What happens after the procedure?

- You will be taken to the recovery room for observation until sedation wears off.
- Once your blood pressure, pulse, and breathing are stable and you are awake and alert, you may be discharged to your home in case of day care procedure. If you are going home, someone must drive you.
- Some minor discomfort such as gas, bloating, or mild cramping — is normal after a colonoscopy. These symptoms should go away within 24 hours. Passing gas or walking around may help reduce discomfort
- Small amounts of blood in the first bowel movement following the procedure are also normal. However, it is important to consult a doctor if the bleeding continues or the stool contains large amounts of blood or blood clots.



Are there any risks?

A colonoscopy is a safe examination for most people and serious complications are very uncommon. The team is trained to detect and treat complications. The possible risks are

- A tear (perforation) is rare and may need surgery
- Bleeding may occur at the site of biopsy; this usually stops on its own.
- Breathing difficulty due to the sedation or allergic reaction to anaesthetic drugs

One stop solution for your GI and Liver problems

- GI and Liver Consultations
- OGD scopy
 Colonoscopy
- Capsule Endoscopy
 PEG tube insertion
- Variceal banding and sclerotherapy
- Esophageal metal stenting, balloon dilatation
- ERCP with stenting
 NJ tube insertion
- EUS (Endoscopic ultrasound)
- Cholangioscopy
 Foreign body removal
- POEM
 ESD/EMR polypectomy
- Endoscopic bariatric procedures
- Esophageal/ Rectal manometry with pH study

Get In Touch With Us



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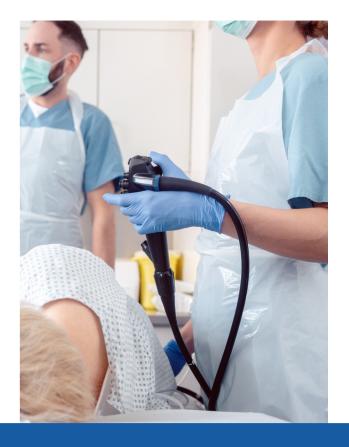


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ADVANCED ENDOSCOPY SOLUTIONS







LOWER GI ENDOSCOPY (COLONOSCOPY)

Diagnostic and Therapeutic

What is Lower GI Endoscopy (Colonoscopy)

A colonoscopy is an an endoscopic procedure used to examine the large intestine (colon) and rectum.

During a colonoscopy, a long, flexible tube (colonoscope) about the width of a finger is inserted through the anus and into the rectum and colon . A tiny light and video camera at the tip of the tube allows the doctor to view the inside of the entire colon and rectum. Special instruments can be passed through the colonoscope for various diagnostic and therapeutic procedures, if needed.

Who needs a Lower GI endoscopy

LGI scopy is necessary for the diagnosis and treatment of ulcers, inflammations, cancers, stricture, bleeding, etc in the lower GI tract. You may need a lower GI scopy if you have

- Abdominal pain, chronic diarrhoea or rectal bleeding
- Screening for colon cancer: Colonoscopy is the gold standard screening test for colorectal cancer. It can detect early stage colorectal cancer before symptoms develop. It is recommended in those with

 a. first degree relative with a
 history of colon polyps or colon cancer
 b. at higher risk due to their personal medical history
 c. are aged 50 or older, even if no other risk factors are present
- Surveillance and follow up of patients with colonic polyps



Preparing for a Lower GI scopy

- Cleansing the bowel is essential for a successful colonoscopy. You will need
- 1. Dietary changes: The day before the procedure, eating only a light breakfast and lunch with no evening meal or consuming a liquid-only diet lis recommended.
- Clear liquids only: The doctor may ask the person to drink only water, tea and coffee without milk the day before the procedure.
- 3. Laxatives: It is usually necessary to take laxatives the day before the procedure, either in pill or liquid form. Sometimes, you may also need to take them on the morning.
- 4. Enemas: Some people may need to use an enema kit the night before or on the morning of the procedure.
- Showering or bathing: It is a good idea to shower or bathe before the examination.
- A relative needs to accompany the patient.
- A written informed consent will be taken.
- Patient needs to inform doctor regarding medical conditions, current medications and allergies if any.

What happens during a Lower GI scopy

- You will be asked to wear hospital gown, remove jewellery or other objects that may interfere with the procedure.
- An IV (intravenous) line may be placed in your arm or hand. A medicine to relax you (a sedative) will be injected into the IV.
- Your heart rate, blood pressure, respiratory rate, and oxygen level will be checked during the procedure.
- You will lie on your left side on the OT table with your head bent forward.
- The doctor will guide colonoscope tube into your rectum
- The doctor may use air or carbon dioxide to inflate the colon to facilitate a better view.
 When this occurs, or when the doctor moves the colonoscope, the person may feel stomach discomfort or an urge to pass stool.
 These effects are normal.
- Small tools may also be inserted into the endoscope. These tools can be

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 - a. Take tissue samples for a biopsy
 - b. Inject air or fluid
 - c. Stop bleeding
 - d. Do procedures such as endoscopic surgery, laser therapy, or open (dilate) a narrowed area, inserting metal stents ,etc.
- The procedure may take 30 to 60 mins on an average, depending on indication.
- After the exam and procedures are done, the tube will be taken out.



Endoscopic image of the colon