

MCH  
Hardstraat 12  
1970 Wezembeek-Oppem  
02/785.03.45

# Colonoscopy

For more information, please call:  
MCH reception: 02/785.03.45  
MCH nursing: 02/785.03.73 or 02/785.03.75  
Dr F. Staels: 02/252.52.25  
Dr J. Hulstaert: 02/252.28.76  
Dr J. Sneyers: 02/785.03.45

# Colonoscopy

A colonoscopy is an examination of the large intestine whereby a flexible tube known as a colonoscope is inserted via the rectum in order to carry out a visual examination of the inside of the entire large intestine and sometimes the tip of the small intestine, as well.

Other instruments can also be inserted through the colonoscope in order to take tissue samples for examination under a microscope or to carry out certain treatments, for example to stop bleeding, remove polyps, open up stenoses, etc.

***As a colonoscopic examination calls for very specific preparation, we urge you to read this information brochure carefully.***

Should you have any further questions or comments, please do not hesitate to ask the treating doctor, your general practitioner or a member of the MCH nursing staff.

<u>Practical details</u>	
The treating doctor has scheduled a colonoscopic examination for you on:	
Date:	
Period:	Time

- **Preparation**

The colonoscopy has to be properly prepared. It is important that you follow the various stages in the preparation carefully to ensure that the examination runs as smoothly as possible.

- **One week before the examination**

If you show any signs of blood coagulation disorders or if you are taking blood thinner medication (such as Sintrom, Marcoumar, Clexane, Fraxiparine, Clopidogrel, Plavix, Pradaxa, Xarelto or Eliquis), it is extremely important to inform the treating doctor before the examination. These drugs affect coagulation and may entail a considerable risk of bleeding during or after the examination.

In consultation with the treating doctor, this medication must be stopped temporarily if possible, or provisionally replaced.

- **As of three days before the examination**

Because food residues may impede the view during the examination, the intestine must be completely cleaned to ensure an efficient and safe examination. Consequently, it is very important to follow the preparation procedure set out below as closely as possible.

- For three days prior to the examination, you should follow a strict low-residue diet. This means no brown bread, whole-grain rice, fruit, vegetables, fatty meat, fizzy or alcoholic drinks, milk and dairy products, low-fat yoghurt or fatty cheese. A high fibre content in the stool makes thorough cleansing of the large intestine more difficult.

- The following foods are allowed: white bread, rusks, macaroni, spaghetti, white rice, soft white cheese, low-fat cheese, jelly, honey, degreased stock, lean, tender meat (such as chicken, turkey and veal), and lean fish (such as cod, ray, plaice, haddock, turbot and sole). Water, coffee and tea are allowed, as well.

- **Evening before the examination**

The actual preparation begins the evening before the examination. Buy a packet of Colofort from the pharmacy (available over the counter, without a prescription) to prepare for the examination. Colofort contains four sachets.

- Dissolve each sachet in one litre of still water. This gives you 4x1 litre.

- The evening before the examination, drink 2x1 litre between 6.30 pm and 8.30 pm.

This will open your bowels frequently. Before drinking it, you can have a light meal around 5.00 pm. Afterwards, you may just drink until 11.00 pm.

- Day of the examination

If your examination is scheduled for the morning, then the evening before you should drink the four litres of Colofort. After that, you must not eat or drink anything.

If your examination is scheduled for the afternoon, then you should drink two litres of Colofort the evening before and the other two litres on the morning of the examination. After that, you must not eat or drink anything.

***If you have to take medication in the morning, then it is best to discuss this beforehand with your general practitioner or the endoscopist.***

It may be necessary to give you an enema, as well. In that case, you will have to arrive earlier than your originally scheduled appointment.

***If the intestine does not seem sufficiently clear despite this preparation, inform the treating doctor or the nurse.***

- Day of the examination

- Companion

As you will be given a light sedative, it is advisable for someone to accompany you. You are not permitted to drive a vehicle later that day, as you will be given an anaesthetic.

Upon arrival at MCH, you should first report to the reception desk and then go to the waiting room on the first floor. The treating doctor or nurse will come and fetch you there.

- The examination

The colonoscopic examination takes about a quarter of an hour. A catheter (small tube) will be placed in your arm. A drug can be administered through this to ensure that the examination goes more smoothly (under slight sedation or pain relief). During the examination, the entire large intestine, and sometimes the tip of the small intestine as well, will be viewed and inspected. Biopsies may also be taken for further analysis. The results of this analysis may sometimes take a few days to come through and will be automatically forwarded to your general practitioner.

If polyps are found in the large intestine, which may be caused by a wide range of complaints, these are generally removed straight away, during the examination, and also analysed during a pathological anatomical examination.

- After the examination  
***As you are given a light sedative before the examination, after the procedure you have to remain on site until this substance has largely worn off.***

Immediately after the examination, you will be taken to a recovery room for observation, where essential parameters such as the oxygen content in the blood and your pulse will be monitored for some time.

***After the examination, you may experience stomach cramps or a bloated feeling.***

This is due to the air that was infused during the examination. This feeling will disappear quickly when you can pass wind. The treating doctor may decide to insert a small probe anally to ease the evacuation of the air.

Some bleeding may occasionally occur when a polyp is removed, and this may even last for several days after the examination. This blood loss is usually limited and generally stops by itself.

***If the blood loss continues, you should contact the treating doctor, a nurse or the emergency services.***

After the colonoscopy, the treating doctor will tell you the results of the examination and if necessary schedule any further examinations.

- **Returning home**  
Once you have been allowed to leave the recovery room, you may return home.

***Under no circumstances may you drive a vehicle on the day of the examination. It is also best to avoid taking important decisions for the remainder of the day.***

- Complications such as bleeding or perforation arise very rarely during a colonoscopy.  
Bleeding may possibly occur after the removal of a polyp. If there is any such bleeding, this is usually limited and stops spontaneously. Should the bleeding appear to be heavy, the endoscopist will attempt to stop it during the examination.  
Very exceptionally, a small perforation of the intestine wall may occur, and air may escape from the intestine to the surrounding tissue. This may cause a stinging sensation in the peritoneum and an additional surgical intervention is often required.

- Finally

If you have any further questions or concerns after having read this brochure, do not hesitate to consult the treating doctor or a member of the care staff. We will be happy to help you.

***Please do not forget to fill in and sign the consent form at the end of the brochure. This form will be included in your medical file so that full details are available.***

Finally, we assure you that everything possible will be done to ensure that your examination at MCH runs as smoothly as possible. Thank you in advance for your willing cooperation during the preparations and the examination itself.

**Your consent**

Your signature on this document confirms that you have received the necessary information before undergoing a colonoscopic examination, both in writing in this brochure and orally if you ask the treating doctor any additional questions.

Please sign and date this form and hand it in to the department carrying out the examination. This form will be kept in your medical file.

If you have any other questions, or anything is not quite clear to you, please do not hesitate to consult the treating doctor.

- Informed consent to colonoscopic examination

By signing this form, you declare that you have been given information in writing and orally about the various aspects of the colonoscopic examination and the possible complications.

You give your consent that, after receipt of this information, the examination may be carried out.

	Patient's name:	
	Date of birth:	
	Patient's signature:	
	Date:	