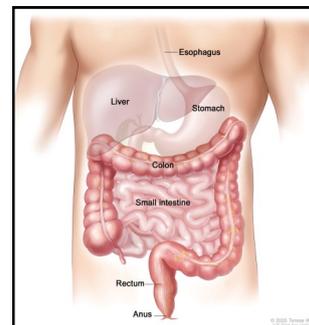


Understanding Colonoscopy

Patient information - Gastrointestinal Endoscopy Unit

Your doctor has determined that further examination of your gastrointestinal tract is necessary to help them evaluate or treat your condition.

This information sheet has been prepared to help you understand the procedure. Please read it carefully.



What is a colonoscopy?

It is a procedure that allows the doctor to look directly at the lining of the large intestine or colon to look for any abnormalities using an endoscope.

An endoscope is a flexible tube about the thickness of your index finger.

What preparation is required?

For this procedure to be successful and allow a clear view of your colon, your bowel must be as empty as possible.

If the bowel is not empty, the whole procedure may have to be cancelled and repeated on another occasion.

A pamphlet on how to prepare your bowel has been included with this information sheet and your appointment letter. Please follow the bowel preparation instructions carefully. If you have any questions please phone us to discuss further.

What about my current medications?

Please contact us as soon as possible for further instructions if you are:

- Taking an anticoagulant medication such as warfarin, dabigatran, rivaroxaban *OR* anti-platelet therapy such as clopidogrel, dipyridamole or ticagrelor.
- Have a pacemaker *OR* internal cardiac defibrillator.
- If you are taking iron supplements, please stop these **7 days** before the procedure
- If you are taking aspirin, please continue this as normal.

All other essential medications such as heart medications, psychiatric medications, steroids and epilepsy medications, can be taken as usual with a small mouthful of water.

Please bring **all** your medications to the appointment, especially any nitrolingual sprays, asthma inhalers or diabetic medications.

If you need advice on how to manage your diabetes before to the procedure, please contact your GP. Information is also available on www.healthinfo.co.nz

Where can I park?

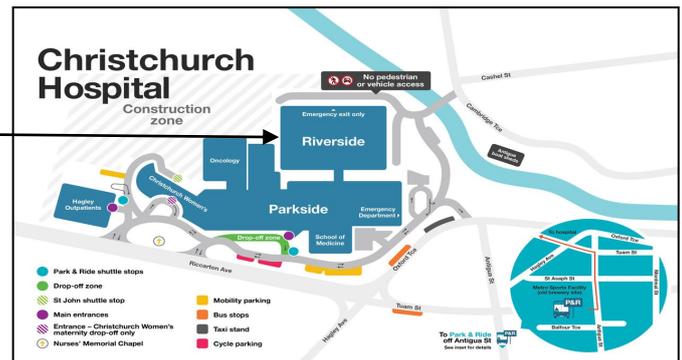
Parking at Christchurch Hospital is limited. Please allow time to find a car park.

There is a public car park on the corner of St Asaph Street and Antigua Street.

- You will need to pay for your parking at the public car park.
- Parking costs: \$2/hour or \$5 for the day—cash or credit cards.

On arrival

Please report to: Gastrointestinal Endoscopy Unit
 2nd floor
 Riverside building
 Christchurch Hospital.



The receptionist will check your details and a nurse will take your medical history and undertake a brief nursing assessment, prior to the procedure.

Consent

Before the procedure can begin you will need to sign a consent form to agree to proceed.

This consent form has been sent to you in the mail so you can read it, and think of any questions you would like to ask before agreeing to proceed.

A nurse or doctor will discuss the procedure with you and explain the possible complications and side effects before asking you to sign the consent form to proceed.

If you later change your mind, you are entitled to withdraw your consent even *after* signing.

What can be expected during the procedure?

A mild sedative and pain relief will be administered through a small needle placed in the back of your hand to help you relax. This will be given at regular intervals throughout the procedure to keep you comfortable. This medication has a mild amnesia-like effect, so you may not remember having the procedure at all.

You will also receive oxygen throughout the procedure via a nasal cannula that sits in your nose. You will have a small peg-like device clipped on to your finger. This device will monitor your heart rate and oxygen levels.

Then, whilst you are lying comfortably on your left side, the Endoscopist will gently insert the colonoscope into your back passage and manouver it around the bowel.

Air will be used to inflate the bowel so the Endoscopist can clearly see all the surfaces. This may be uncomfortable and cause a little bloating and / or cramping.

You may also feel pressure, like you need to go to the toilet. Do not worry about this, as your bowel will be completely empty and any fluid left in the bowel can be suctioned out by the endoscope.

A biopsy (small tissue sample) may be taken during the procedure to be sent to the laboratory for more tests. You will not feel this being done.

Polyps (small growths of tissue) may also be removed during the procedure and you will not feel this being done. This is called a polypectomy. All polyps that are found are removed at the same time, as some polyps may become cancerous over time.

After careful examination of the lining of your bowel, most of the air will be suctioned out before the procedure is completed to keep you as comfortable as possible.

After the procedure

You will be taken to our recovery area and your blood pressure, heart rate, respirations and oxygen levels will be monitored until you are awake.

You will then be given something to eat and drink before going home.

A nurse will explain the findings of the procedure to you and give you a copy of the colonoscopy report to take home. A copy will also be sent to your referring doctor.

How long will it take?

Please allow at least **3 hours** for your appointment, as delays may occur due to acute endoscopy procedures. We would advise you to bring a book, magazine or iPod with you to help pass the time.

The test itself takes between 30-45 minutes and if you have had no sedation you will be able to go home immediately after completion of the procedure.

If you have had a sedative injection you will need at least one hour to recover in our recovery area.

Post procedure

Please make arrangements for someone to collect you and care for you **24 hours** after the procedure.

Even if you feel alert after the procedure you must not:

- *Drive a car*
- *Operate machinery*
- *Drink alcohol*
- *Sign any legal documents or*
- *Ride on public transport alone*

The sedation makes you forgetful and can impair your judgment and reflexes.

Possible complications post colonoscopy

A colonoscopy is generally a well-tolerated procedure when undertaken by an experienced Endoscopist, but as with any procedure there is a small risk of side effects or complications.

Adverse reaction to medication that can affect your breathing making it slow and shallow.

Perforation or tear of the bowel wall that could require surgery. This is extremely rare, occurring once per one thousand procedures.

Bleeding may occur from the biopsy or polypectomy site. It is usually minor and can stop on its own or can be controlled through the endoscope.

Important information

If you develop *severe pain* in your neck, chest or abdomen within 24 hours of your procedure, please:

- Phone the Gastrointestinal Endoscopy Unit *before* 6:00 pm Monday to Friday to speak with a nurse OR
- Go to an After Hours Medical Centre OR
- Go to the Hospital Emergency Department.

Confirm your appointment

Please telephone to confirm your appointment:
Phone: (03) 364 0921

If you do not have a relative or support person who can care for you 24 hours after the procedure, please talk to our staff about your 'after procedure' care options when you phone to confirm your appointment.

Interpreter service

If you require an interpreter service, please ask an English speaking person to call us as soon as possible so we can arrange an interpreter for you.

For more information about:

- *Your health and medication*, go to: www.healthinfo.org.nz
- *Hospital and specialist services*, go to: www.cdhb.health.nz