

FLEXIBLE SIGMOIDOSCOPY

Procedure Information Sheet

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How are you to prepare?

You are to consume **NO FOOD** from midnight the day of your procedure. If your appointment is later in the day you may have **CLEAR FLUIDS ONLY** (eg. Water, lemonade, apple juice, black tea and coffee, etc.) until **four hours** prior to your procedure. You should therefore be **nil by mouth from _____** (i.e. no food, fluids, water, smoking until after your procedure).

As a duty of care to our patients and to meet Medicare requirements we must have a current referral from your referring GP or specialist on file prior to your procedure.

This can be faxed or emailed to us at reception3@ddq.net.au

(Reminder: GP referrals only stay current for 12 months from their first use and specialist referrals are only current for 3 months from their first use. Medicare requires that you have a current referral on file for each appointment.)

Medications

Continue taking all medications as usual unless otherwise instructed. If your procedure is early in the morning you can:

- Take medications as usual prior to your nil by mouth time
- After your nil by mouth time take medications with a small sip of water (i.e. approx. 20ml)
- Bring the medication with you to hospital to have after your procedure (unless you take heart or blood pressure medication, in which case you should take this as normal with a small sip of water)

Please inform our rooms if you take:

- **Blood thinning medications (eg. Warfarin, Xarelto, Plavix, etc.)**
- **Any diabetic medications – particularly Insulin, Forxiga, Xigduo, Qtern, Jardiance, Jardiamet & Glyxambi**

Important post-procedure care instructions

You will remain in the endoscopy unit for up to 3 hours until the main effects of the sedation wear off and you have had something to eat/drink. You may feel slightly bloated due to the air that has been introduced through the endoscope. This will quickly pass. You should avoid alcohol for 12 hours after your procedure.

-For legal reasons you MUST NOT drive a vehicle or operate machinery for the remainder of the day following intravenous sedation. This is at the discretion of your anaesthetist. Failure to do so carries the same implications as drink driving.

-You MUST have a responsible adult escort you home (i.e. you should not go to work) and stay with you overnight after the procedure. Also you should not care for dependent persons without responsible help for at least 12 hours after your procedure.

IF THESE REQUIREMENTS ARE NOT MET YOUR PROCEDURE MAY BE CANCELLED.
These requirements are compulsory for all hospitals and all anaesthetists.

-You are also advised to be very careful in simple household tasks in the 12 hours after receiving sedation. Your coordination may be impaired for some time.

-Air Travel - If you intend to travel within 24 hours of your endoscopy please contact us to discuss.

If you develop any pain, fever, vomiting or blood loss after the procedure, you should contact your doctor immediately or the hospital where your procedure took place. Alternately, after hours, you can contact our after hours service on 3261 9570.

What is a Flexible Sigmoidoscopy?

Flexible Sigmoidoscopy 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 or descending colon. Physicians may use the procedure to find the cause of diarrhoea, abdominal pain, constipation, or bleeding. Early signs of cancer can be detected in the descending colon, sigmoid colon and rectum. With flexible Sigmoidoscopy, the physician can see bleeding, inflammation, abnormal growths and ulcers. Flexible Sigmoidoscopy is not sufficient to detect polyps or cancer in the ascending or transverse colon.

What will happen?

After checking into the hospital and completing your admission you will be seen by a pre-admissions nurse for a brief health check. You will then be changed into a hospital gown. The anaesthetist and procedural doctor will talk to you prior to the procedure. You *may* be given an enema prior to the procedure.

At the beginning of the procedure you will be asked to lie on your left side. You will be given a sedative by injection in a vein before the procedure begins and usually you will not remember anything about the actual examination.

Safety and Risks

Rarely patients may have a reaction to the sedation. If you wish to have full details of RARE complications, you should discuss further with your doctor prior to the procedure. The overall complication rate is less than 1 in 1000 procedures. The risk is greater if a therapeutic intervention is performed eg dilatation of a narrowing or control of a bleeding vessel or ulcer.

Results

A copy of the results will be sent to your referring doctor and you will receive a copy of the typed report. You may receive this on the day of your procedure. Otherwise, **if you have provided us with an email address, this will be emailed within 1-2 days (or posted)**. Your treating specialist will contact you if they have any serious concerns or if you require a further appointment. Should you have any questions or concerns contact our practice nurse at Digestive Diseases Queensland.