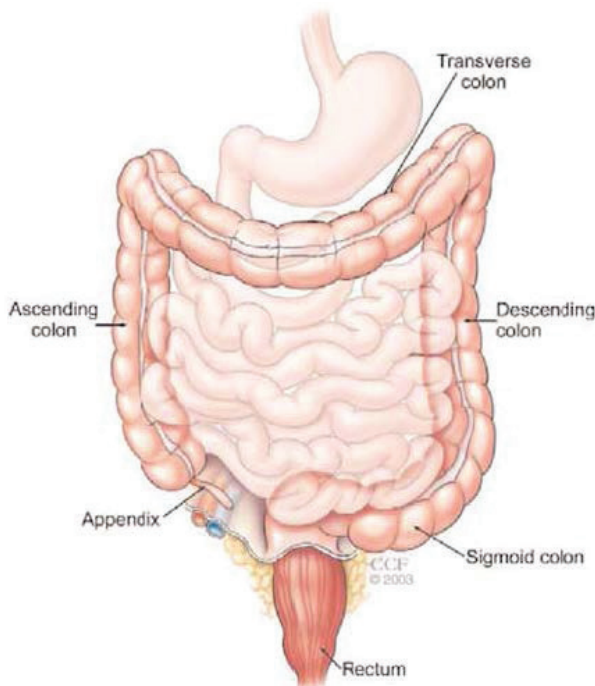


Colonoscopy Procedure Overview

PLEASE READ PRIOR TO THE PROCEDURE

What is a Colonoscopy

A colonoscopy is an outpatient procedure in which the inside of the large intestine (colon and rectum) is examined. A colonoscopy is commonly used to evaluate gastrointestinal symptoms, such as rectal and intestinal bleeding, abdominal pain, or changes in bowel habits. Colonoscopies are also performed in individuals without symptoms to check for colorectal polyps or cancer. A screening colonoscopy is recommended for anyone 50 years of age and older. For anyone with parents, siblings or children with a history of colorectal cancer or polyps, a screening colonoscopy may be recommended earlier than age 50.



Reasons for the Procedure

Reasons for performing a colonoscopy include screening and prevention of colon cancer, follow-up of prior polyps or cancer, evaluation of symptoms (such as bleeding/pain/diarrhea/constipation), evaluation of anemia, and evaluation or monitoring of inflammatory bowel disease.

What Happens Before a Colonoscopy

To have a successful colonoscopy, your bowel must be empty so that your physician can clearly view the colon. **To do this, it is very important to read and follow all of the instructions given to you at least 2 weeks BEFORE your exam.** If your bowel is not empty, your colonoscopy will not be successful and may have to be repeated.

If you feel nauseated or vomit while taking the bowel preparation, wait 30 minutes before drinking more fluid and start with small sips of solution. Some activity (such as walking) may help decrease the nausea you are feeling. If the nausea persists, please contact the Endoscopy Department at 802-447-5025 (during office hours). After office hours, please call the switchboard at 802-447-6361 and request a return call from the endoscopy nurse on call.

You may experience skin irritation around the anus due to the passage of liquid stools. To prevent and treat skin irritation, you should:

- Apply Vaseline® or Desitin® ointment to the skin around the anus before drinking the bowel preparation medications. These products can be purchased at any drugstore.
- Wipe the skin after each bowel movement with disposable wet wipes instead of toilet paper. These may be found in the toilet paper or baby care area of the store.
- Sit in a bathtub filled with warm water for 10–15 minutes after you finish passing a stool; after soaking, blot the skin dry with a soft cloth, apply Vaseline® or Desitin® ointment to the anal area, and place a cotton ball just outside your anus to absorb leaking fluid.

What Happens During a Colonoscopy

During a colonoscopy, an experienced physician uses a colonoscope (a long, flexible instrument about 1/2 inch in diameter) to view the lining of the colon. The colonoscope is inserted into the rectum and

advanced through the large intestine. If necessary during a colonoscopy, small amounts of tissue can be removed for analysis (a biopsy) and polyps can be identified and entirely removed. In many cases, a colonoscopy allows accurate diagnosis and treatment of colorectal problems without the need for a major operation.

- You are asked to wear a hospital gown and an IV will be started.
- If you are having conscious sedation with your colonoscopy, you are given a pain reliever and a sedative intravenously (in your vein). You will feel relaxed and somewhat drowsy. You may feel mild cramping during the procedure. Cramping can be reduced by taking slow, deep breaths. Your comfort is extremely important to us. Please let us know how you are doing during the procedure. If you feel that you need or want more medication, let us know, because we can almost always give additional doses. Most people are awake and alert enough to watch the whole procedure on TV.
- If you're having monitored anesthesia care (heavy sedation), you will be asleep throughout the procedure.
- You will lie on your left side, with your knees drawn up towards your chest.
- A small amount of air is used to expand the colon so the physician can see the colon walls.
- The colonoscope is slowly withdrawn while the lining of your bowel is carefully examined
- The procedure lasts from 30 minutes to 1 hour.

What Happens After a Colonoscopy

- You will stay in a recovery room for observation until you are ready for discharge.
- You may feel some cramping or a sensation of having gas, but this quickly passes.
- If sedation has been given, **a responsible family member or friend must drive you home.**

- Do not drink alcohol, drive, or operate heavy machinery for the rest of the day following the procedure.
- Unless otherwise instructed, you may immediately return to your normal diet. We recommend you wait until the day after your procedure to resume normal activities.
- If polyps were removed or a biopsy was taken, the physician performing your colonoscopy will tell you when it is safe to resume taking your blood thinners.
- If a biopsy was taken or a polyp was removed, you may notice a little amount of rectal bleeding for 1 to 2 days after the procedure. If you have a large amount of rectal bleeding, high or persistent fevers, or severe abdominal pain within the next 2 weeks, please go to your local emergency room and call the physician who performed your exam.

Potential Risks of the Procedure

Possible complications of this procedure include, but are not limited to: bleeding and tearing or perforation of the bowel wall. These complications, should they occur, may require surgery, hospitalization, repeat colonoscopy, and/or a transfusion.

Perforation of the bowel is a known but rare complication which can occur at a rate of 1 per 1,000 colonoscopies. Bleeding, usually after a polyp removal, can occur at a rate of 1 per 1,000 colonoscopies and continue up to two weeks after a polyp is removed. Other extremely rare but serious or possibly fatal risks include: difficulty breathing, heart attack, and stroke.

Polyps, especially small ones, can be missed 5–10 percent of the time, and in rare cases a colon cancer can be missed. Colonoscopy does not guarantee that you will not develop colon cancer, but removing polyps is documented to significantly decrease your risk of colon cancer in the future.