COLONOSCOPY INFORMATION SHEET

Your physician has recommended you to undergo a colonoscopy. This is a test using a lighted tube, or scope, which will allow the physician to examine your entire colon. (Large intestine) During the evening prior to your test, you will be asked to "prep" yourself at home. This is a process of cleaning out your colon so that your physician can clearly see the bowel and provide you with a complete exam. Depending on your health history this will involve drinking clear liquids the whole day before, after which a prep packet provided by your gastroenterologist will also need to be completed.

It is very important that you follow the instructions and complete the entire prep.

Your test will be performed in an ambulatory endoscopy center. An IV needle will be inserted, and you may possibly receive an antibiotic or IV fluids prior to the procedure. The procedure will be performed in a GI Endoscopy Lab. Your physician will administer IV sedation prior to your procedure to make you sleepy. If you are allergic to any medications, be sure to notify your physician. Alternative medications will be administered if necessary. You will receive supplemental oxygen through your nostrils during the procedure, and your blood pressure, heart rate, and blood oxygen concentration will be constantly monitored during the procedure.

After you are sedated, your physician will perform a rectal exam after which he will carefully insert the scope into your rectum and advance it through the entire colon to the cecum--the first segment of the large intestine where your appendix is located. As the scope is being advanced, your physician will be inserting air into your colon through the scope. This is necessary so that he or she can see the inside of the colon adequately. This may cause some cramping. If you feel the need to expel gas, we encourage you to do so. If you are having much discomfort, please let the nurse and the doctor know. They may be able to alter their technique to make you more comfortable.

While the scope is being advanced through the colon, you may be asked to change positions slightly to enable the physician and nurse to advance the scope more easily and comfortably. Additionally, the nurse may support your abdomen in various places with gentle pressure to also aid in the passage of the scope.

As your physician slowly withdraws the scope, he or she will carefully examine your colon for any abnormalities. If during the procedure, your physician discovers any abnormalities, he or she may wish to take some biopsies. This is performed through the scope with a pinching instrument. Taking biopsies is completely painless. If your physician finds a polyp (a small benign growth in the colon which may have the potential to become cancerous in years to come) he or she may attempt to remove it if it appears that it can be done safely. Not all polyps can be safely removed with the colonoscope. This procedure is called a polypectomy, and it involves encircling the polyp with a snare (a wire loop) which can shave off the polyp when a weak electrical current is passed through the wire.

When the procedure is completed, you will return to the **GI Observation Room**. While the sedative medications are wearing off, your nurse will check your vital signs frequently. **Be** sure to tell your nurse if you experience any nausea, vomiting, or abdominal pain. After about 45 minutes of observation, if no problems have arisen, you will be discharged home with specific instructions with respect to diet, medications, activity, and follow-up visit with your physician.

Unfortunately, complications may arise from having this procedure performed as they may with any other procedure or surgery. Medication reactions may occur, so be sure to make your physician aware of any drug allergies, drug sensitivities, or other medical conditions of which you are aware. Bleeding may occur in less than 1% of cases. This may require blood transfusion and, rarely surgery. The most serious complication associated with a colonoscopy is perforation which is a hole or tear somewhere in the lining of the GI tract. If this should occur, then surgery may be necessary, but perforation occurs in less than one half of 1% of all colonoscopy cases.

A colonoscopy is a safe and effective diagnostic test which may also allow the physician to potentially cure your problem without the need for additional surgery. If you have any questions at all, be sure to ask your physician.