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COLONOSCOPY

Colonoscopy is the direct examination of the *large intestine* (colon) using a long, thin, flexible tube with a light and optics. Tissue samples may also be taken from inside the body. The tube is inserted through the *anus* (bottom). It is used to check for pre-cancerous polyps, tumors, inflammatory and ulcerative bowel disease or to locate the site of bleeding in the colon.

Preparation:

 You will be given a special liquid diet or laxatives the day before the exam. No solids foods (jello is OK) should be consumed the day before the exam and nothing after midnight. Your doctor may also wish you to discontinue aspirin or blood thinners for several days before the exam if he or she believes a biopsy might be required.

Procedure:

- You will be given conscious sedation with a medication like Versed and Fentanyl. This is not a general anesthetic, but it will relax you and prevent any memory of the procedure.
- The test is usually done in a hospital or outpatient center.
- As the lubricated colonoscope (the thin, flexible tube with a light and optics) is inserted into the anus, the intestine is inflated with air. This causes the intestine to expand so that your physician can see all areas.
- Polyps can be easily snared for removal and biopsies (tissue samples for study) taken if needed.

Risk:

- There is a very small risk of bowel perforation (nicking or tearing the bowel wall).
- If bleeding, fever, nausea, dark stool or abdominal pain develop, report this to your physician for further evaluation.
- There is also a risk of transmitting infection with a *colonoscope*, although this risk is minimal with modern sterilization techniques.
- After the procedure, the air that was inflated during the test may cause some discomfort until it is expelled as gas.

Colonoscopy

Colonoscopy is used to view the inside of your lower digestive tract (colon and rectum). It can help screen for colon cancer and can also help find the source of abdominal pain, bleeding and changes in bowel habits. The test is usually one in the hospital on an outpatient basis. During the exam, the doctor can remove a small tissue sample (a **biopsy**) for testing. Small growths, such as polyps, may also be removed during colonoscopy. A camera attached to a flexible tube with viewing lens is used to take video pictures.



Getting Ready

- Be sure to tell your doctor about any medications you take. Also, tell your doctor about any health condition you may have.
- Discuss the risks of the test with your doctor. These include bleeding and bowel puncture.
- Your rectum and colon must be empty for the test. So be sure to follow the diet and bowel prep instructions exactly. If you don't, the test may need to be rescheduled.
- Ask your doctor whether you need to have a friend or family member prepared to drive you home after the test.



Colonoscopy provides an inside view of the entire colon.

During the Test

- You are given sedating (relaxing) medication through an IV line. You may be drowsy or completely asleep.
- The procedure takes 30 minutes or longer.
- The doctor performs a digital rectal exam to check for anal and rectal problems. The return is lubricated and the scope inserted.
- If you are awake, you may have a feeling similar to needing to have a bowel movement. You may also feel pressure as air is pumped into the colon. It's okay to pass gas during the procedure.

After the Test

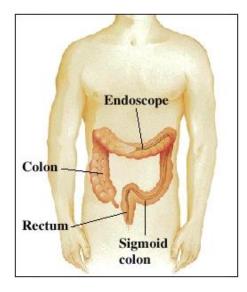
- You may discuss the results with your doctor right away or at a future visit.
- Try to pass all the gas right after the test to help prevent bloating and cramping.
- After the test, you can go back to your normal eating and other activities.

Risks and Possible Complications Include:

- Bleeding
- A puncture or tear in the colon
- Risks of anesthesia

Lower GI Endoscopy

Lower GI endoscopy allows your doctor to view your lower gastrointestinal (GI) tract. Your entire colon and rectum can be examined (**colonoscopy**). Or just the rectum and sigmoid colon can be examined (**sigmoidoscopy**). During endoscopy, a long, flexible tube is used to view the inside of your lower GI tract.



Before the Exam

Follow these and any other instructions you are given before your endoscopy. If you don't follow the doctor's instructions carefully, the test may need to be cancelled or done over.

- For a colonoscopy, you may be told not to eat and to drink only clear liquids for 1 to 2 days before the exam.
- Take an laxatives that are prescribed for you. An enema may also be prescribed.

- Arrange for someone to drive you home after the exam if you will be sedated.
- Tell your health care provider before the exam if you are taking any medications or have any medical issues.

When to Call Your Doctor

Call if you have any of the following after the procedure:

- Pain in your abdomen
- Fever
- Rectal bleeding

The Procedure

- Colonoscopy can take 30 minutes or longer. Sigmoidoscopy often takes less than 15 minutes.
- You like on the table on your left side.
- For colonoscopy, you are given sedating (relaxing) medication through an IV (intravenous) line. Sigmoidoscopy usually doesn't require sedation.
- The endoscope is inserted into your rectum. You may feel pressure and cramping. If you feel pain, tell your doctor or nurse. You may receive more sedation or some pain medication.
- The endoscope carries images of your colon to a video screen. Prints of the image may be taken as a record of your exam.
- When the procedure is done, you rest for a time. If you have been sedated, you must have an adult drive you home.