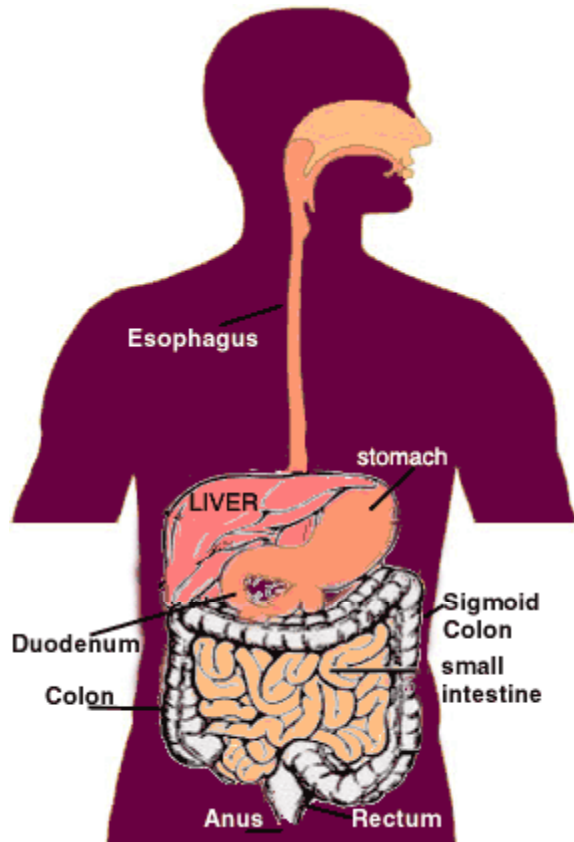


Colonoscopy (koh-luh-NAH-skuh-pee) lets the physician look inside your entire large intestine, from the lowest part, the rectum, all the way up through the colon to the lower end of the small intestine. The procedure is used to diagnose the causes of unexplained changes in bowel habits. It is also used to look for early signs of cancer in the colon and rectum. Colonoscopy enables the physician to see inflamed tissue, abnormal growths, ulcers, bleeding, and muscle spasms.



For the procedure, you will lie on your left side on the examining table. You will be given pain medication and a mild sedative to keep you comfortable and to help you relax during the exam. The physician will insert a long, flexible, lighted tube into your rectum and slowly guide it into your colon. The tube is called a colonoscope (koh-LON-oh-sko-pe). The scope transmits an image of the inside of the colon, so the physician can carefully examine the lining of the colon. The scope bends, so the physician can move it around the curves of your colon. You may be asked to change position occasionally to help the physician move the scope. The physician places air through the scope into your colon, which opens the folds of the colon and helps the physician see better.

If anything unusual is in your colon, like a polyp or inflamed tissue, the physician can remove a piece of it using tiny instruments passed through the scope. That tissue (biopsy) is then sent to a lab for testing. If there is bleeding in the colon, the physician can pass a heater probe, or electrical probe, or inject special medicines, through the scope and use it to stop the bleeding.

Bleeding and puncture of the colon are possible complications of colonoscopy. However, such complications are uncommon.

Colonoscopy takes 30 to 60 minutes. The sedative and pain medicine should keep you from feeling much discomfort during the exam. You will need to remain at the endoscopy center for 1 to 2 hours until the sedative wears off.

Preparation for Examination

For a thorough examination of the colon it is very important that the colon is completely empty prior to the exam. For proper bowel cleansing, please refer to the prep instructions that were given to you for your scheduled exam.

ON THE DAY OF YOUR EXAM:

Check in at the location indicated on your pamphlet. When you arrive please check in with the receptionist. You will be asked to undress and put on a patient gown. A nurse will discuss your medical history. Please let the nurse know if you are allergic to any medicines. The nurse will take your temperature, pulse, and blood pressure, and will place a small intravenous (IV) catheter in your arm vein for sedative medications to be given. You will be asked about your transportation person. You must have someone who will drive you home. You will be asked to sign a consent form authorizing the physician to perform the procedure.

THE EXAMINATION

Each step of the examination will be explained to you.

You may leave your dentures in place. Your eyeglasses will be removed. A nurse will help you to get comfortable lying on your left side. The doctor will examine your rectum with a gloved lubricated finger. Then he will insert the lubricated flexible colonoscope, this may give you a mild sensation of wanting to move your bowels. As the colonoscope is carefully advanced through the colon, the doctor will examine the bowel lining thoroughly. You may feel some cramping or gas due to the air the doctor uses to open up the folds of the colon. Breathing deeply and slowly will help you to relax. You may be asked to change positions during the procedure to assist in passage of the colonoscope.

AFTER YOUR EXAMINATION -- BEFORE YOU GO HOME

You will be observed closely by the nurses until you are awake. You may feel some bloating from the air inserted during the procedure. You will feel more comfortable if you expel this air.

Many people do not recall any of the procedure because of the effect of the sedative medication. The doctor will speak with you before you leave. When the nursing staff assesses that you are ready to leave, you will be given final instructions. When you leave, it must be with your transportation person.

AFTER YOUR EXAMINATION -- AT HOME

After you leave the outpatient center or hospital:

1. Do not drive or operate mechanical equipment until the next day.
2. Do not drink alcohol for 24 hours.
3. You may eat and resume your normal activities as you feel able, unless otherwise instructed.
4. Walking, a warm bath, drinking warm fluids, or lying on your left side with knees drawn up will help you to pass any air remaining in your colon.

RESULTS

Preliminary findings will be discussed with you after you are awake. A full report will be sent to your personal physician.

Biopsy and polyp results are usually available in 7-10 working days. At discharge you will be told how you will receive your results. Your personal physician will receive a report from the laboratory.