

Patient information

Colonoscopy - Outpatients

If you are unable to keep your appointment, please notify the department as soon as possible, this will allow staff to give your appointment to someone else and they will be able to arrange another date and time for you.

This booklet has been written to explain the procedure. This will help you to make an informed decision in relation to consenting to the investigation. **Please read the booklets and consent form carefully. You will also need to complete the enclosed questionnaire.**

You may be contacted via the telephone by an endoscopy trained nurse before your procedure, to go through the admission process and answer any queries you may have. If you are not contacted please come for your appointment at the time stated on your letter.

If you have any mobility problems, or if there is a possibility that you could be pregnant please contact the appointments staff on 01284 712748.

Please note your appointment time is your arrival time on the unit, and not the time of your procedure.

Please remember there will be other patients in the unit who may arrive after you, but are taken in for their procedure before you, this is for medical reasons or they are seeing a different doctor.

Due to the limited space available and to maintain other patient's privacy and dignity, we only allow patients (and carers) through into the ward area. Relatives/escorts will be contacted once the person is ready for collection.

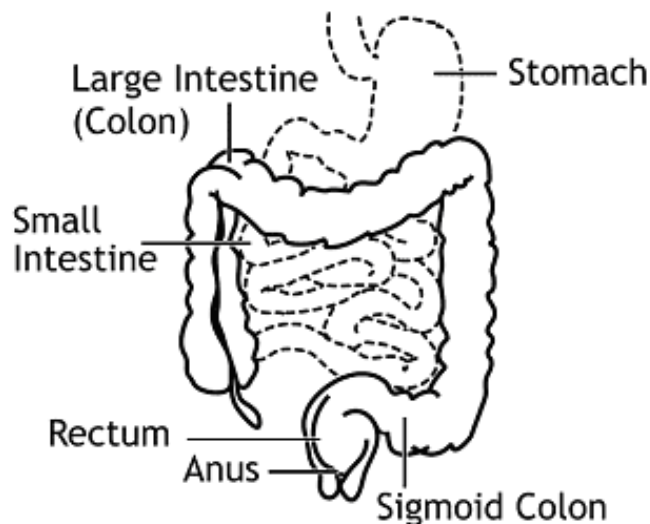
The Endoscopy Unit endeavours to offer single sex facilities, and we aim to make your stay as comfortable and stress free as possible.

Medication

- If you are taking **WARFARIN, CLOPIDOGREL (Plavix) or other anticoagulant (blood thinning) medications** please contact appointments staff on 01284 712748 or your GP or hospital doctor, as there is a protocol to be followed.
- If you are taking **iron tablets** (eg ferrous sulphate) **please stop taking this seven days before your appointment.**
- **Diabetic patients** should contact their diabetic nurse/GP (have your appointment time and eating plan found at the back of this booklet with you) for advice on adjusting any diabetic medication prior to the procedure.
- Women taking the oral contraceptive pill should be aware that taking bowel preparation might prevent the absorption of the pill. Additional contraceptive precautions should be taken until your next period begins.

What is a colonoscopy?

This is a procedure that allows the endoscopist to look at the whole of the large bowel. This is done by passing a long flexible tube (colonoscope) through your back passage and gently passing it around the large bowel.



The colonoscope is connected to a television system and has a mini camera built into the end. Pictures are then seen on a television monitor. By examining your bowel the cause of your symptoms may be found, sometimes we are able to treat them. The procedure usually takes between 25 and 50 minutes.

Why do I need a colonoscopy?

Your doctor is concerned about the symptoms you have been having in the lower part of your digestive system. A colonoscopy is a good way of finding out whether there is a problem, or not. It also helps your doctor to decide on further treatment, if necessary.

A colonoscopy is used to investigate a variety of symptoms, for example:

- Persistent diarrhoea
- Abdominal pain
- Change in bowel habit
- Bleeding from the back passage

It can also treat some conditions such as:

- Polyps
- Haemorrhoids (piles)

Are there alternatives to a colonoscopy?

A colonoscopy is the best way of looking at the lining of your large bowel. However, an x-ray examination called CT colonoscopy is one possible alternative test; this involves having a detailed CT scan which provides pictures of the lining of your bowel. Another alternative x-ray test is called a Barium enema; it does not provide such detailed pictures of the lining of your bowel. Neither of the x-ray tests allow for any treatment to be performed or biopsies to be taken at the same time. Therefore you may still need to have a colonoscopy.

If you wish to discuss these alternative tests please contact your GP or your hospital doctor.

How do I prepare for the procedure?

- To allow a clear view during the procedure, your bowel must be empty. **Therefore, it is essential that you follow the bowel preparation instructions and eating plan at the end of this booklet.**
- It is also important to increase your intake of clear fluids on the day before your colonoscopy. You may drink water up to 2 hours **BEFORE** your procedure.
- The bowel preparation will result in frequent, loose, stool movements. You may wish to apply a barrier cream to your bottom to avoid any irritation or soreness.
- It is advisable that you wear loose fitting clothing, as this is more comfortable for you after the colonoscopy

What happens when I arrive?

On arrival, please report to the endoscopy reception where the receptionist will check your personal details. You will be asked to take a seat in the main waiting area until the nurse escorts you through to the admission room.

You will be taken into the admission room where a nurse will explain the procedure, ask you about your health, medications and allergies and then take your pulse and blood pressure.

The nurse will discuss the consent form with you, and will answer any questions that you may have. We want to make sure that you understand the procedure and its implications.

You will be asked to undress and to put on a hospital gown. Please bring your own dressing gown and slippers if you have them.

You can expect to be on the unit for **2 – 4 hours**.

Medication options for the procedure

You will usually be given sedation and pain relief for a colonoscopy however in some circumstances it is not possible for these medications to be given. If this is the case for you, an alternative called Entonox may be offered.

Sedation and pain relief: A light sedation and/or pain relief is given through a needle in your hand. It makes you sleepy and relaxed and will take away some awareness of the procedure as well as relieving discomfort. Please note it is not a general anaesthetic therefore you will not fall asleep completely.

Entonox (gas and air): This is a fast acting form of pain relief which wears off very quickly. It is administered via a hand held mouth piece which you will be shown how to use prior to your procedure. You do not need to have anybody at home with you and you can drive after 30 minutes.

What does a colonoscopy involve?

- You will be escorted to the procedure room and introduced to the nurse and endoscopist who will be with you throughout your colonoscopy.
- The endoscopist will then check that you have a full understanding of your procedure and all that it means, and that you are willing to go ahead.
- You will then be asked to lie on a bed, on your left side with your knees slightly bent up, and covered with a blanket.
- In order to monitor your blood pressure, heart rate and breathing, the nurse looking after you will place a probe onto one of your fingers and an inflatable cuff on your arm. Oxygen will be placed under your nose.
- If you are having sedation this and/or a pain relief is given through the cannula in your hand.
- If you have chosen to have Entonox you will be shown how to use this.
- A nurse will be with you at all times, giving guidance and support.
- The endoscopist will then examine your back passage with a gloved finger to make sure that it is safe to pass the colonoscope.
- The colonoscope will then be inserted gently up your back passage into your large bowel.
- If you have an end colostomy, the endoscopist will need to pass the colonoscope into the stoma to check the colon and you will be asked to lie on your back. If you have any concerns about this, please contact your stoma nurse.

- Air/CO₂ will be passed through the colonoscope to open up your colon, to give a clear view of the lining.
- You may get the sensation of wanting to go to the toilet, but as your bowel is empty there is no danger of this happening.
- Some patients may experience some discomfort during and after the procedure. This should pass quickly however please inform the nursing team should you have any concerns.

The procedure should take about 25 - 50 minutes to complete. If small samples of tissue (biopsies) or polyps need to be taken, the test may take a little longer.

What is a biopsy?

A biopsy is a small piece of tissue, which is removed through the colonoscope using tiny forceps. This procedure is painless and you will probably not be aware of it being done.

What if I have polyps?

Polyps are extra growths of tissue on the bowel wall that can range in size. They are usually benign (not cancers), but if left can sometimes become cancers. Most polyps can be removed painlessly and completely during the procedure.

Are there any risks or complications?

As with every medical procedure, the risk must be compared to the benefit of having the procedure carried out. The doctor who has requested the procedure will have considered this very carefully.

Diagnostic colonoscopy procedures carry a small risk (one in 1000 cases) of bleeding or perforation (tear) to the bowel. These are more likely to occur after the removal of a polyp. On very rare occasions, this may require an operation which may involve making a temporary opening (called a stoma) in the abdomen to allow the passage of waste (faeces).

Removing a polyp can sometimes cause bleeding, although this is usually stopped during the procedure, occasionally bleeding may occur when a patient has gone home and, even more rarely, some of these people may need a blood transfusion. Another rare complication is an adverse reaction to medications.

Like all tests, this procedure will not always show up all abnormalities and, on very rare occasions, a significant abnormality may not be identified. If you have any questions about this please ask either at the time of the procedure or the person who referred you.

After the procedure

We will tell you as much as possible about what was found after the test. However, biopsy results, or the examination of a polyp, will take a few weeks to arrive.

You will be given time to recover and rest quietly until the immediate effect of sedation has worn off.

You will be offered a drink and something to eat while you wait for your discharge.

If you have had sedation

Your escort must come to the endoscopy unit to collect you.

You must have supervision by a responsible adult at home for 24 hours following the sedation.

The sedation lasts longer than you might imagine, so it is very important that after your colonoscopy you do not do any of the following for at least 24 hours:

- Drive a car
- Operate machinery
- Drink alcohol or smoke
- Sign any legal documents

If you have had Entonox

This wears off very quickly, no restrictions apply, you do not need to have anyone at home with you and you may drive after 30 minutes.

After you have been discharged

If you experience any of the following problems please contact your GP immediately informing them you have had a colonoscopy:

- Severe abdominal pain (not cramp caused by wind)
- A sudden passing of a large amount of bleeding from your back passage (a very small amount of blood, take no action)
- A firm and swollen abdomen
- High temperature or feeling feverish
- Vomiting

If you are unable to contact or speak to your GP, please ring the Endoscopy Unit during office hours: 8.00am - 9.30pm, Monday to Thursday and 8.00am – 6.00pm on Friday. Telephone number **01284 713952**.

Out of hours, you can contact West Suffolk Hospital – 01284 713000 and ask to be put through to the **on-call endoscopy nurse for advice**.

Please be advised that patients are unable to donate blood for 4 months following an examination with a flexible endoscope as directed by the NHS Blood and Transplant service.

Summary of important information

As with every medical procedure, the risk must be compared to the benefit of having the procedure carried out. The doctor who has requested the procedure will have considered this very carefully.

However, it is your decision whether you wish to go ahead with the procedure or not and you are free to change your mind at any time.

It is everyone's aim for you to be seen as soon as possible. However, the unit can be busy and your colonoscopy may be delayed. If emergencies occur, these patients will obviously be given priority over less urgent cases.

Due to the limited space available, and to maintain other patient's privacy and dignity, we only allow patients (and carers) through into the ward area.

Relatives/escorts will be contacted once you are ready for collection.

Please do not bring valuables to the hospital. The hospital cannot accept any responsibility for the loss or damage to personal property during your time on these premises.

Training doctors and other health professionals is essential to the continuation of the National Health Service, and improving the quality of care. Your procedure / treatment may provide an important opportunity for such training under the careful supervision of an experienced endoscopist. You can, however, decline to be involved in the formal training of medical and other students; this will not affect your care and treatment.

Checklist

Things to remember before your procedure

- Read the booklets carefully
- Fill in the questionnaire
- Drink plenty of clear fluids up to 2 hours before your appointment
- Follow specified bowel preparation and **eating plan**
- Check for specific medication instructions
- Transport arrangements made if you are having sedation

Bring this **booklet, questionnaire and consent form** with you to the appointment.

Do not sign the consent form, but please bring it with you on the day of your appointment.

Instructions for taking Moviprep® and eating plan

Please read these instructions very carefully.

The success of your colonoscopy depends on your bowel being as clear as possible.

The procedure may need to be repeated if you do not have a clear bowel.

Two days before your colonoscopy – start low residue diet

You can eat low fibre foods including the following:

- **Dairy** - milk (2 cups/day), plain yoghurt, cheese, butter, margarine
- **Fish** – white fish: boiled / steamed / grilled
- **Meat** – chicken, boiled / steamed / grilled
- **Eggs**
- **White pasta and white rice**
- **Bread** – white bread, pitta, white flour chapattis
- **Potatoes** – boiled or mashed – no skin
- **Soups** – clear soups (no solid bits)
- **Meat extracts drinks** – Bovril®, Oxo®
- **Desserts** – clear jelly (**not red or orange**), boiled sweets, ice cream, chocolate (no fruit or nut pieces)
- **Salt, pepper, sugar, sweeteners and honey**

Have plenty to drink from tea, coffee, squash, fizzy drinks, water, clear fruit juices (e.g. apple, grape, cranberry).

Suggested meals could include for example:

Breakfast: White bread/toast with butter and honey. Boiled or poached egg.

Lunch/dinner: Grilled fish or chicken with white rice or boiled potatoes (no skin)
or

Scrambled eggs on white toast, vanilla ice cream

DO NOT eat high fibre foods such as:

- Red meats, pink fish (e.g. salmon)
- Fruit, vegetables, salad, pips, seeds, bran, beans, lentils
- Brown bread, brown or wild rice, brown pasta
- Pickles, chutneys
- Cereals such as bran flakes, muesli, Weetabix®

The day before your colonoscopy

Have a **light breakfast**, choosing from the low residue foods listed above.

No further solid food or milk products are allowed after breakfast.

You may drink water, black tea/coffee, or any of the drinks from the low residue list. You may also have jelly (but not red or orange please) and consommé or Bovril® / Oxo®.

It is important to increase your intake of clear fluids.

5.1 pm: Take the Moviprep following the steps below:

1. Fill up a jug with 1 litre (1¾ pints) of water.
2. Empty the contents of 1 sachet A and 1 sachet B in to the water and stir until dissolved. Add squash or cordial to taste (not blackcurrant).
3. Drink one glassful (250ml) of the MoviPrep drink every 15-30 minutes until you have drunk it all. There is no need to rush.
4. Drink an additional 500ml of clear fluid (such as plain water) after drinking Moviprep.

You will begin to pass frequent loose motions, please stay near a toilet at this time.

8.00pm: – second dose of Moviprep

Follow steps 1 - 4 above.

Please continue drinking **clear** fluids for up to **2 hours** before your appointment.

The day of your colonoscopy

No solid food or milk products are allowed.

Please continue drinking **clear** fluids for up to **2 hours** before your appointment.

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo)
<https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust>



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