

Colonoscopy

Please read this information and bring it with you when you come for your examination.

ABOUT THE EXAMINATION

Colonoscopy is a visual examination of the lining of your colon. It allows the doctor to look directly at the large bowel from the anus to the appendix area, and into the small intestine if necessary.

The doctor steers the thin flexible tube containing a miniature TV camera around the colon, using an image of your bowel on the TV monitor. Biopsy samples of the lining can be painlessly taken for laboratory analysis.

Polyps, which are abnormal growths of tissue often shaped rather like a mushroom, can be removed painlessly using a wire lasso that is passed through the instrument.

RISKS

Before you agree to this procedure you should be aware of the reasons for which it is being proposed, the alternatives and the problems that can occur. No procedure or treatment is totally risk free, however, the risks associated with colonoscopy are usually less than those of the alternatives, and the benefits usually far outweigh the risks.

The main risks are perforation of the bowel and bleeding, which is more common when the procedure involves removal of polyps. There have been no perforations of the bowel wall at The London Clinic in almost 15,000 procedures between 2006 and 2009, compared with an overall perforation rate of 1:750 procedures in the UK as shown in the British Society of Gastroenterology National Audit of Colonoscopy.

If bleeding occurs, observation and admission to hospital may be required. The bleeding usually stops spontaneously. Bleeding that does not stop, or bowel perforation, may require surgery however this is extremely rare.

INFORMED CONSENT

Why do we need your consent? No one has the right to impose examinations or treatment on you without your agreement.

What does it mean? Your doctor will have told you about the procedure, possible alternatives, and any substantial risks to enable you to decide for yourself whether or not to agree to the colonoscopy. There is further information in this pack. Before signing the consent form, you should be satisfied that you have received all the information that you require.

Please feel free to discuss any aspects of the proposed examination with the nursing staff and the doctor in the Endoscopy Unit. If you do decide to go ahead, you are at liberty to change your mind, even after signing the consent form.

Consent form Please read the attached consent form carefully. You will be asked to sign a similar form on the day of the procedure, so that there is a record of your understanding and agreement. You can ask any further questions on the day. Please bring the enclosed documents with you to your appointment.

PREPARATION

If you are taking Warfarin or Clopidogrel (Plavix) contact your cardiologist or anticoagulant clinic at least two weeks before your colonoscopy as your medication will need to be modified.

If you are diabetic please consult whoever manages your diabetes for adjustments to your medication before your colonoscopy.

To allow a clear view, the colon must be completely free of waste material. Enclosed with this pack are bowel preparation medicines. Read the instructions carefully and adhere closely to the bowel preparation instructions.

Do not take any iron preparations for four days before the examination. You can continue to take aspirin and prescription medicines, even on the day of the examination. You will need full bowel preparation even if you already have diarrhoea. The examination need not be delayed because of a menstrual period.

WHAT WILL HAPPEN?

The doctor or nurse will explain the procedure and answer your questions. The admitting nurse will go through your medical history and check that you are correctly prepared.

You will need to put on a hospital gown, and the doctor will ask you to sign a consent form, giving your permission for the examination. If you choose to have sedation, it will be given by injection through a cannula in a vein in the hand or arm. This will make you sleepy and relaxed.

While in a comfortable position on your left-hand side, the doctor will pass the endoscope into and around the colon. If you have sedation, you will need to rest in the department for up to 45 minutes after the procedure. If you do not have sedation, you can leave immediately and eat and drink when you wish.

AFTER YOUR COLONOSCOPY

If you have had sedation, a companion must be available to go home with you.

We suggest that you stay at home for the rest of the day. In any event, you should not drive a car, operate machinery or make important decisions for 24 hours. If you do not have sedation, you can return to normal activities, including eating and drinking, as soon as you wish.

HELP AND ADVICE

For further guidance about your condition and follow-up appointments please contact your own doctor.

For assistance during office hours please call **020 7616 7760**.

For out of hours enquiries please call The London Clinic on **020 7935 4444** and ask for **Bleep 014 (24 hours)**.