

**DAY SURGERY UNIT**

**COLONOSCOPY INFORMATION SHEET**

**PLEASE READ THIS, SIGN THE 2 CONSENT FORMS ATTACHED AND BRING THESE WITH YOU ON THE DAY OF YOUR PROCEDURE**

PLEASE NOTE: You **MUST** arrange for a responsible adult to accompany you home by private car or escort you in a taxi **AND STAY WITH YOU FOR 24 HOURS. Failure to provide this may mean your procedure is cancelled**

**Why do I need to have a colonoscopy?**

You have been advised to undergo this investigation of your large bowel (Colon) to help find the cause for your symptoms and if necessary, to decide on further investigations and treatment. Some reasons for which this investigation may be carried out include:

- Anaemia
- Bleeding from the back passage
- Persistent diarrhoea
- Follow-up inspection of previous disease
- To assess the clinical importance of any abnormalities found on x-ray

**What is a Colonoscopy?**

A colonoscopy is a routine procedure commonly performed as a day case, and the procedure itself normally takes between 15-45 minutes. Please allow 2-3 hours for your visit as you will need to go through the admission process and recover adequately before being fit for discharge.

This test is a very accurate way of looking at the lining of your large bowel (colon), to establish whether there is any abnormality present.

The instrument used in this investigation is called a colonoscope it is a long flexible tube about the width of your index finger. Within the scope is a channel, which allows light to be shone onto the lining of your bowel, and another, which sends pictures back, onto a television screen.

Author: MWOODWARD, MO'DONNELL		Date first produced	MAY 07
Approved by CONSULTANT ENDOSCOPIST		Date of this revision:	Aug 11
Ref. No:	Page 1 of 7	Next review due:	Aug 12
V:\Secure Department Folders\Governance Department\Datix\Jackie K\Word Docs for PDFing\Consent forms\Colonoscopy info and consent.doc		Revision no:	5

The procedure will be performed by or under the supervision of a trained endoscopist. On the day of your examination if you wish to discuss your clinical care in private please ask.

### **What are the benefits of the Colonoscopy?**

The instrument allows the Endoscopist to have a clear view of the lining of the colon to check whether or not there is any abnormality present. During the investigation it is possible to take small samples of tissue (biopsies) from the lining of your bowel for examination in the laboratory. Taking biopsies is painless. Polyps (small growths of the bowel wall) can be removed during colonoscopy. Photographs may be taken and kept for your hospital records.

### **What is a polyp?**

A polyp is a protrusion from the lining of the bowel caused by abnormal cells. Some polyps look like a grape and are attached to the intestinal wall by a stalk. Some are flat, and are attached directly onto the intestinal wall without a stalk. If found they usually are removed or sampled by the endoscopist as they may grow and cause problems. Removal of a polyp is known as a Polypectomy; this is performed using a specialized instrument that cauterizes the area where the polyp is removed. Cauterizing uses an electrical current to seal tiny blood vessels to minimize blood loss.

### **What are the alternative procedures to a Colonoscopy?**

A barium enema can provide x-ray images of the colon, alternatively a CT scan can be performed but these investigations are less sensitive. Both of these tests have the disadvantage that polyps cannot be removed and biopsies of the bowel cannot be taken if an abnormality is found. If this is the case a subsequent examination with a colonoscope may be required.

### **What are the risks from having a Colonoscopy?**

Most colonoscopy procedures are performed without any problem.

- Occasionally the colonoscope may cause damage to the bowel wall known as a perforation which is a tear of the lining of the bowel, it is thought to happen in approximately 1 case in 1000. An operation is nearly always required to repair the hole.
- The risk of perforation is higher following the removal of a polyp 1 in 500.
- Bleeding may occur when a biopsy is taken. Typically minor in degree such bleeding either simply stops on its own or if it does not, it can be controlled by cauterization (sealing of tiny blood vessels to minimize blood loss) or by injection treatment.
- The risk of bleeding following the removal of a polyp is higher, it happens in approximately 1 in 200 examinations. Very rarely a blood transfusion or an operation may be needed.

Author: MWOODWARD, MO'DONNELL		Date first produced	MAY 07
Approved by CONSULTANT ENDOSCOPIST		Date of this revision:	Aug 11
Ref. No:	Page 2 of 7	Next review due:	Aug 12
V:\Secure Department Folders\Governance Department\Datix\Jackie K\Word Docs for PDFing\Consent forms\Colonoscopy info and consent.doc		Revision no:	5

## How do I prepare for Colonoscopy?

It is essential that the bowel is empty, for the endoscopist to get the best views of the lining of the colon.

- Please follow the enclosed instructions for bowel preparation carefully.
- If you have diabetes, which is controlled by, either insulin or tablets please contact your G.P or Nurse specialist for diabetes, for advice on adjusting your treatment.
- Please take your regular medication with a sip of water and bring a list of your medication with you.

### ANTI-COAGULATION – Warfarin/Clopidogrel

#### Warfarin

- If you are taking **Warfarin** you should be contacted by the anti-coagulation clinic before your appointment, they will make arrangements for you to either stop or adjust your treatment. In the event, that you do not hear from the anti-coagulant clinic within 10 days of your appointment please contact your GP, who can refer you for advice.
- If you take **Warfarin** you will need to have a blood test on the day of your appointment, please arrange to have this taken at the hospital at least one hour before your appointment time.

#### Clopidogrel

- Please contact the doctor who prescribes the Clopidogrel, for advice with regard to stopping or adjusting your medication, at least a week before your appointment.
- **LATEX** - If you have an allergy to latex please contact the unit before your appointment.

## What happens during the Colonoscopy?

- Before the colonoscopy begins, a small cannula (thin plastic tube) will be inserted into your vein.
- You will be given an injection (a sedative) into the cannula to make you feel relaxed and a little drowsy. However, it does not 'put you to sleep', as it is not a general anaesthetic. You may also, be given a pain-killing drug, if necessary.

Author: MWOODWARD, MO'DONNELL		Date first produced	MAY 07
Approved by CONSULTANT ENDOSCOPIST		Date of this revision:	Aug 11
Ref. No:	Page 3 of 7	Next review due:	Aug 12
V:\Secure Department Folders\Governance Department\Datix\Jackie K\Word Docs for PDFing\Consent forms\Colonoscopy info and consent.doc		Revision no:	5

- Whilst you are undergoing the procedure you will have a small probe on your finger that will monitor your pulse and oxygen levels, you will be given oxygen via a small sponge in your nostril or using a facemask.
- The nurse looking after you will ask you to get into a comfortable position on your left hand side with your knees slightly bent.
- First, the Endoscopist will do a rectal examination (examination of the back passage with the finger).
- Colonoscopy involves passing the colonoscope through the back passage then manoeuvring it around the large bowel. There are some bends that naturally occur in the bowel and negotiating these, can in a few cases be uncomfortable or even painful for a short period of time but the sedation and analgesia will help to minimise this. However, for a few patients the procedure is too painful and in these cases, it is not always possible to control the pain with the medication given, and the procedure may have to be abandoned.
- A nurse will be with you during the procedure, if you find the discomfort unmanageable the nurse can help you to discuss this with the Endoscopist.
- Air is gently passed into the bowel during the investigation to help the passage of the colonoscope. This may make you feel rather bloated and you may experience abdominal cramping and pressure. You may pass some wind, this is normal and there is no need to feel embarrassed, as the staff will expect this to happen.

### Intravenous sedation

The sedation makes you slightly drowsy and relaxed but not unconscious. You will be in a state called conscious sedation. This means that, although drowsy, you will still hear what is said to you and therefore will be able to follow simple instructions during the investigation. Also, the sedation has mild amnesiac properties, therefore you may struggle to recall some aspects of the procedure. Whilst you are sedated, we will monitor your breathing and heart rate and give you oxygen.

### What are the risks of sedation?

Sedation can occasionally cause complications with breathing, heart rate and blood pressure. If any of these problems do occur, they are normally short lived and easily managed by the endoscopy unit staff. Rarely, these complications are more serious, and may need more intensive management.

### What happens after the Colonoscopy?

Most people are ready to go home after about an hour or so depending on how quickly they recover from the procedure and the effects of the medication. The

Author: MWOODWARD, MO'DONNELL		Date first produced	MAY 07
Approved by CONSULTANT ENDOSCOPIST		Date of this revision:	Aug 11
Ref. No:	Page 4 of 7	Next review due:	Aug 12
V:\Secure Department Folders\Governance Department\Datix\Jackie K\Word Docs for PDFing\Consent forms\Colonoscopy info and consent.doc		Revision no:	5

sedation and painkillers that you are given during the procedure will normally make you feel quite relaxed, and possibly drowsy. You may feel tired or sleepy for several hours following the sedation. Following the colonoscopy you may feel a little bloated with wind pains, however these usually settle quite quickly. You may pass a small amount of blood from your back passage if a biopsy was taken, or a polyp was removed. Most patients are able to resume normal activities after 24 hours.

The endoscopist or a nurse will talk to you following the procedure, explaining what has been found. If biopsies have been taken the results may take a week to ten days to be processed. Details of the results of the colonoscopy and any necessary treatment will be sent to the doctor who referred you for the colonoscopy.

## Going home

- After the colonoscopy it is not suitable for you to travel home by public transport.
- You **MUST** arrange for a responsible adult to accompany you home by private car or escort you in a taxi **AND STAY WITH YOU FOR 24 HOURS.**
- You must avoid alcohol for 24 hours following sedation.
- You should not drive, operate machinery, ride a bicycle or sign legally binding documents for 24 hours following colonoscopy as the drugs used remain in your system for up to 24 hours.
- You will be given advice and written information on the aftercare following the colonoscopy before you go home.

If you have any questions before your procedure contact the Day Surgery Unit  
Advice line: Monday – Friday 8:00am – 7:30pm 020 8541 5370.

Useful web sites are: [www.patient.co.uk](http://www.patient.co.uk)  
[www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)

If you would like this leaflet in your own language, in large print, in Braille or audio tape please call 020 8934 2003

Author: MWOODWARD, MO'DONNELL		Date first produced	MAY 07
Approved by CONSULTANT ENDOSCOPIST		Date of this revision:	Aug 11
Ref. No:	Page 5 of 7	Next review due:	Aug 12
V:\Secure Department Folders\Governance Department\Datix\Jackie K\Word Docs for PDFing\Consent forms\Colonoscopy info and consent.doc		Revision no:	5

Patient  
Sticker

## CONSENT FORM FOR COLONOSCOPY Kingston Hospital NHS Trust

### Patient agreement to endoscopic investigation and/or treatment

- Name of procedure(s): - **Colonoscopy**
- **Inspection of the lower gastrointestinal tract with a flexible endoscope (+/- biopsy, photography)**
  - **Biopsy samples will be kept by the hospital**

#### Statement of patient:

- † **I have read** and understood the information on the attached sheets including the benefits and risks.
- † **I agree** to the procedure described in this booklet and on this consent form.
- † **I understand** that you cannot give me a guarantee that a particular person will perform the procedure. The person will, however, have appropriate experience. Where a trainee performs this examination, this will be undertaken under supervision by a fully qualified practitioner.

*Signed:*.....*Date:*.....  
*Name (print in capitals)*.....

**You have the right to change your mind at any time,  
including after you have signed this form.**

**If you would like to ask further questions, please do not sign the form now.  
Bring it with you and you can sign it after you have talked to the doctor or nurse.**

**Confirmation of consent** (Completed by a health professional when the patient is admitted for the procedure.)

- † I have confirmed that the patient / parent understands what the procedure involves including the benefits and risks.
- † I have confirmed that the patient/parent has no further questions and wishes the procedure to go ahead.

*Signed:*.....*Date:*.....  
*Name (print in capitals)*.....  
*Job description*.....

### PATIENT COPY

Author:MWOODWARD,MO'DONNELL		Date first produced	MAY 07
Approved by CONSULTANT ENDOSCOPIST		Date of this revision:	Aug 11
Ref. No:	Page 6 of 7	Next review due:	Aug 12
V:\Secure Department Folders\Governance Department\Datix\Jackie K\Word Docs for PDFing\Consent forms\Colonoscopy info and consent.doc		Revision no:	5

Patient  
Sticker

## CONSENT FORM FOR COLONOSCOPY Kingston Hospital NHS Trust

### Patient agreement to endoscopic investigation and/or treatment

Name of procedure(s): - **Colonoscopy**  
- **Inspection of the lower gastrointestinal tract with a flexible  
endoscope (+/- biopsy, photography)**  
- **Biopsy samples will be kept by the hospital**

#### Statement of patient:

- † I **have read** and understood the information on the attached sheets including the benefits and risks.
- † I **agree** to the procedure described in this booklet and on this consent form.
- † I **understand** that you cannot give me a guarantee that a particular person will perform the procedure. The person will, however, have appropriate experience. Where a trainee performs this examination, this will be undertaken under supervision by a fully qualified practitioner.

*Signed:*.....*Date:*.....  
*Name (print in capitals)*.....

**You have the right to change your mind at any time,  
including after you have signed this form.**

**If you would like to ask further questions, please do not sign the form now.  
Bring it with you and you can sign it after you have talked to the doctor or nurse.**  
**Confirmation of consent** (Completed by a health professional when the patient is admitted for the procedure.)

- † I have confirmed that the patient / parent understands what the procedure involves including the benefits and risks.
- † I have confirmed that the patient/parent has no further questions and wishes the procedure to go ahead.

*Signed:*.....*Date:*.....  
*Name (print in capitals)*.....  
*Job description*.....

### COPY FOR THE NOTES

Author:MWOODWARD,MO'DONNELL		Date first produced	MAY 07
Approved by CONSULTANT ENDOSCOPIST		Date of this revision:	Aug 11
Ref. No:	Page 7 of 7	Next review due:	Aug 12
V:\Secure Department Folders\Governance Department\Datix\Jackie K\Word Docs for PDFing\Consent forms\Colonoscopy info and consent.doc		Revision no:	5