

Colonoscopy

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Your colonoscopy is scheduled at Altru Clinic Ambulatory Procedure Center, waiting room 4-South on (date) _____

Arrival time: _____

Procedure time: _____

This pamphlet has been written to help you prepare for your exam. It is not meant to take the place of a conference with your doctor. It includes answers to questions patients ask most often. Please read it carefully. If you have any further questions, please do not hesitate to call your doctor or nurse.

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Colonoscopy is an examination of the lining of the colon (large intestine). A long, flexible, lighted tube called a colonoscope is passed through the rectum and into the colon.

Your colonoscopy has been scheduled. Most commercial insurance companies will not pay for screening procedures. Screening means no symptoms or family history of colon cancer/polyps. We suggest you check with your insurance company for coverage regarding this procedure.

Indications

- To evaluate the source of rectal bleeding
- To biopsy (sample) and/or remove polyps

Polyps are abnormal growths from the lining of the colon which vary in size from a tiny dot to several inches. The majority of polyps are benign (non-cancerous) but the doctor cannot always tell a benign from a malignant (cancerous) polyp by its outer appearance alone. For this reason, removed

polyps are sent to the pathologist for tissue analysis. Removal of colon polyps is an important means of preventing colorectal cancer.

- To biopsy a mass discovered on a colon x-ray
- To detect possible recurrent polyps or cancer
- To evaluate improvement or progression of Inflammatory Bowel Disease (such as Crohn's or Ulcerative Colitis)

Prior to Procedure

1. Continue all of your current medications unless you are told otherwise.
2. Please notify us if you have:
 - Prosthetic heart valve
 - history of endocarditis
 - systemic pulmonary stent
 - synthetic vascular graft (< 1 year old)
 - complex cyanotic congenital heart disease
3. Stop iron supplements and vitamins that contain iron three days prior to procedure.
4. If you are diabetic and on medications, please check with your primary physician regarding instructions.
5. You may want to purchase aloe wipes, Desitin or A&D ointment to help prevent a sore bottom.

When you arrive, the nurse will explain the procedure to you and answer any questions you might have. He/she will check your blood pressure and pulse. You will have a small instrument clipped lightly onto your index finger to monitor your breathing and heart rate during the examination. The nurse will ask you to change into a gown.

A small intravenous needle (IV) will be inserted. This serves as a pathway to give you medication to help you relax and lessen your discomfort.

These medications will make you sleepy and relaxed but do not put you to sleep. The effects of these medications may persist throughout the day. Therefore, we ask that you do not plan on working, driving a car, or working around machinery for the remainder of the day. Your procedure may be canceled if you do not arrange for transportation home.

What is Moderate Sedation?

This type of sedation induces an altered state of consciousness that minimizes pain and discomfort through the use of pain relievers and sedatives. When receiving moderate sedation you should be able to speak and respond to verbal cues throughout the procedure/test and are able to communicate any discomfort to the healthcare provider. A brief period of amnesia may erase any memory of this procedure/test.

Risks of procedural sedation:

As with any procedure there are some risks, however these occur rarely. Potential risks are:

- Respiratory depression
- Respiratory arrest
- Low blood pressure
- Agitation
- Inability to arouse

Benefits of moderate sedation:

- Decrease anxiety related to procedure/test
- Make procedure/test more comfortable with less pain
- Shortened recovery room stay
- You will be aware of surroundings
- You will be sleepy, but can be easily awakened with touch or talking

Monitoring During Moderate Sedation

You will be properly monitored by a trained healthcare provider. Your healthcare provider will monitor your vital signs such as heart rate, blood pressure, breathing, oxygen level and alertness during the procedure/test and after the procedure/test.

After moderate sedation you should not drive yourself home or operate dangerous equipment or machinery for the remainder of the day. Judgement can be affected by medications and it is important not to sign any legal papers for 24 hours after receiving any medication for sedation. We recommend that someone be with you for 24 hours after sedation.

What is a Colonoscopy?

A colonoscopy enables the doctor to examine the lining of the colon (large intestine) for abnormalities by inserting a flexible tube as thick as your pinkie finger into your anus and slowly advancing it into the colon.

You will be asked to lie on your left side on an exam table. The doctor will insert the colonoscope into your rectum and gently guide the scope to examine the entire colon. Air will be inserted through the scope to inflate the colon to allow the doctor to evaluate the lining of the colon. This air may cause you to feel cramps, bloating, gassiness, or the urge to have a bowel movement. This should not concern you since your colon is free of waste material. This feeling will ease as the doctor withdraws the scope.

If during the examination any inflammation, irregularity, or growth is discovered, your doctor may remove or biopsy it. You do not feel any discomfort if the doctor removes polyps or takes biopsies.

The entire procedure will last about 15-30 minutes.

The doctor will talk to you and any family members after the examination to let you know the findings. If any biopsies or polyps were removed, you will be notified in about a week with that report. If for some reason you have not received the biopsy report from your doctor in a week, please call his/her office.

After the exam you will be asked to expel the air from your colon. It is important that you do not “hold it” as it can cause painful cramps. Plan on spending a total of 2 1/2 hours in the Procedure Center. You will be discharged with your responsible adult driver approximately one hour after your procedure. Most patients can resume their diet at that time.

Risks

It is your right as a patient to be informed of the risks or possible complications before you decide whether or not to have the recommended colonoscopy.

One possible complication is a perforation or tear through the bowel wall which would require surgery. Bleeding can occur from the site of biopsy or polypectomy. It is usually minor and stops on its own or can be controlled through the scope. Rarely, blood transfusions are necessary or surgery may be required to stop the bleeding. It's also possible to miss lesions. Other potential risks include a reaction to the medications used and complications from heart or lung disease. Localized irritation of the vein where medications were injected may cause a tender lump lasting for several days, but this will go away eventually. Applying hot packs or hot moist towels will help relieve discomfort. Although

complications are rare, it is important for you to recognize early signs of any possible complication. Contact the physician who performed the colonoscopy if you notice any of the following symptoms: severe abdominal pain, shortness of breath, fever and chills, or rectal bleeding of more than 1/2 cup. Bleeding could occur up to 2 weeks after polypectomy.

Colonoscopy and polypectomy are generally safe when performed by a physician who has been specially trained and is experienced in these endoscopic procedures.

Alternatives

The most common alternative to colonoscopy is a colon x-ray (barium enema or lower GI). Barium is introduced into the colon and, as you hold the barium, your abdomen is x-rayed. Abnormalities may be detected on the colon x-ray, however, this procedure may not be as accurate as a colonoscopy. During a colon x-ray if a polyp or abnormality is found it can not be biopsied or removed. If an abnormality is found on a colon x-ray, it may be recommended to have a colonoscopy done to further evaluate, biopsy, or remove a polyp in the colon.

Benefits

- To detect the cause of rectal bleeding
- To remove colon polyps
- To determine the presence or absence of colon cancer within the range of the scope

Preparation

Follow the procedure instructions provided. Effective colon preparation is an essential component of the colonoscopy. Inadequate preparation limits detection of polyps and other findings.

Your stool should be watery in consistency. It doesn't have to be clear in color like water since the digestive juices will continue to tint the stool yellow. Weakness can also occur, especially if you have not taken enough fluid with the prep, and can be remedied by increasing fluid intake.

If you have any questions at all regarding the preparation please feel free to call the nurse in the Ambulatory Procedures at 701-780-6394.



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