

Colonoscopy - Day case

Your Colonoscopy - Some Information

These notes give a guide to your stay in hospital. They also give an idea about what it will be like afterwards. They do not cover everything. If you want to know more, please ask.

What is the problem?

Your symptoms point to your lower bowel being the cause of your condition. So far the tests have not been too helpful. The best way of finding out now is to do a colonoscopy. It has not been suggested before because it is a bit complicated and needs a short stay in hospital in the Day Procedure Unit.

Some patients, such as those who have had a polyp in the bowel, need to have repeated colonoscopies to check that the bowel is healthy.

What does a Colonoscopy (collor-noss-copy) consist of?

A colonoscopy means passing a flexible telescope (colonoscope) up the back passage into the lower bowel (colon) for a distance of about 5 feet (1.4 metres). Snippets of tissue can be taken, and polyps can be snared during the test.

The bowel has to be cleaned out beforehand to give a clear view. A sedative is injected into a vein to cover the test. You will be unaware of what is happening.

Are there any alternatives?

Leaving things as they are is really too risky for you. The tests so far are not an answer in themselves. A colonoscopy at this stage is better than an operation.

Other forms of scanning are not as useful as a colonoscopy at this stage.

What happens before the operation?

**You will be provided with medication to clear the bowel.
Please follow the instructions closely**

INSTRUCTIONS FOR PATIENTS UNDERGOING COLONOSCOPY AS A DAY CASE

Please collect Fleet a bowel cleansing product from the Pharmacy Department at Coleraine Hospital (Portacabin beside Main Reception) between Monday - Friday 8.30 am, to 5.00 p.m.

Day prior to Colonoscopy

No solid food may be taken for breakfast, lunch or evening meal. The liquid “diet” indicated should be strictly adhered to,

1st Dose - at 7.00 a.m. (morning)

Dilute total contents of one bottle of Fleet (45 ml) in half a glass (120 ml) of cool water. Drink this solution, followed by one full glass (240 ml) of cool water,

Mid-day

Continue with at least three full glasses (720 ml) of water or clear liquid, more if desired. “Clear liquids” (e.g. water, clear soup, strained fruit juice without pulp, black tea or black coffee, clear carbonated and non-carbonated soft drinks).

2nd Dose - at 7.00 p.m. (evening)

Dilute total contents of the second bottle of Fleet in half a glass (120 ml) of cool water. Drink this solution followed by one glass (240 ml) of cool water. Additional “clear liquid” may be taken up until midnight if necessary.

Fleet produces a bowel movement in 1/2 to 6 hours. Expect frequent liquid stools.

Store Fleet below 25 °C. Do NOT refrigerate.

You are permitted to continue having clear fluids until midnight.

If you are taking Iron tablets please omit them 1 week prior to the examination. Aspirin and arthritis tablets should also be omitted. Please discuss with your own doctor.

On the day of the test

On the day of your test report to Coleraine Hospital Surgical One/Surgical Two/Route Day Procedure Unit at the time shown above. At this time you will be admitted to a bed prior to your investigation.

The Procedure Itself

Before the examination is carried out you will be given a sedative injection to help you relax and make the procedure easier. Colonoscopy is a safe procedure but occasionally bleeding and bowel damage may occur, especially if polyps have to be removed. After the procedure you may feel bloated and distended, this is quite normal as air is used to inflate the bowel, and you may pass wind to relieve this discomfort.

BECAUSE OF THE INTRAVENOUS SEDATION YOU MUST NOT DRIVE HOME AND YOU SHOULD NOT DRIVE A MOTOR VEHICLE FOR 24 HOURS AFTER THE PROCEDURE. PLEASE ARRANGE TO BE DRIVEN HOME OR TO BE TAKEN HOME IN A TAXI. YOU MUST BE ACCOMPANIED BY AN ADULT, RELATIVE OR FRIEND.

Welcome to the ward

You will be welcomed to the Day Procedure by the nurses or the receptionist. You will have your details checked. You will be shown to a cubicle. You will be asked to change into your nightwear. You may have some basic tests done, such as pulse, temperature, blood pressure.

You will be asked about any medicines or drugs you may be taking. Please tell the nurses of any allergies to drugs.

Transfer to theatre

You will be taken to the operating suite by a nurse and. You will be wearing a cotton gown. Wedding rings will be fastened with tape. Removable dentures will be kept with your personal belongings in a bag provided. There will be several checks on your details on the way to the Endoscopy room where your anaesthetic will begin. This will be in the form of heavy sedation.

You will not be fully asleep during the examination.

The colonoscopy is then performed.

What happens after the examination?

Coming round after the anaesthetic

Although you will be conscious a minute or two after the operation ends, you are unlikely to remember anything until you are back in your bed on the ward. Some patients feel a bit sick for up to 24 hours after operation, but this passes off. You will be given some treatment for sickness if necessary.

Will it hurt?

You may have slight tummy cramps as you get rid of air used during the examination.

Drinking and eating

You will be able to drink within an hour of the operation provided you are not feeling sick.

Later that day you should be able to manage of normal food.

Opening bowels

You may have diarrhoea for a day or two after the test.

What about informing my relatives and contacts?

With your permission, the nurses and doctors will keep your relatives and contacts up to date with your progress.

How long in hospital?

You can plan to go home within two hours of your colonoscopy, provided you have recovered from the examination.

The nurses will talk to you about your home arrangements so that a proper time for you to leave hospital can be arranged.

You will be given an appointment if necessary to visit the Surgical Out Patient Department for a check up about one month after you leave hospital. This usually is not necessary. The Nursing Staff or Medical Staff will tell you the result of your test.

After you leave hospital

You are likely to feel back to normal within 24 hours of the operation.

You should not drive, use machinery or make important decisions for 24 hours after the anaesthetic. This is because the drugs we use can slow the brain down for a time.

Driving

You can restart driving within 24 hours of the anaesthetic.

What about sex?

The test should not interfere.

Complications

Complications are rare and seldom serious.

The commonest although very rare are bleeding and perforation of the bowel.

If you think that all is not well, please ask the nurses or doctors.

If you have severe tummy pain three to four hours after your test contact your General Practitioner. There may be some bleeding for a day or two if a polyp has been snared. Ask your doctor if more bleeding occurs than this.

General advice

The test is a minor procedure and is generally very safe.

If you have any problems or queries, please ask the nurses or doctors.

Any Questions?

If you have any questions, jot them down here and ask the doctors or nurses for answers.

If your stay has been pleasant or you have any suggestions to improve the experience in Hospital please write to me at the address below. If any member of staff has stood out in your care again write to me. Positive feedback is always appreciated. Use the form overleaf to help with this.

Any complaints?

If you have any complaints, please contact the doctors or nurses straight away. If this does not solve the problem, please write to me at Surgical Unit, Causeway Hospital, 4 Newbridge Road, Coleraine. BT52 1HS.

Mr M G Brown, MD FRCS
Consultant Surgeon & Vascular Surgeon.

Have you any comments?

We welcome your comments and suggestions covering your illness, your treatment in hospital, and your recovery. Please write below any points you would like to make. If you prefer, you need not give your name.

Full name:

Hospital:

Ward:

Date of stay in hospital:

Operation:

Out patients department:

Your admission arrangements:

Your welcome on the ward:

Nursing staff:

General ward atmosphere:

Medical staff:

Ward orderlies:

Portering staff:

X-ray staff:

ECG staff:

Did you know who was who?:

Bedding:

Food and drink:

Privacy:

Locker space:

Toilets:

Bathrooms:

Other patients:

Noise:

Information:

Telephone/TV/radio/newspapers:

Timing of operation:

Preparations for your operation:

Going into the theatre:

In the operating theatre:

In the recovery room:

Coming back from theatre:

Intensive Care ward:

Recovery on the ward:

Pain control:

Sleeping:

Wound dressings:

Stitches, clips:

Progress reports:

Visiting hours:

Rest room:

Tablets, medicines, injections:

Going-home arrangements:

Out-patient follow up:

Anything else?

Please send this questionnaire to Mr M G Brown, Surgical Unit, Causeway Hospital, 4 Newbridge Road, Coleraine. BT52 1HS