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Health Sciences North ENDOSCOPY UNIT

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SIGMOIDOSCOPY PREPARATION INSTRUCTIONS

Refer to this instruction sheet for the <u>entire week</u> before your procedure.

Sigmoidoscopy preparation instructions are extremely important for a successful procedure. If you do not follow the instructions precisely, your bowels may not be ready and you will need to repeat the procedure.

Planning for Your Sigmoidoscopy

Please read as soon as you receive this information and check off each box to indicate that you understand each item.

- You must do a bowel prep.
- Please pick up 2 (two) Fleet® enemas at any pharmacy.
- Administer the enemas on the morning of the test.
- If your travel time is more than 2 (two) hours, ask at the time of scheduling if you can do the prep (enemas) in the endoscopy suite.
- You must have a driver with you at the procedure.
 - You must have a driver who is 18 years or older present at check in and discharge. If you do not have a driver with you at check in, we will reschedule your appointment.
 - Your entire procedure may take 3 to 4 hours to complete. Please advise your driver that they will need to remain in the facility for the duration of the procedure.
 - Please leave all jewelry and personal items at home.
 - Please do not wear contact lenses.
- If you have diabetes you must call your doctor.
 - People with diabetes have special instructions.
 Call the doctor who ordered your sigmoidoscopy for your diet and medicine instructions.
- If you need to reschedule, please call (705) 586-0060.

PLEASE NOTE: Cancellations or changes in appointment date or time within 14 days will result in a \$300.00 cancellation fee. Cancellations prior to 14 days can be accepted via voicemail message or an email to the clinic at neorcsurgery@gmail.com.



What supplies do I need to prepare in advance?

Purchase 2 (two) sodium phosphate enemas at your local pharmacy. You will not need a prescription. One common brand is Fleet[®]. Be sure to use an enema product, not an oral or liquid laxative. Follow the instructions below carefully to ensure a successful exam.

My Appointment Is: .		TIME:	
	(Date)		

LOCATION:

Health Sciences North - ENDOSCOPY UNIT 41 Ramsey Lake Road Sudbury, ON P3E 5J1 Kindly register one hour prior to your appointment.

If you have any questions or concerns, please call the office at (705) 586-0060.

Timeline of the Sigmoidoscopy Preparation

What are my instructions for taking medicines and preparing for my procedure?

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- If you take aspirin or NSAIDs, such as Advil®, Motrin®, Celebrex®, or ibuprofen, you may continue to take them as usual.
- If you take a blood thinner, such as Plavix®, Pradaxa®, Clopidogrel®, Coumadin®, Warfarin®, Effient®, Prasugrel®, or Lovenox®, ask your health care provider for specific instructions.

THE DAY OF YOUR SIGMOIDOSCOPY

- Stop eating all solid foods <u>8 hours before</u> your procedure. Clear liquids are acceptable to drink.
- You may take all of your morning medicines (except for oral diabetes medicine pills) as usual with water up to 4 hours before your procedure.
- If you take oral diabetes medicine (pills) for your diabetes: do not take the medicine the morning of your procedure.

YES You may drink these clear liquids:	NO Do not drink these liquids:
 Gatorade®, Crystal Light Lemonade®, Pedialyte® or Powerade® Coffee or tea (black only) Carbonated or non-carbonated soft drinks Kool-Aid® or other fruit-flavored drinks Apple juice, white cranberry juice or white grape juice Jello (gelatin) or popsicles Broth 	 Alcohol Milk or non-dairy creamer Juice with pulp Any liquid you cannot see through Hard candy Nothing Red or Purple

2 HOURS BEFORE YOUR PROCEDURE

- Stop chewing gum
- Stop drinking everything, including all clear liquids

90 MINUTES BEFORE YOU LEAVE HOME FOR THE PROCEDURE

Administer the two enemas. Follow these insertion directions:

- 1. Lie on your left side.
- 2. Remove the cap from the tip of the enema bottle.
- 3. Insert the tip of the enema bottle gently into your rectum, about four inches.
- 4. Slowly squeeze the entire contents of the bottle into your rectum.
- 5. Hold the fluid inside of you for about 15 minutes, if possible.
- 6. Sit on the toilet and expel the fluid.
- 7. Immediately repeat steps 1–6 for the second enema.

Bring a list of all of your current medicines with you, including any over-the-counter medicines.

When should I call the call center?

If you have been ill and have had any of the following symptoms within 48 hours of your appointment, please call (705) 586-0060

- Fever greater than 38C°
- Productive cough (where your cough is producing phlegm)
- Diarrhea
- Vomiting (not related to taking the bowel prep)

WHAT ARE THE BENEFITS, RISKS AND ALTERNATIVES FOR A FLEXIBLE SIGMOIDOSCOPY?

Before starting the procedure, a member of our team will ask you to sign an informed consent indicating that you understand the procedure, its benefits and risks, and the alternatives for a flexible sigmoidoscopy. Read this handout to understand your informed consent.

What is the purpose of a flexible sigmoidoscopy?

Flexible Sigmoidoscopy is a procedure in which a doctor uses a flexible, narrow tube with a light and tiny camera on one end, called a sigmoidoscope or scope, to look inside your rectum and lower colon. The lower colon is also called the sigmoid colon and descending colon. Flexible sigmoidoscopy can show irritated or swollen tissue, ulcers, polyps, and cancer.

What are the benefits of a flexible sigmoidoscopy?

A flexible sigmoidoscopy can help a doctor find the cause of symptoms, such as:

- Bleeding from your anus
- Changes in your bowel activity such as diarrhea
- Pain in your abdomen
- Unexplained weight loss

Doctors also use flexible sigmoidoscopy as a screening tool for colon polyps and colon and rectal cancer. Colon polyps are abnormal tissue growths that may turn into cancer with time. If a polyp is found during the procedure, you may have to have a subsequent colonoscopy to have it removed. Flexible sigmoidoscopy can also find cancers at earlier stages. This greatly improves the chances for treating colorectal cancer successfully and reduces the chance that a person will die from colorectal cancer.

What are the risks of a flexible sigmoidoscopy?

The risks of complications from a flexible sigmoidoscopy are low, but may include:

- A reaction to the sedating medication, including breathing or heart problems.
- Bleeding. Occurs in less than 1 out of 100 patients (less than 1%).
- Perforation: a tear or a hole in bowel. Occurs in less than 1 in 100 patients (less than 1%).
- Infection. Occurs in less than 1 out of 100 patients (less than 1%)
- Aspiration: stomach contents may get into the lungs leading to a lung infection (pneumonia). Occurs in less than 1 in 100 patients (less than 1%)

Rarely blood transfusion or surgery are needed to treat these conditions.

Risks are higher in people taking steroids or anti-coagulation medicines, or in people that have certain serious diseases. There is also a risk that cancer or polyps will not be detected.

What are the alternatives?

There are other screening tests (barium enema, CT scan, or MRI) that may detect abnormalities in the colon and rectum but these procedures do not have the option of taking a sample tissue during the procedure. This reduces the need for additional tests and surgeries. Colonoscopy, which examines the entire colon, is an alternative as it allows the doctor to take sample tissues and remove polyps at the time of the procedure.

How soon will I recover?

If you were not given a sedative, you should be able to go home and return to normal activities immediately.

If you were given a sedative, you will first be transferred to the recovery area where you can rest. You will usually recover in about an hour but this depends on how much sedative you were given. You may feel a bit bloated for a few hours but this will pass.

Lifestyle Changes

If you smoke, stopping smoking will improve your long-term health.

Try to maintain a healthy weight, You have a higher risk of developing complications if you are overweight.

Regular exercise should improve your long-term health. Before you start exercising ask the healthcare team or your family physician for advice.

Disclaimer: This document contains information and/or instructional materials developed by Health Sciences North - ENDOSCOPY UNIT for the typical patient with your condition. It does not replace medical advice from your health care provider because your experience may differ from that of the typical patient. Talk to your health care provider if you have any questions about this document, your condition or your treatment plan.

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