

Colonoscopy Information Sheet

What is a colonoscopy?

A colonoscopy is a procedure to examine your large bowel (colon). While you are sedated, a camera on the end of a long flexible tube is passed through your anus and around your entire large bowel (less than 1 meter).

Why is it performed?

There are many reasons why you might have been recommended to have a colonoscopy and it is important you understand how it could be beneficial in your situation. Colonoscopy can be performed to examine for small benign growths (called polyps) which usually don't cause any symptoms, but can grow to become cancer. Having a close relative with bowel cancer may be a reason to perform a colonoscopy. If you have had symptoms such as bleeding, pain or a change in bowel habit, or if you have been found to have a low blood count, a colonoscopy can be useful to diagnose the cause. There are other indications.

How do I get ready for the colonoscopy?

1. Complete and hand in your paperwork to the hospital.
2. Make sure you have received bowel preparation instructions. Read these instructions carefully now. DO NOT follow the instructions on the bowel preparation kit packaging.

Answer these important questions about your medications:

1. Do you take medication for weight loss or diabetes such as **tirzepatide (Mounjaro), semaglutide (Ozempic, Wegovy), dulaglutide (Trulicity) or liraglutide (Saxenda, Victoza)**?
 - ✓ If YES, then for the entire day before the procedure you should only consume CLEAR FLUIDS (eg water, jelly or clear juice/cordial/soft drinks/soups). DO NOT consume any food.
2. Do you take other diabetic medications such as **dapagliflozin (Forxiga, Xigduo, Sidapvia), empagliflozin (Jardiance, Glyxambi, Jardiamet)**?
 - ✓ If YES, then do not take them on the 2 days prior to the procedure
3. Do you take **insulin or warfarin**?
 - ✓ If YES, then contact our office
4. Do you take blood thinning medications such as **clopidogrel (Plavix, Iscover, CoPlavix, Piax etc), dabigatran (Pradaxa), rivaroxaban (Xarelto) or apixaban (Eliquis)**?
 - ✓ If YES, and you have been taking this medication for more than 6 months, then do not take the clopidogrel on the 5 days before the procedure and do not take the other blood thinning medication on the 2 days before the procedure.
 - ✓ If YES, but you have started the medication in the last 6 months, then contact our office.
 - ✓ You should continue to take aspirin.

What happens on the day?

Dr Scott/Flynn will see you before the procedure. You will be put to sleep by an Anaesthetist. The colonoscopy usually takes about 15 minutes but can be much shorter or longer. During the colonoscopy biopsies may be taken (3mm in size and completely painless). If a polyp is seen it is usually removed. If more complicated treatments are required, they will be discussed with you first, and a second procedure planned. If you are having a gastroscopy on the same day, the gastroscopy will be performed first, and during the same anaesthetic.

What happens after the colonoscopy?

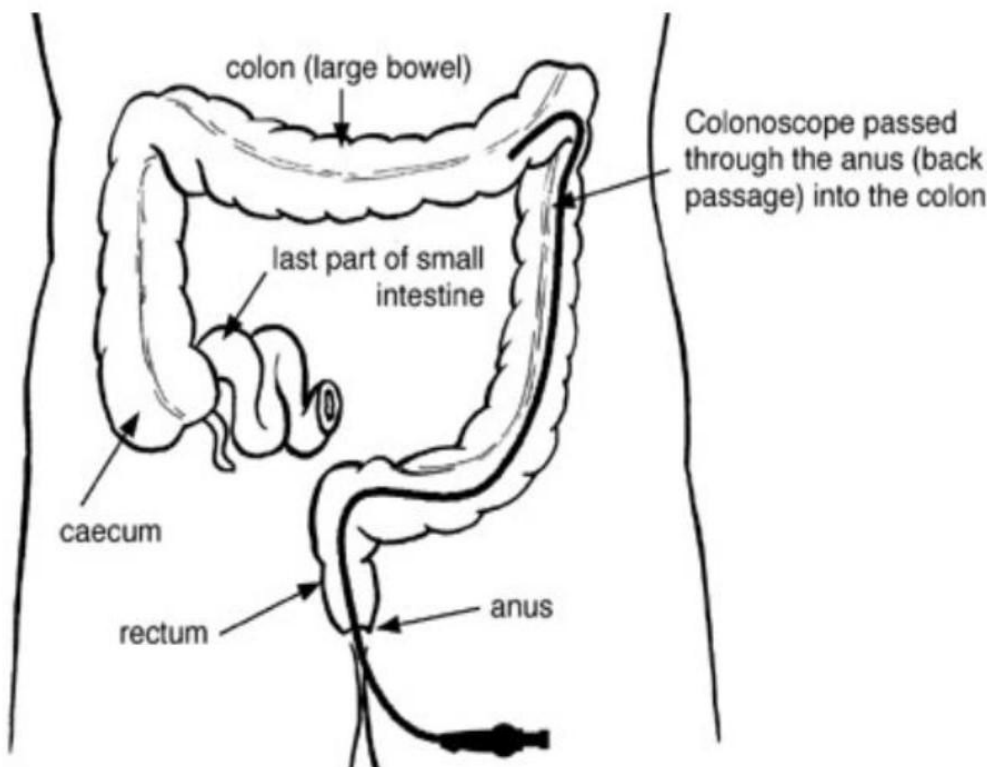
You will remain in hospital for at 2-4 hours afterwards. You should arrange for someone to take you home. You should not drive, catch public transport alone, operate heavy machinery, sign legal documents or drink alcohol for 24 hours after the anaesthetic.

Dr Scott/Flynn will talk to you after the colonoscopy and provide you with written information. A letter with the results and recommendations from the colonoscopy will be sent to your GP.

What are the risks of Colonoscopy?

1. Failure to see the entire large bowel (1 per 100)
2. Serious bleeding (3 per 1,000)
3. Making a hole in the wall of the bowel (1 per 1,000)
4. Serious and unexpected complications including heart attack, breathing difficulty, stroke or death (less than 1 per 10,000)

After the procedure, if you think you may have any of these complications, or are concerned for any reason, please contact Dr Scott/Flynn or go to your local emergency department.



Data Collection

As part of quality monitoring and improvement, the data from your procedure may be used for audits, recertification or teaching. Your personal details are always entirely removed from the data for these purposes. If you have any concerns please speak to us.