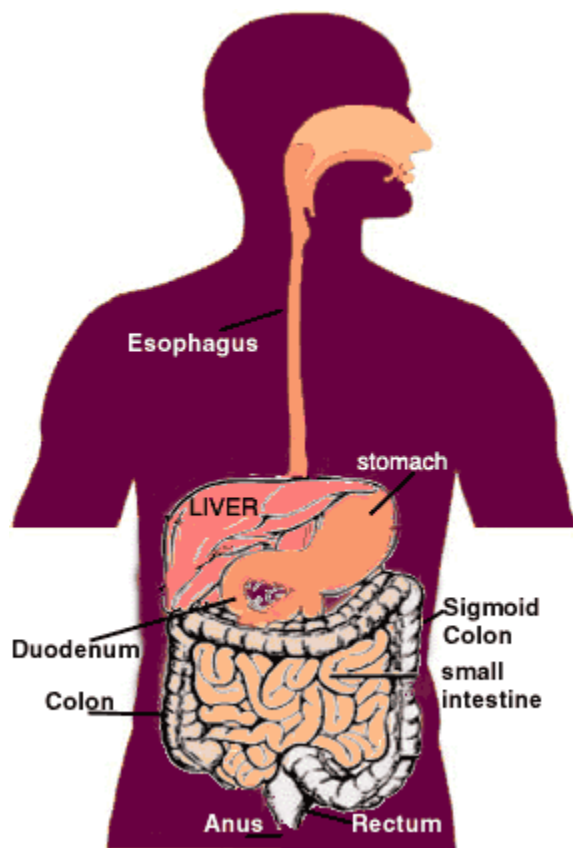


Sigmoidoscopy (SIG-moy-DAH-skuh-pee) enables the physician to look at the inside of the large intestine from the rectum through the last part of the colon, called the sigmoid colon. Physicians may use this procedure to find the cause of diarrhea, abdominal pain, or constipation. They also use sigmoidoscopy to look for early signs of cancer in the colon and rectum. With sigmoidoscopy, the physician can see bleeding, inflammation, abnormal growths, and ulcers.



For the procedure, you will lie on your left side on the examining table. The physician will insert a short, flexible, lighted tube into your rectum and slowly guide it into your colon. The tube is called a sigmoidoscope (sig-MOY-duh-sko-pe). The scope transmits an image of the inside of the rectum and colon, so the physician can carefully examine the lining of these organs. The physician places air through the scope into the colon, which opens the folds of the colon and helps the physician see better.

If anything unusual is in your rectum or colon, like a polyp or inflamed tissue, the physician can remove a piece of it using instruments inserted into the scope. The physician will send that piece of tissue (biopsy) to the lab for testing.

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

Sigmoidoscopy takes 10 to 20 minutes. During the procedure, you might feel pressure and slight cramping in your lower abdomen. You will feel better afterwards when the air leaves your colon.

ON THE DAY OF YOUR EXAM:

Check in at the location indicated in your pamphlet. When you arrive please check in with the receptionist. You will be asked to change into 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. You will be asked to sign a consent form authorizing the physician to perform the procedure.

AFTER YOUR EXAMINATION

--BEFORE YOU GO HOME

You may feel some bloating from the air inserted during the procedure. You will feel more comfortable if you expel this air. The doctor will speak with you before you leave. When you are ready to leave the nurse will give you your final instructions.

AFTER YOUR EXAMINATION

--AT HOME

After you leave the outpatient center or hospital: You may eat and resume your normal activities, as you feel able, unless otherwise instructed. Walking, a warm bath, drinking warm fluids, or lying on your left side with knees drawn up will help you to pass any remaining air in your colon.

RESULTS

Preliminary findings will be discussed with you immediately after the procedure. A full report will be sent to your personal physician.

Biopsy 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.