

COLONOSCOPY PREPARATION INSTRUCTIONS

Please read this document carefully. The quality of the bowel preparation directly affects the accuracy of your test.

5 DAYS BEFORE

- Avoid seeds like nuts, passion fruits, apple seeds;
- **STOP** Warfarin or Plavix. If on Plavix swap to Aspirin

3 DAYS BEFORE

- **STOP** Jardiance or Forxiga

2 DAYS BEFORE

- **STOP** Xarelto or Dabigatran or Apixaban

2-3 DAYS BEFORE EXAMINATION – Low residue food (as below)

BREAD / CEREAL

Foods Allowed: White bread, white rice, white pasta. Refined breakfast cereals (e.g. Cornflakes, Special K, Rice Bubbles), white flour, plain biscuits (made with white flour & allowed ingredients), plain rice cakes and crackers.

Foods not allowed: White pasta with oil or cream, wholemeal, multi-grain, rye bread or white bread with added bran. Brown rice, wholemeal pasta with “chunky sauce”. Wholegrain breakfast cereals (e.g. Muesli, Rolled Oats, Porridge, All Bran). Wholemeal flour, biscuits, cakes & crackers made on wholemeal flour or containing fruits & nuts.

FRUIT

Foods Allowed: **Avoid skin and seeds**, honeydew, rockmelon, watermelon, grapes, peaches, pineapple, pawpaw, apple, apricots, ripe bananas, tinned / stewed apples, peaches & pears.

Foods not allowed: All other fruit. Dried fruit.

VEGETABLES

Foods Allowed: **Avoid skin and seeds**, potato, carrot, choko, marrow, squash, pumpkin, onion, asparagus tips, cauliflower tips, cucumber, tomato.

Foods not allowed: All other vegetables

MEAT / FISH / EGGS

Foods Allowed: All meat, fish & poultry. Eggs

MILK / DAIRY

Foods Allowed: Milk, cream, butter, cheese, plain yoghurt

Foods not allowed: Fruit yoghurt

OILS / NUTS

Foods Allowed: Margarine, oil

Foods not allowed: Nuts and nut products

MISCELLANEOUS

Foods Allowed: Most soft drinks & cordials, tea, coffee, alcohol in moderation, lollies, plain chocolate, toffees, sugar, vegemite, honey, salt, pepper, herbs and spices

Food not allowed: Drinks which have RED or PURPLE FOOD COLOURING. Fruit and / or nut chocolate, marzipan, marmalade, jams, fruit mince pies, popcorn.

DAY BEFORE EXAMINATION

- **DO NOT EAT ANY SOLID FOOD**

- **Drink only clear liquids. Do not eat or drink any dairy products. Examples include milk, yoghurt, cheese, ice cream, and cream or milk in coffee or tea.**
- **Do not drink alcohol**
- **Clear fluids include:** water, clear fruit juice (apple, blackcurrant, pear, grape, cranberry or strained orange juice), plain jelly (any flavour, but no cream, ice cream or fruit pieces), clear soup (strained chicken broth), (cup-a-soup – strain all noodles and particles drinking only the clear fluid), black tea or coffee (no milk), Bonox, Lucozade (no fizzy soft drinks) and barley sugar lollies. Clear soft drinks (lemonade, ginger), isotonic drinks (Gatorade) hypotonic drinks (**Gastrolytes, Hydrolytes – very important to reduce the incidence of dehydration**), **Hydralyte tablets are also a very good option.**

At **2.00pm** mix one sachet of PicoPrep or PicoSalax in a glass of warm water (chill if desired) and drink straight down.

- ***This must be followed by at least 1 litre of water or clear fruit juice, drank gradually and at least hourly.***

At **6.00pm** mix one sachet of PicoPrep or PicoSalax in a glass of water and drink straight down

- ***This must be followed by at least 1 litre of water or clear fruit juice, please drink gradually and continue with clear fluids until you go to bed.***

You may continue to drink clear fluids until 2 hours prior to the admission time on the morning of your procedure.

DAY OF EXAMINATION

5-6 hours prior to your admission time you need to drink the last sachet of PicoPrep or PicoSalax. Again, this needs to be mixed with a glass of warm water and drunk straight down, followed by 1 litre of water or clear fruit juice drank gradually ***not all at once***. **All clear fluids, including water, must be ceased 2 hours prior to your admission time** and then you are to have nothing further to drink until after your procedure has been completed.

Before your procedure your bowel motions should be of a clear liquid nature. If not, please advise the nurse at the time of your admission.

Keep drinking plenty of clear liquid until 2 hours before the scheduled report time.

Medication – NSAID arthritis tablets (eg. Voltaren, Indocid, Naprosyn) should generally be ceased for 7 days prior to the procedure. Diabetic medication will need to be adjusted. Aspirin may be continued unless advised otherwise. All other medication should generally be taken as normal throughout the preparation, **unless** advised to discontinue by the doctor. If medication is necessary on the morning of the procedure, please take it early with only a small sip of water.

Please arrange for someone to collect and drive you home following your procedure. You cannot drive home. You will be at the Day Surgery for approximately 2 ½ hours. You will be able to resume normal activities the following day.

What is a “Colonoscopy”

You have been advised to have a test called a colonoscopy. A colonoscopy is a procedure used to inspect the large bowel.

Accuracy

Colonoscopy, like almost any test in medicine, is not infallible, however, currently it is the most accurate means of examining the colon. Its accuracy easily exceeds that of barium enema or virtual colonoscopy

How are you prepared?

In order for your doctor to get the best possible view and make the colonoscopy easy, your bowel needs to be cleaned out of all waste material. Prior to the colonoscopy you will be provided with detailed instructions of the preparation required. Usually this involves a special diet for a day or two, consisting of no food, lots of fluids and laxatives the day before the procedure. You will need to have nothing to eat or drink for four hours before the procedure is done. However, you may have a sip of water with your regular medications.

Please take your regular medications on the day of the test

Special considerations

Generally the following medications should be stopped at least one week before the procedure: iron tablets, aspirin, arthritis tablets and any blood thinning drugs (eg Iscover, Warfarin). Diabetic medication will need to be adjusted.

If you are taking any of these tablets, please let your doctor know beforehand.

You should advise the nursing staff if you are sensitive (*allergic*) to any drug or other substance. You should also inform your doctor if you have heart valve disease, or have a pacemaker implanted.

Women should be aware that the absorption of an oral contraceptive pill can be affected by bowel preparation and they should consider alternate contraceptive methods for the month.

Will I be given sedation?

Yes. Before the procedure a sedative injection is given into the vein to make you comfortable. You will be asleep. You will not remember the test and may affect your memory for some time afterwards. Even when the sedation appears to have worn off, you may find you are unable to recall details of your discussion with your doctor. For this reason, a relative or friend should be available to take you home if possible. If you do not recall discussions following the procedure, you should contact your doctor.

How is a colonoscopy done?

The colonoscope is a long and highly flexible tube about the thickness of your index finger. It is inserted through the back passage into the large intestine to allow inspection of the entire large bowel. You will lie on your left side, although occasionally it may be necessary for you to lie on your back at some stage during the procedure. Most colonoscopies take between 20 and 45 minutes.

What is a polyp?

A polyp is a small growth like a mushroom attached to the bowel wall which can occasionally become a cancer. Most cancers start as polyps. However, most polyps do not become cancers. At the time of colonoscopy the doctor cannot tell which polyps will or will not progress to cancers, therefore all polyps are removed. Removing polyps dramatically reduces the risk of bowel cancer. Most polyps can be burnt off by placing a wire snare around the base and applying an electric current. However it will not be possible to discuss the removal with you during the examination as you will be asleep. Therefore, if you agree to removal of any polyps found during the procedure, please sign the **consent form**.

If you have any queries or reservations about this, please talk to your doctor **before** the colonoscopy. Also, often small samples or biopsies of the bowel will be taken for examination under the microscope to assist in diagnosing your condition.

What happens after the colonoscopy?

Following the procedure you will remain in the hospital recovery area for approximately two to three hours until the effect of the medication wears off. When you wake up you may feel a little bloated. This is due to the air that was inserted during the procedure. This will pass over the next hour or so. Very rarely, you may pass a small amount of blood. This is due to biopsies that have been taken and is of no concern. You may then go home. Because of the sedation given, it is very important that you do not drive a car, travel on public transport alone, operate machinery, sign legal documents or drink alcohol on the same day after the test. It is strongly advised that a friend or relative take you home and stay with you.

Safety and risks.

Sterilisation of the instruments – colonoscopes – are completely cleaned between procedures. There is no risk of transmission of serious diseases such as HIV, hepatitis B or C.

The complications of colonoscopy are very rare, less than 1/1000 examinations. However, complications can occur and include the following:

- Intolerance of the bowel preparation. Some people develop headaches or vomiting:
- Reaction to the sedatives. This is very uncommon but is of concern in people who have severe heart disease or lung disease.
- Perforation (making a hole or tear in the bowel)
- Major bleeding from the bowel. This can occur as a result of polyps being removed.

It is possible if these serious complications occur that you may require surgery or a blood transfusion.

Accuracy – Colonoscopy like almost any test in medicine is not infallible, however currently it is the most accurate means of examining the colon. Its accuracy easily exceeds that of barium enema or virtual colonoscopy.

If you have any severe abdominal pain, bleeding from the back passage, fever or other symptoms that cause you concern, you should contact our rooms immediately.