

Procedure Information Sheet – Colonoscopy (and Polypectomy if necessary)

Hosp No. :	HKID No.:
Case No. :	
Name :	
DOB :	M / F
Adm Date :	
Contact No. :	

1. Introduction

- 1.1. Colonoscopy is the procedure that allows direct visualization of the large bowel. This procedure involves passing an endoscope via the rectum into the large bowel. The endoscope is a long, thin and flexible tube attached to an optical system that allows the diagnosis and treatment. Compared with conventional X-ray examination, colonoscopy is more accurate in making the diagnosis. Therapeutic procedures can also be performed at the same time, such as endoscopic polypectomy, injection and tumor biopsy.
- 1.2. Indications:
 - 1.2.1. Suspected colorectal cancer
 - 1.2.2. Presence of rectal bleeding
 - 1.2.3. Presence of occult blood in stool
 - 1.2.4. Change of bowel habit
 - 1.2.5. Chronic diarrhoea
 - 1.2.6. Constipation
 - 1.2.7. Difficulty in defecation
 - 1.2.8. Family history of colorectal cancer or related cancer diseases
 - 1.2.9. Screening of colonic polyp
 - 1.2.10. Abdominal pain

2. Pre-operative Preparations

- 2.1. Patient should only take a low fibre diet, for example, no grains, vegetables and fruits three days before colonoscopy.
- 2.2. Try to take all the laxative as instructed, or else the examination cannot be proceeded.
- 2.3. However, if patient has severe sweating, palpitation, vomiting, dizziness and abdominal pain after taking the laxative, please stop and inform the medical staff immediately. Please go to the nearby hospital or nearest Accident and Emergency Department if condition deteriorated.
- 2.4. A written informed consent is required.
- 2.5. Eating and drinking should be avoided for at least six hours before the procedure.
- 2.6. Do not take any valuables or wear any metallic belongings or jewellery to the procedure room; dentures, glasses and contact lens should be removed.
- 2.7. Avoid having any make up or nail polish as it may interfere with the medical observations.
- 2.8. Patient should inform the medical staff of any major medical problems including diabetes, lung disease, heart disease, hypertension and pregnancy, or with pacemaker and implant.
- 2.9. Patient should provide information concerning of current medications used especially the use of antiplatelet and anticoagulation drugs and allergic history if any.
- 2.10. Patient must be accompanied by an adult relative or friend when leaving the hospital.
- 2.11. Heavy drinking, smoking or use of sedative before the procedure should be avoided.

3. Procedures

- 3.1. Prior to the procedure, depending on the individual patient's condition, sedation may be given to the patient to alleviate any anxiety and discomfort related to the procedure.
- 3.2. Patient should lie on his/her left side with knees bending.
- 3.3. Doctor will pass the colonoscope through the anus into the colon.
- 3.4. It is normal to feel mild abdominal distension and urging of bowel during the procedure.
- 3.5. The procedure will usually last for about 45 minutes but in complex cases that require additional therapeutic procedure it may take a longer time.

4. Post-operative Instructions

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- 4.1. The patient should resume diet only after the effects of any anaesthetic or sedative have worn off. This prevents choking with food or fluid intake.
- 4.2. Our medical staffs would inform the patient the result of the examination and if any drug treatment is suggested. Patient should follow the instruction given by our medical staff to complete the drug treatment.
- 4.3. If sedation is given, the patient should avoid operating heavy machinery, driving or signing any legal document for the rest of the day.
- 4.4. Patient may contact our Endoscopy Centre during office hours if there are any discomfort or enquiries about the procedure and result.
- 4.5. If patient has the following conditions such as passing large amounts of blood, severe abdominal pain, or fever, he/she should seek medical advice at the nearest hospital or Accident and Emergency Department.

5. Possible Risks and Complications

- 5.1. Colonoscopy is a very safe procedure. It is common to feel minor discomfort, such as abdominal pain and distension during the procedure.
- 5.2. Sedation induced complications, such as hypotension, respiration depression, shock and allergy.
- 5.3. Major complications include perforation, bleeding, cardiopulmonary complication, infection or acute intestinal obstruction. In general, the risk of the major complications is less than 1%.
- 5.4. The complication rate would be higher in the cases that require therapeutic procedures including polypectomy, endoscopic haemostasis, dilation or stenting. When major complications arise, emergency surgical treatment may be required.
- 5.5. The complication rate varies with patient's condition, complexity of the diagnostic and therapeutic methods performed. Patient should consult the physicians for the details of the endoscopic procedures.

6. References

- 6.1. American Society for Gastroenterology (ASGE) (2009). Patient information: Understanding colonoscopy.
- 6.2. Hospital Authority. Smart Patient Website.

I acknowledged the above information concerning the operation or procedure. I have also been given the opportunity to ask questions and received adequate explanations concerning the condition and treatment plan.

Patient/ Relative Signature: _____

Patient/ Relative Name: _____

Date: _____