Alternatively they can wait in the waiting room until you are ready.

After effects of the procedure

You may feel bloated and a bit uncomfortable due to air in your bowel after the procedure. This usually settles after 1-2 days. You may feel drowsy later on with intermittent lapses of memory. Remember - If you live alone, try to arrange for someone to stay with you preferably overnight, or if possible arrange to stay with family or a friend for at least 4 hours. You must be collected by a responsible adult, as you would be unable to drive for 24 hours after the sedation, go to work or sign any legally binding documents.

Potential risks/complications

Colonoscopy is a relatively safe procedure however there is a small risk of complications.

- **Sedation**: Very occasionally patients can react badly to the sedative and/or painkiller. During the procedure we will monitor your breathing, heart rate and oxygen levels by placing a probe on your finger or earlobe. Drugs to counteract any side effects are always available in the procedure room but rarely required. You will also be given some extra oxygen via a nasal sponge.

- **Bleeding**: Following a biopsy (a small sample taken) or removal of a polyp, bleeding is rare but the risks are increased if you take anti-coagulants eg. Warfarin, Rivaroxaban, Clopidogrel (Plavix). If excessive bleeding occurs after polypectomy, we may need to admit you to hospital for a few days for observation.
Perforation: Occurs in approximately 1:1,000 procedures however, if polypectomy is performed the risk increases to 1:500. This will require a stay in hospital and may require an operation to repair the problem and as with any other surgical procedure, there can be a risk to life.

Your need for this procedure should be weighed up against the possible risks and complications. Prior to the procedure, discussion with your GP can help you with this decision.

**Side effects of bowel preparation**

See separate instruction leaflet

**Very common side effects:** abdominal pain, nausea, abdominal distension, anal discomfort, malaise, vomiting, dyspepsia, hunger, thirst, sleep disorder, headache, dizziness and rigors - keep drinking clear fluids.

**Common side effects:** If you experience symptoms such as severe bloating, abdominal distension, abdominal pain, vomiting or any other reaction which makes it difficult to continue the preparation, you may slow down or temporarily stop consuming the bowel preparation. If you are still unable to continue the bowel preparation please contact Endoscopy Unit 01324 567518.

**Rare side effects of taking bowel prep:** If you develop any symptoms such as swollen ankles, shortness of breath, increasing fatigue, this may indicate fluid problems, either by dehydration or fluid overload. Stop the bowel prep and get your GP to check your bloods. Allergic reactions such as rash, itchy, redness and swelling should be reported to GP or Out-of-Hours Doctors. Tel: 111.

**What are the alternatives to colonoscopy?**

All procedures involved in examination of the colon involve taking bowel prep to clear out the bowel. In a small number of cases a Barium Enema X-ray could be performed. This involves placing a tube into the rectum and filling the bowel with a contrast fluid which shows up on x-ray. However, this also has potential risks and involves exposure to radiation. It is also less accurate at detecting some conditions and do not allow tissue samples to be taken. If abnormalities are found with Barium Enema, a subsequent colonoscopy is often necessary to confirm the diagnosis. For a Barium Enema, you need to be able to climb up onto the x-ray table and turn without assistance whilst the radiographer takes the X-Rays.
**Further information**

If you are having an Upper Endoscopy to look at your gullet, stomach and duodenum on the same day?: Please have only sips of water for the 2 hours before your appointment time, as your stomach needs to be empty.

**Contact Us:** If you have any questions with regards to the above, please contact us at: Endoscopy Unit 01324 567518.

**To change the appointment:** Endoscopy Secretaries: 01324 566630 or 01324 566340.

Approved by Forth Valley Endoscopy Users Group and Patient Representative Group Jan 2015.

**If you can’t go let us know!**

Every month around 2,000 people across Forth Valley fail to turn up for hospital appointments. This costs the NHS millions of pounds each year and increases waiting times. So if you are unable to attend or no longer require your hospital appointment please let us know so we can offer it to someone else.

We are happy to consider requests for this publication in other languages or formats such as large print. Please call 01324 590886 (24hrs), fax 01324 590867 or email disability.department@nhs.net

For all the latest health news visit www.nhsforthvalley.com
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or like us on at www.facebook.com/nhsforthvalley

**SMOKING IS NOT PERMITTED ON NHS FORTH VALLEY PREMISES**
This includes corridors, doorways, car parks and any of our grounds. If you do smoke on NHS premises you may be liable to prosecution and a fine.

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