

If you have any further enquires or if any problems arise after you have gone home please telephone:

The Endoscopy Unit on 01276 604858 (8:00am - 18:00, weekdays)

Or Surgical Helpline on 01276 526960 (24 hours)

### Questions?

The staff involved in your care have written this information sheet to make your admission and care as smooth as possible. If you think of any issues you wish to discuss at your next visit please record them in the space provided.

### Booking your appointment

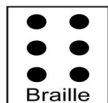
The Endoscopy booking office will be in contact to provide you with an appointment for your procedure. However, if you would like to choose your appointment immediately please contact the **Booking Office on: 01276 526647**

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or



please contact the  
Patient Advice & Liaison Office on  
 01276 526706



## ENDOSCOPY DEPARTMENT

**COLONOSCOPY**

## INFORMATION FOR PATIENTS

You have been advised to have an examination called a colonoscopy to help find the cause for your symptoms.

This examination will be carried out at Frimley Hospital within the endoscopy unit, this is located on the first floor. Enter the hospital via the main entrance and proceed to the first floor via the stairs or lift, turn left along yellow street and first right down green street, the endoscopy unit is half way down this corridor on the left hand side.

Please note that the time you are asked to attend is not an appointment time for your actual procedure. Nursing staff have first to take some admission details from you and do other health checks or may need to take blood if you are on anticoagulants (blood thinners).

Every effort will be made to ensure that you are treated promptly, but it is difficult to give precise timings as several different procedures are done on each list and timings can vary considerably. We have 5 procedure rooms so will usually have 5 separate sessions running at any one time.

**Patients with AM appointments** should be ready for discharge between 1100 hours and 1300 hours depending on when the procedure is done.

**Patients with PM appointments** should be ready for discharge between 1600 hours and 1800 hours.

As you may be having a sedative and pain killing injection, it is essential that someone is available to collect you from the Unit and drive you home. Ideally you should have someone with you on the evening of the procedure if you have had sedation. It is not advised that you go home by taxi alone. You can travel by taxi if someone else is with you other than the taxi driver.

### **What to expect after the examination**

If you have had sedation and painkillers you will rest quietly in the recovery area until the main effects of sedation have worn off. This usually takes about half an hour. You will need someone to collect you from the department and drive you home., and you will not be able to drive for 24 hours . You can also use a gas called Entonox which can be helpful for this type of procedure, and which will not affect your driving afterwards.

### **If you have not had sedation you may go home straight away.**

You can eat and drink normally afterwards unless advised otherwise.

Please ensure you rest quietly for the remainder of the day.

Before you go home, a nurse will go through the endoscopy report with you, and will give you the aftercare leaflet. You will be given a copy of the endoscopy report, further copies of which will be filed in your hospital notes and sent to your GP. If specimens have been taken for examination in the laboratory, the results will take approximately 2-4 weeks.

Details of any further investigations or appointments will be included in the endoscopy report, which will be discussed with you before you leave.

### **Sources of further information:**

*Patric* Centre in the main entrance to Frimley Hospital or visit their website: [www.frimleypark.org.uk/information/patric/leaflets.php](http://www.frimleypark.org.uk/information/patric/leaflets.php)

### **What to expect before the examination:**

The doctor or nurse will explain the procedure to you and will be happy to answer any questions you may have. You will have your pulse and blood pressure taken and will be asked some questions regarding your previous medical history. Diabetic patients will have their blood glucose levels checked.

You will be asked to sign a consent form, giving your permission for the examination to be done. You will be asked to put on a hospital gown and asked to remove any glasses, contact lenses, dentures, and jewellery. Rings may be taped rather than removed if preferred.

### **What to expect during the examination**

In the treatment room you will be made comfortable on a couch. A nurse will be present throughout the procedure to care for you and support you. You will be asked to lie on your left hand side, with your knees slightly bent to begin with, but may be asked to alter your position during the procedure. If you have sedation, a small peg will be put on your finger to monitor your pulse rate and oxygen levels, you will also be given oxygen through a face mask.

The procedure is shown on a TV screen and you may watch if you wish to.

The colonoscope will be passed through the back passage and advanced through the colon. Air is introduced through the scope during the examination to distend the colon and give a clearer view of the lining. This may cause some cramp like discomfort at time but should pass quickly.

The procedure can take from about 15 minutes to an hour to complete, depending on how twisty the bowel is and whether any procedures need to be done.

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It is also recommended that if you have had sedation or the strong analgesics used for this procedure that you do not operate machinery or make important decisions for 24 hours, as these drugs can impair your reflexes and your judgment.

**We are happy to do the procedure without sedation or painkillers and many patients cope very well with this. However, it is very important that you have made arrangements as otherwise the procedure may have to be abandoned.**

### **What is a colonoscopy?**

Colonoscopy is a test that allows the endoscopist to look directly at the lining of the colon (large bowel or intestine). It is performed by passing a colonoscope through the anus (back passage) into the large bowel. The colonoscope is a long flexible tube with a bright light at the end which is connected to a television system. This enables the endoscopist to have a clear view and to see whether or not disease or inflammation is present. During the examination the endoscopist may need to take some samples for analysis, this is done through the colonoscope and is painless. Some treatments can also be done through the colonoscope.

These include:

- Removing polyps (abnormal growths of tissue) using an electrical current (diathermy)
- Treating areas of bleeding.

## The Risks

Colonoscopy is classified as an invasive procedure and therefore carries risks complications. Perforation or tear to the lining of the colon (risk is less than 1: 1,000 cases). The risk of perforation or bleeding is increased if it is necessary to perform certain procedures, such as when a narrowing or growth is found, or when a polyp is removed.

- Bleeding at the site of a tissue sample (biopsy), or polyp removal which nearly always stops on its own.
- Allergic reaction to the drugs used.
- Abdominal tenderness and bloating.

## What to bring with you to hospital

Please bring the name and telephone number of the person who will be collecting you and taking you home. Due to limited space on the unit it is not possible for relatives or friends to stay on the department whilst you are there.

Please also bring details of any medicines you are taking, particularly if you are allergic to any medicines.

**If you take blood thinning medicines such as Warfarin, Dabigatran, Aspirin or Clopidogrel, and the person who booked the test for you has not given you advice about stopping these drugs before your test, please ring the Endoscopy Unit for advice at least one week before your appointment. The number is at the end of this leaflet.**

**If you are diabetic, please read our advice sheet for diabetic patients. If you have not received this, please telephone the Endoscopy Unit.**

Please **do not** bring any valuables with you, as the hospital cannot accept responsibility for the loss or damage to personal property during your time there.

## Preparation

To allow a clear view, the bowel must be completely clear of waste material. If it is not, certain areas may be obscured and it may be necessary to repeat the test.

You will be sent a laxative solution to drink the day before the test, with clear instructions for its use. It is very important that you drink plenty of fluids, and you can continue drinking clear right up to when the procedure is done. Water is provided on the unit.

**If you are also having an OGD, or gastroscopy, please stop drinking three hours before the procedure, but drink as much as possible before this.**

**If you are taking iron tablets, please stop taking them five days before your examination.**