Introduction
The information in this leaflet will help you to prepare for your colonoscopy procedure. Please read this at least one week before your appointment and follow the instructions carefully. If you cannot make your appointment, please call us on 020 3312 6010 or email imperial.endoscopyappointments@nhs.net

For questions about preparing for this procedure, please contact the hospital where your procedure is booked and ask to speak to the nurse in charge:

- Charing Cross Hospital: 020 3311 1057
- Hammersmith Hospital: 020 3313 2645
- St Mary’s Hospital: 020 3312 6681

Before your appointment checklist

- read all of this information booklet carefully
- pick up the necessary bowel preparation from the hospital pharmacy as soon as possible
- double check the date, time and location of your colonoscopy procedure carefully. Note that your colonoscopy may be performed at a different hospital to your previous appointments

Seven days before your appointment:

- stop taking any iron supplement medications
- if you are taking any medication to thin your blood, please contact us for advice at least one week before your appointment. We will need to know why you are taking this medication. You do not need to stop taking aspirin.

Two days before your appointment:

- follow the low residue diet for two days before your procedure

One day before your appointment:

- after breakfast the day before your procedure, do not eat anything solid at all
• take the bowel preparation carefully as instructed
• read about conscious sedation and Entonox® and consider which option you might prefer
• arrange for a responsible adult to collect you after your procedure if you are having sedation. A responsible adult should stay with you for 12 hours after your procedure. If you do not organise an appropriate escort, we will not be able to give you sedation
• read the leaflet ‘Important information for patients coming into hospital for a procedure or surgery’ (ask your care team for a copy) or visit http://www.imperial.nhs.uk/patients-and-visitors/patient-information/planned-procedures-and-surgery

How do I prepare for my procedure?

It is essential that your bowel is empty when you come for your colonoscopy. Please follow the instructions on medications, diet and laxatives below for your procedure to go ahead. You must not eat any food after breakfast on the day before the test. The laxative is meant to give you diarrhoea.

If you have diabetes, please contact your GP or your diabetes nurse specialist for advice before your appointment. You can also contact us using the telephone numbers on the front of this leaflet for further advice.

What is a colonoscopy?

Colonoscopy is an examination of the lining of the large bowel (also known as the colon). Your bowel needs to be empty for the colonoscopy, so, you will need to take laxatives the day before your appointment. The procedure is performed by an endoscopist – either a doctor or a specialist nurse. The colonoscope is a thin, flexible tube which is passed through your bottom (anus) and then around the large bowel. There is a light and tiny video camera on the end of it.

The colonoscope blows air into the bowel to allow thorough examination. We look for any abnormalities inside the colon. If required, biopsies (small samples of tissue) may be taken during the examination. Any polyps (growths in the lining of the bowel) can be removed. Most polyps are not cancer. However, most bowel cancers begin as a polyp so removing them is an important way of preventing bowel cancer in the future.
Your doctor should have discussed with you your individual need for the test.

Alternatives to colonoscopy

The main alternative to colonoscopy is a computed tomography (CT) pneumocolon. This is a special CT scan of the large bowel. Preparation of the bowel with laxatives is required for this test. You do not need to be sedated. On the day of the procedure, a small tube is inserted into your anus and carbon dioxide gas is used to inflate the bowel. This type of CT scan can show up polyps and tumours but, unlike colonoscopy, we cannot remove them or take any tissues for a biopsy.

Are there any risks associated with colonoscopy?

Colonoscopy is generally a safe procedure, however, complications can occur. You may experience discomfort, nausea and bloating during the procedure. These symptoms are temporary and usually resolve quickly after the procedure. Uncommon but serious risks include but are not limited to:

- a hole in the bowel wall (perforation) which may need surgery to repair (1 in 3,000)
- bleeding from the bowel wall which may require blood transfusion or surgery to repair (1 in 1,000)
- missing or overlooking an abnormality in the colon
- reaction to the sedatives or Entonox® used during the test

The risk of complications is increased if you have any pre-existing heart, lung or kidney conditions. Your endoscopist will discuss these risks with you before you have the test.

Preparation for the procedure – types of sedation

Conscious sedation

Conscious sedation is where the sedative and a painkiller are given into a vein (intravenous, IV). This will make you more relaxed and reduces any discomfort experienced during the procedure. The sedative may also make you forget parts of the test. Each patient will react differently and will experience different levels of sleepiness. It is not a general anaesthetic and you will be awake during the procedure.

If you have conscious sedation an adult friend, relative or carer must escort you home. You must also make sure that an adult stays with you for 12 hours after your procedure. Please make sure that you have access to a telephone when you return home. If you have not been able to make these arrangements, please speak to the nursing staff. We will not be able to give you sedation if you do not have someone to accompany you home.

Entonox®

Entonox® is commonly known as ‘gas and air’. This is a mixture of gases which is breathed in (inhaled). It is a quick acting painkiller that wears off quickly. We will show you how to use the mouthpiece before the colonoscopy starts and ask you to inhale the Entonox®. The effects are noticeable within 30 seconds. You can continue to inhale the Entonox® during the procedure. Unlike sedation, you can drive home 30 minutes after your procedure.
Entonox® cannot be given to patients with some lung conditions or those who have had recent eye or brain surgery.

**Preparation timeline**

**Seven days before your appointment:**
Stop taking any iron supplements

**Four days before your appointment:**
Stop taking any other medications which cause constipation, such as codeine phosphate or loperamide. Contact us for advice if you are not sure.
Continue with all your other medications, including laxatives, unless you have been told otherwise.

**Two days before your appointment:**
Only eat a low residue diet, which means items from the ALLOWED column on the ‘low residue diet sheet’. Do not eat any high residue/fibre foods (foods from the AVOID column).

**One day before your appointment:**
Have a good breakfast, only choosing items from the low residue diet list.
After 08.00, do not eat any solid food at all.

Please drink plenty of clear fluids. It is important that you drink at least two litres / 3.5 pints of liquid during the day to avoid dehydration. This will improve the effect of the bowel preparation.

Please take the laxatives (see accompanying instructions) you have been prescribed. The laxative preparation will cause diarrhoea so we recommend that you stay close to a toilet after you have taken it. Soreness around your bottom will be reduced if you apply some barrier cream (such as Vaseline®) before taking the laxatives.

If you take the oral contraceptives (the ‘pill’), the laxative may stop this from working. Do not stop taking your pill but you should use additional methods of contraception.

If you feel unwell on this day and think that you may not be able to tolerate the bowel preparation or the test please contact us for advice before you take the preparation.

Unless you have received specific advice about your regular medications you should continue to take them as normal. You may need to change the timing as it is best to avoid taking them less than one hour either side of oral bowel preparation.

**Day of procedure**
If you regularly take medicines in the morning, you should take them before 07.00 on the day of the test, with a small sip of water if necessary, unless you have been advised otherwise.

You may continue to drink clear fluids until two hours before the test to avoid dehydration.

We advise you to wear loose-fitting clothes as during the procedure the endoscopist will introduce air into your bowel. Loose-fitting clothing may help make you more comfortable.
What will happen on the day of my procedure?

Please book in at the endoscopy unit at the time specified. Your procedure will be done as close to your appointment time as possible. Every effort is made to keep waiting times to a minimum but it is not possible to say how long individual procedures will take. You may wish to bring something to read.

In the admission room we will ask you to change into a hospital gown and 'dignity' shorts. The doctor or nurse specialist will discuss the procedure, any treatment, possible risks, expectations and side effects before asking for your written consent. This written consent should not feel rushed and will be done in the pre-assessment room before your procedure. If you are having sedation, a drip will be placed into your hand or arm ready for the medications to be given later on.

We will then take you to the procedure room and ask you to lie on your left side with your knees slightly bent. We will connect you to a monitor to record your blood pressure, pulse and oxygen levels. We will give you some oxygen through a tube that is placed under your nose.

If you are having conscious sedation, the endoscopist will give you a sedative and a painkiller through the drip. If you have chosen to have Entonox®, we will give you a mouthpiece and ask you to breathe in the gas.

You may experience a feeling of pressure, bloating or cramping due to the air that is introduced. This will disappear quickly once you have passed wind. During the procedure, it is normal to want to pass wind so please do not feel embarrassed. You may also be asked to change your position during the test and a nurse will support you to do this.

The procedure itself takes between 15 and 60 minutes to complete. However, you should expect to be in the department for two to three hours to allow time for waiting, preparation and recovery.

Imperial College Healthcare NHS Trust supports the training of doctors and nurse endoscopists. Your consent or procedure may be undertaken by one of these trainees who are supported and supervised by qualified trainers within the endoscopy department.

What happens after the test?

If you had conscious sedation, you will need to rest for about one hour before you can go home. You must be accompanied home by a relative, friend or carer – they must be aged 18 or older. They must come to the unit to collect you in person. The effect of the conscious sedation can last for up to 24 hours so, during that time, you should not drive, operate machinery (including kitchen equipment), sign legal documents or drink alcohol.

If you have had Entonox®, you will rest for about half an hour before being able to leave - you do not need to be accompanied.

When will I get the results?

We will give you a copy of the colonoscopy report and discuss the findings with you before you are discharged.
It can take up to one week for biopsy results to be available and these will be sent to your referring doctor (GP or hospital doctor). Details of the results and any necessary treatment should be discussed with them at your next appointment. The endoscopy department will not be able to give you any biopsy results.

Is there anything I need to watch out for at home?

It is normal to experience small amounts of bleeding from your bottom or mild abdominal (tummy) discomfort for up to two weeks after your colonoscopy. Please do not worry if you have watery motions (stools). This is normal and will pass. However, if you have any severe pain, black tarry stools or persistent bleeding after your test, please contact the endoscopy department at the hospital where you had your procedure between 09.00 and 17.00 and ask to speak to the nurse in charge:

- Charing Cross Hospital: 020 3311 1057
- Hammersmith Hospital: 020 3313 2645
- St Mary’s Hospital: 020 3312 6681

Outside of working hours, please call the hospital switchboard on 020 3313 1000 and ask to speak to the gastroenterology registrar on call for further advice. Alternatively, you can call your GP or NHS 111.

When can I get back to my normal routine?

You should be able to return to work and all your usual activities the day after your procedure.

How do I make a comment about my visit?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. If you have any suggestions or comments about your visit, please either speak to a member of staff or contact the patient advice and liaison service (PALS) on 020 3313 0088 (Charing Cross, Hammersmith and Queen Charlotte’s & Chelsea hospitals), or 020 3312 7777 (St Mary’s and Western Eye hospitals). You can also email PALS at imperial.pals@nhs.net

Alternatively, you may wish to complain by contacting our complaints department: Complaints department, fourth floor, Salton House, St Mary’s Hospital, Praed Street London W2 1NY
Email: ICHC-tr.Complaints@nhs.net
Telephone: 020 3312 1337 / 1349

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team: imperial.communications@nhs.net

Wi-fi is available at our Trust. For more information visit our website: www.imperial.nhs.uk

For details of how to get to our hospitals visit www.imperial.nhs.uk/our-locations