

Colonoscopy

INSTRUCTIONS TO PATIENTS ABOUT TO UNDERGO A COLONOSCOPY. PLEASE READ COMPLETELY PRIOR TO PREPARING FOR PROCEDURE.

Remember you must be on Clear Liquids the WHOLE DAY BEFORE THE TEST.

THE MORNING OF THE PROCEDURE

Do Not Eat or Drink ANYTHING the day of the test, except morning medicines with a small sip of water up to 4 hours before the test. DO NOT CHEW GUM, HARD CANDY, or SMOKE. Bring a current list of meds and doses with you.

THE PROCEDURE

A colonoscopy involves putting a thin black tube with a light on its end inside your rectum which allows your doctor to look at your large intestine. A colonoscopy is performed to evaluate abdominal pain, rectal bleeding, anemia, change in bowel movements, abnormalities on x-rays and to check for polyps or cancer. Polyps are abnormal growths in your colon. Certain types of polyps can contain cancer or over a period of years can become a cancer. For these reasons, and potentially others, your doctor wishes you to have a colonoscopy.

We must know your medical history so we can do the colonoscopy safely. If you have an *artificial heart valve, any history of endocarditis, or mitral valve prolapse with a murmur* you may need to be given special antibiotics to prevent an infection. This is called antibiotic prophylaxis.

- You will fast overnight. Pills may be taken in the morning with a small sip of water 4 hours before the test.
- **You must have a ride home** as the sedation will make it unsafe to drive the day of the test. Your driver must be prepared to stay at the Center until you are ready to be discharged.
- If you are/might be pregnant, please inform the physician.
- Please bring an insurance card and photo ID and a referral slip (if needed). **Co-payment is required at the time of registration.**
- Let your doctor or nurse know if you are allergic to soybeans, eggs, or sulfites as these may cause problems with some of the sedation used.
- **Bring a list of all your current medications and allergies with you.**

PREPARATION

The goal of the preparation for the colonoscopy is to cleanse the colon in order to adequately visualize it. If there is stool in the colon, we may not be able to do the examination or we might miss a small polyp. After the preparation, your last bowel movement should look like water or, at the most, be clear though lightly colored. **If your bowel movements are not clear, call MLEC at (856-996-4001).**

Consume only clear liquids the WHOLE day before the procedure. Clear liquids include: coffee, tea, soda, water, plain Jell-O, strained soups, lemon water ice, popsicles, Gatorade, broth, and clear juices. **Please do not consume any liquids that are red or purple in color.** All other medications may be taken on the day of the test, 4 hours before the test with a small sip of water, unless you have been given specific instructions to hold certain medicines.

You must have someone drive you to the examination and take you home as the medicine we give you (Anesthesia) makes you drowsy and unable to drive for at least 24 hours after the procedure. Your driver must be prepared to stay at the Center until you are ready for discharge.

WHAT WILL HAPPEN BEFORE THE TEST?

- You will sign a consent form for the test and the anesthesia. The anesthesiologist will ask you medical questions to ensure it is safe to give the anesthesia.
- You will be asked to change into a hospital gown.
- An intravenous (IV) line will be started in your arm.
- You will be asked to remove your glasses, contact lenses, dentures, and jewelry. **We ask you to leave your jewelry and cell phone at home.**

This test is done with you lying on your left side with your knees bent. We will give you Anesthesia (through an intravenous (IV) line) to make you drowsy and comfortable during the exam. **You will be asleep before we start.** If you become uncomfortable, more medicine can be given. *If you are allergic to eggs, sulfites, soybeans or Latex, please let us know **BEFORE** we start the exam.*

Before starting, we will do a rectal examination. During the colonoscopy exam, the colon will be inflated with air to expand the walls of the colon so it can be examined more effectively. This air can make you feel bloated and uncomfortable but is only temporary. The colon has many twists and turns and when pushing the colonoscope past these turns, you rarely may feel a cramping pain or tugging sensation which usually passes when the instrument is straightened out. We may shift your position to make it easier to examine your colon. After the exam is completed,

although it may be embarrassing, passing of the air is encouraged as this will help relieve the bloating and cramping which may occur. The doctor or nurse will help you move if needed.

AFTER THE EXAM

After the examination, you will be transported into the recovery room to rest allowing the medicine to wear off. Again, you may feel bloated because of the air used during the procedure and will be encouraged to pass this air as this will help make you more comfortable. If you have had a polyp removed, we ask you not to leave town for at least 24 hours so if there are any problems such as severe pain, nausea, vomiting, or bleeding, we can immediately respond to help you. If any of these symptoms should occur following your procedure, please call your doctor. You may contact the nearest Emergency Room if you cannot reach the Doctor on call within 15 minutes if you are having a severe problem.

It is important to know that occasionally, because of previous abdominal surgery or because you may have a colon with many twists and turns, we may not be able to see your entire colon. If this happens, we will recommend other tests to complete the examination of your colon.

POTENTIAL RISKS

Colonoscopies are very safe, but as with all procedures, there are some risks of which you should be aware. **These risks include but are not limited to** the risk of having a **perforation**. This means that in one out of every 500 to 1000 colonoscopies, a hole can be made in your colon. If this occurs, you will be hospitalized and may need surgery to repair this hole and to prevent any serious infection.

- **Bleeding** may occur after a polyp has been removed. You may see blood in the stool or black stool up to two weeks later. If this occurs, please call us immediately. Most of the time, the minimal bleeding will stop by itself but in some cases it may require another colonoscopy, blood transfusion or, in rare cases, surgery to stop the bleeding.
- **Medication Phlebitis** is where the medications used for sedation may irritate the vein in which they are injected. This may cause a red, painful swelling of the vein and surrounding tissue and the area could become infected. Discomfort in the area may persist for several weeks to several months.
- **Rarely other complications can include** post polypectomy burn syndrome, infection from the procedure, drug reactions and complications from other diseases you may already have. Instrument failure and death are extremely rare but remain remote possibilities.
- **It is important for you to inform the doctor at the time of your consultation if you have any type of bleeding disorder.** Again, avoid any aspirin type medications for 7 days prior to the procedure and non-steroidal/anti-inflammatory drugs 5 days prior to the procedure as this will increase your risk of bleeding after the procedure.

The medicine we give you to make you comfortable will make you sleepy and can slow your breathing. All patients are placed on a heart monitor so the doctor and nurses can observe your heartbeats and be aware of any problems or EKG changes which may occur. A pulse oximeter is used to monitor your breathing during sedation. If we feel there is a problem which puts the patient in danger, the procedure will be stopped immediately.

The colonoscopy is the best way we currently have to evaluate the colon but it is not perfect. **Small polyps can be missed** in up to 5% to 15% of patients by hiding behind folds or underneath residual stool. This is why it is so important to follow the prep instructions carefully and have the colon completely clean for the test.

If after reading this you have any questions, please contact your doctor.

ALTERNATIVE METHODS

Alternative methods to evaluate the colon include a barium enema, flexible sigmoidoscopy, or the new virtual colonoscopy. The virtual colonoscopy also requires thorough bowel prep and if polyps are found, you will need a colonoscopy to remove them. If you have questions about these alternative methods, please don't hesitate to ask us to explain these to you.

WHAT WILL HAPPEN AFTER THE TEST?

- The doctor or nurse will go over the test results and you will be given a report of the results.
- Eat a light meal within the first hours after the test as the medicine can cause some mild nausea. After several hours you may resume your normal diet.
- Because your colon has been cleaned out for the procedure, do not expect to have a normal bowel movement for at least 24 to 48 hours after the procedure. Your first bowel movement may be diarrhea or a loose stool.
- Do not drive a car or operate machinery for the rest of the day as it is unsafe.
- Biopsy results are usually available in 2 to 3 weeks and will be given to you by phone, mail, or at your next follow up appointment. A report will also be sent to your referring Doctor. If you do not get your results within two to three weeks, don't hesitate to call us at 856-996-4001.
- While every caution is taken to prevent any problems, complications can occur and sometimes these may not become evident for several hours.
 - **If, in the next 24 hours you experience any of the following, such as prolonged or severe abdominal discomfort, fever, tenderness or significant bleeding, you must contact your doctor. If for any reason you are unable to reach the doctor (within 15 minutes for serious problems), go to the nearest Emergency Room**

This is for informational purposes only and is not designed to replace a discussion with your Doctor.