Centre intégré de santé et de services sociaux de Lanaudière OUÉDEC 🏘 🏘

YOUR COLONOSCOPY APPOINTMENT

Date:____/___/____

Time:_____h____

Doctor's name: _____ Patient's name:

Tel. # (patient):

2 nd F	Pierre-Legardeur Hospital Floor, Block B, Endoscopy reception a 911 Montée des Pionniers	area
	Terrebonne (Québec)	

Bi-Pi	EGLYTI	

PLEASE READ CAREFULLY BEFORE YOUR COLONOSCOPY

What is a colonoscopy?

- A colonoscopy is a procedure that allows the physician (endoscopist) to examine the lining of your large intestine (colon) to detect ulcers, inflammation, polyps (small tumours that are usually benign) or cancer
- This procedure is usually performed to investigate symptoms, such as abdominal pain, rectal bleeding, weight loss, anemia or a change in your bowel habits.

How is this procedure performed?

- ➔ The colonoscope is a flexible tube about the diameter of a finger. It is equipped with a small camera. This tube is inserted through the rectum and advanced gradually into the colon up to the caecum.
- ➔ To better view the colon lining, the endoscopist inflates the intestine with CO2, which can cause mild cramps or bloating during the procedure.
- To alleviate the discomfort of the procedure, you will receive intravenous medication that will make you a little drowsy and help you to relax. The whole procedure will last approximately 20 minutes.

What happens after the procedure?

After the procedure, you will be kept under observation until all effects of the drugs subside (approximately 45 minutes).

What are the potential complications?

- A colonoscopy is a safe procedure with very minimal risks when performed by a qualified physician. However, certain complications may occur, for instance:
- During the colonoscopy, the risk of perforation (or tearing) of the intestinal lining is 1 in 1500. After polyp removal, the risk of complications is 1 in 500. A perforation may require surgery, but can also be treated with antibiotics and intravenous solutions.
- The risk of bleeding after a colonoscopy is 1 in 2000. The risk of bleeding after polyp removal is 1 in 500. Bleeding is usually controlled during the endoscopy.
- No medical exam is perfect. On rare occasion, some polyps or cancers may go undetected.

MEDICATION

On the day of the procedure, continue to take your medications as usual (unless your doctor advises you otherwise):

- ➔ You may continue to take aspirin and anti-inflammatory drugs (non-steroidal), such as: Advil[®], Naproxen[®], Celebrex[®].
- It is important to stop taking iron 5 days before your procedure.
- If you are taking antiplatelet or anticoagulant agents (blood thinning drugs), additional instructions will be given to you ahead of time.

MEDICATION Instructions for people with diabetes

For all your diabetes medications (pills or insulin), please follow these instructions:

- ➔ The day before your procedure: take these medications as usual;
- ➔ The morning of your procedure (whatever the time of your appointment):
 - **Do not take** your oral antidiabetic drugs.
 - **Do not take** your rapid or premixed insulin.
 - Take only half of your usual dose of long-acting insulin.
- ➔ For more information, contact your attending diabetes physician.
- → It is important to control your blood sugar levels on the morning of your procedure. Monitor your blood sugar levels regularly if you have a blood glucose meter. Make sure to drink juice regularly (until 4 hours before your procedure) to avoid a drop in your blood sugar levels. It is preferable to drink natural pulp-free juices.
- → Hypoglycemia (drop in blood sugar levels) : If you feel symptoms of hypoglycemia (lightheadedness, intense hunger, sweating, tremors, blood sugar level below 4), you may take 1 tablespoon of concentrated sugar (e.g. honey, syrup, candy) even during the fasting period.



During your procedure, you will receive medication. Therefore, you will not be able to drive a motor vehicle until the following morning. This means that on the day of your procedure, you will need to be accompanied by an adult.

Things to bring with you on the day of your procedure

- Health insurance card
- Bathrobe and slippers
- List of all your medications from your pharmacist
- Leave all jewelry, piercing jewelry and valuables at home
- No make-up or nail polish on the day of examination

Special diet to follow:

To ensure the quality of your procedure, you must follow a special diet and take a laxative preparation as indicated. The details of this special diet are as follows:

During the 3 days before your procedure, follow a low-fiber diet:



X AVOID THE FOLLOWING FOODS : raisins, nuts or grains, multigrain products (e.g. biscuits, bread, whole grain cereals, brown rice, whole wheat pasta, etc.), pome fruit (e.g. kiwis, tomatoes, strawberries, raspberries, etc.) and legumes (e.g. dried beans, lentils, dried peas, etc.)

The day before your procedure, follow a clear liquid diet. You may drink the following clear liquids as much as you want all day until midnight:



✓ Water or ice cubes

- Clear pulp-free apple or white grape juice, lemonade, Jell-O (except for red and purple)
- ✓ Beef or chicken broth or bouillon (no noodles, vegetables or other solid residues)
- ✓ Herbal tea, tea, coffee (no cream, milk or milk substitutes)
- ✓ Energy drinks (e.g. Gatorade) (except for red and purple), clear soft drinks (e.g. Sprite, 7 Up, Ginger Ale)

NOTE ONLY TO PEOPLE HAVING A GASTROSCOPY ON THE SAME DAY The day of your procedure, you must be fasting since after your 2nd litre of solution, <u>and you may not drink any other liquid.</u>





MORNING

Prepare the PEG/electrolyte solutions as follows: a) Dissolve the entire contents of one sachet in 1L (32 ounces) of water. b) Mix for 2-3 minutes until a clear solution forms. Repeat steps a) and b) with the second sachet.

Refrigerate both liters of solution to improve their taste



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AFTERNOON

Around 3 p.m., take the 3 bisacodyl tablets with water.

Do not chew or crush the tablets. No antacids should be taken within one hour of taking the bisacodyl tablets.

EVENING

Around 7 p.m., rapidly drink a glassful (approximately 250 mL) of the first solution every 10 minutes (total of 4 glasses) until the 1L solution is finished.

3 1 2

4 Check after drinking each glass.

The day of your colonoscopy procedure





Do not eat any solid food or drink milk.



Clear liquids are allowed until 2 hours before your procedure.

4 hours before your procedure, rapidly drink a glassful (approximately 250 mL) of the second solution every 10 minutes (total of 4 glasses) until the 1L solution is finished.



Check after drinking each glass.

Precautions

Abdominal bloating or distention may occur before the first bowel movement. If your abdominal distention or discomfort continues, stop drinking the PEG/electrolyte solution temporarily or drink each portion of 250 mL at longer intervals (more than 10 minutes) until your symptoms disappear.

→ If you have nausea, you may take one tablet of Gravol[®] (dimenhydrinate).