

## COLONOSCOPY/GASTROSCOPY

At the Fernie Elk Valley Hospital, **1501 5<sup>th</sup> Ave, Fernie; 250-423-4453**  
Please bring picture I.D. with you and check in at the Front Registration Desk.

**Date:** \_\_\_\_\_

**Arrival Time:** \_\_\_\_\_

**Please call 250-423-8959 TWO WEEKS PRIOR to confirm your appointment.**

If you require an appointment change, please call 250-423-8959 as soon as possible.

Or email confirmation to: [booking@ferniegastro.ca](mailto:booking@ferniegastro.ca)

If you do not confirm, your appointment will be cancelled.

**Read all the instructions below before you start your bowel preparation.**

**It is NOT recommended to travel out-of-country within 14 days after this procedure.**

**PREPARATION FOR ENDOSCOPY - You can expect to be at the hospital for 2-4 hours.**

### **Medications:**

- Discontinue anti-inflammatories (Advil, Ibuprofen, Aleve, etc) **5 days** prior to procedure
- Tylenol is acceptable
- Do not take diabetic medications the day before or the morning of the examination, please bring your medication with you.
- **Most other medications (i.e. aspirin, cardiac and blood pressure medications) should be continued as usual on the morning of procedure with a sip of water unless advised by your family doctor or Dr. Chalmers-Nixon to hold them. It is important to take your usual medications such as heart/blood pressure, Asthma prior to procedure**
- Patients on Plavix, Coumadin or Pradex need to follow Dr. Chalmers-Nixon's advice on dose. Please ensure you know the plan 2 weeks before the procedure.

**If you have a history of kidney failure or heart failure DO NOT take PICO-SALAX. Please inform Dr. Chalmers-Nixon if you have a heart valve problem that has been repaired by surgery. Contact your doctor for further instructions.**

### **Bowel Preparation:**

Please purchase one box of **PICO-SALAX** (Contains 2 packages) and **4 DULCOLAX** (Bisacodyl) tablets from your pharmacy. No prescription is required.  
Please disregard the instructions on the box and follow the included instructions.

- **Four days before** your tests, stop eating fruits/vegetables that contain seeds or nuts (i.e. multigrain breads, tomatoes, cucumbers, kiwi, strawberries)  
Discontinue any fiber supplements (i.e. Metamucil, Benefiber, Prodiem)
- **Two nights before** your procedure                      DATE \_\_\_\_\_
  - At 8 pm: Take 2 Dulcolax (Bisacodyl) tablets. **NO solid food or milk after this point.**
- **The day before** your procedure                      DATE \_\_\_\_\_
  - DRINK ONLY CLEAR FLUIDS, NO SOLIDS OR DAIRY ALLOWED for the day
  - At 5 pm: Mix and drink the first packet of Pico-Salax  
(Stir for 3 min and allow to cool prior to drinking)
  - Drink at least 8 large (8oz) glasses of clear fluids over the next 3 hours
  - At 8 pm: Mix and drink the second packet of Pico-Salax

(Stir for 3 min and allow to cool prior to drinking)

- Drink at least 8 large (8oz) glasses of clear fluids over the next 3 hours
- At 9 pm: Take another 2 Dulcolax (Bisacodyl) tablets

- **Don't take any medications until at least 2 hours after drinking the Pico-Salax.**
- **Do NOT drink any further liquids after midnight or the morning of your procedure**

**Due to sedation, you cannot drive your car for the next 24 hours, as legally, you are considered impaired. For your safety, please arrange to have someone drive you home.**

#### **ACCEPTABLE CLEAR FLUIDS**

Sports drinks(Gatorade/Powerade), CLEAR fruit juices:apple, white grape/cranberry, lemonade, Clear soups:broth, boullion, water, Kool-Aid, Iced Tea, juice, popsicles, Jello, gingerale, sprite,

7-up, Tea, coffee (no Pepsi, Root Beer or Coke),

**NO MILK OR DAIRY PRODUCTS/SUBSTITUTES**



**Avoid RED, BLUE and PURPLE colored beverages**

For an overview of your procedure, visit this website:

[http://www.cag-acg.org/news/guidelines/education\\_videos.aspx](http://www.cag-acg.org/news/guidelines/education_videos.aspx)

## Frequently Asked Questions and Answers

**1. What is a colonoscopy?**

A colonoscopy is the insertion of a long flexible tube, about the thickness of a finger. It is inserted in the rectum and into the large bowel (colon) and allows the doctor to examine the lining of the colon. This usually takes 20-30 minutes. If the doctor feels that it is necessary, she/he can pass an instrument through the colonoscope and take a small piece of tissue (a Biopsy) for examination in the lab.

**2. What is a polypectomy?**

During the colonoscopy, a polyp may be found. Polyps are abnormal growths of tissue which vary in size from tiny dots to several centimeters. If your doctor feels that it is necessary, she/he will pass a wire loop (snare) around the polyp to remove it from the wall of the bowel. You should feel no pain during the polyp removal.

**3. What should you expect during the procedure?**

Your doctor will give you medications through an intravenous in your vein to make you relaxed and sleepy. A colonoscope will be inserted through the rectum and advanced through the colon. The lining of the colon will be examined. There may be some discomfort or cramping during the colonoscopy, however the procedure is usually well tolerated and rarely causes pain.

**4. What happens after the colonoscopy?**

You will be observed in the endoscopy unit until the effects of the medications have worn off. Recovery usually takes 60 minutes. You may feel bloated as a result of air that is introduced into the colon during the procedure. You will be able to resume your regular diet after the colonoscopy unless instructed otherwise. You are legally impaired for 24 hours and cannot drive for 24 hours. It is NOT recommended to travel out-of-country within 14 days after the procedure.

**5. Are there complications from colonoscopy or polypectomy?**

Colonoscopy and polypectomy are safe and associated with very low risk when performed by physicians who have been specifically trained in these procedures. Complications do occur in 2 in 1,000 patients however.

**Possible complications:**

**Perforation** - a tear through the wall of the bowel that may allow leakage of intestinal fluids. This is a rare complication and occurs in less than 0.1% of patients. The complication usually requires surgery but in some cases can be managed with antibiotic and intravenous fluids.

**Bleeding** – may occur from the site of biopsy or polyp removal. It is usually minor and will stop on its own. In rare cases, blood transfusions or surgery may be required.

**Localized irritation of the vein** – may occur at the site of medication injection. A tender lump may develop and remain for several weeks or months, it will eventually resolve.

Other potential risks include **drug reactions** and complications from unrelated diseases such as heart attack and strokes. **Death** is extremely rare but remains a very remote possibility.

If you experience any problems post procedure, please contact your physician's office or go to your nearest emergency department.