Kensington Gastroenterology

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Endoscopy Colonoscopy Capsule Endoscopy

All appointments (08) 8331 3373

Name:		
Day:	_Date:	Admit at:
Hospital:		

Morning Colonoscopy – Picoprep

The aim of this preparation is to clean out the large bowel completely of both solid and liquid motion so that the lining of your colon can be examined effectively. To achieve this you will need to obtain **three Picoprep 15.5g sachets** from your chemist. Picoprep usually produces diarrhoea within 3 hours.

If you are taking iron tablets cease these 5 days before your colonoscopy but continue to take other medications.

The day before the colonoscopy:

Drink only clear liquids for breakfast, lunch and dinner. Clear fluids can be water, cordial, fizzy drinks, tea, coffee, Bonox, clear strained soups and juices, but no milk.

At 1pm, add the entire contents of one PICOPREP sachet to a 250ml glassful of warm water. Stir until dissolved. Chill for half an hour before drinking if preferred. Drink the mixture slowly but completely. This should be followed by adequate glasses of water or other clear liquids (at least a glass per hour) in order to prevent dehydration.

At 5pm, repeat the procedure with the second PICOPREP sachet. Continue drinking clear liquids.

At 9pm, repeat the procedure with the third PICOPREP sachet. Continue drinking clear liquids.

On the day of the colonoscopy:

Take your usual tablets with only a sip of water.

If you are diabetic, please bring your morning dose of insulin or tablets with you.

Fast for 5 hours before your appointment. (no food or drinks)

IMPORTANT:

Please be prepared to stay at the hospital for approximately 4 hours.

Because of the sedatives you will be given, you must not drive a car, sign important legal documents, or work with dangerous machinery for 24 hours after the procedure.

<u>Please make arrangements for a responsible adult to accompany you when you leave</u> hospital and stay with you overnight.

COLONOSCOPY: PATIENT INFORMATION SHEET

What is a colonoscopy?

Colonoscopy is a procedure used to see inside the large bowel (colon). This allows direct inspection of the lining of the bowel and gives important information about the possible cause of your symptoms and help to determine the best treatment. It is possible during the procedure to obtain small samples of tissue for examination under a microscope or to remove pieces of abnormal bowel tissue.

Preparation for colonoscopy

In order to perform a colonoscopy the bowel needs to be empty. This is achieved by using a preparation to clean the bowel. The choice of bowel preparation will depend on your age, general physical condition and other medical illnesses. Detailed instructions will accompany this information sheet which explains the preparation you are required to take.

Please note:

If you are taking iron tablets cease these five days before your colonoscopy. Please ensure the doctor has a full list of your current medications and is aware of all your other medical problems. Special arrangements are needed for people with diabetes, heart murmurs or artificial heart valves or taking Warfarin.

How is colonoscopy performed?

You will be given a sedative through a vein in the arm just prior to the procedure to make you more comfortable and slightly drowsy. The medication may result in you having little or no memory of the test.

The colonoscope is a long and highly flexible tube about the thickness of the index finger. It is inserted through the anus and then gently manoeuvred along the large bowel (colon). The procedure takes about 30 minutes.

Additional procedures

As cancer of the large bowel arises from pre-existing polyps (a benign wart-like growth), it is usual practice to remove any polyps which are found during the procedure. Most polyps can be removed by placing a wire loop around the base of the polyp and applying an electric current to snare off the polyp (polypectomy).

Safety/Risks

Whilst colonoscopy is the most accurate test for detecting bowel cancer, occasionally small lesions are not detected. Serious complications of colonoscopy are uncommon, occurring in about 1 in 1000 examinations. Complications which can occur include an intolerance of the bowel preparation solution or a reaction to the sedative used. The more serious complications include major bleeding or perforation in the bowel, and are generally more common following removal of polyps. Occasionally, these complications may require treatment by blood transfusion or surgery.

Afterwards

You will be taken to the recovery area to rest until the effects of the sedative have disappeared. This will generally take 1-2 hours. However, you must not drive a car, sign important legal documents or work with dangerous machinery for 24 hours after the procedure. If you have severe abdominal pain, fever, bleeding or other new symptoms after the procedure then you should mention this immediately to the staff in recovery. It is also possible that these symptoms might develop a few days after the procedure and if this is the case then you should contact your doctor immediately for advice.

When you are fully awake, you will be informed of the results of the test.