What is a Colonoscopy?
Colonoscopy is an inspection of the large bowel by a specialised instrument called a colonoscope.

How are you prepared?
Prior to the colonoscopy you will be provided with a preparation that will clean out the bowel and allow for good views.

What we do?
You will be given a sedative drug through a vein in the hand to make you more comfortable during the procedure. The colonoscope is a long and highly flexible tube about the thickness of your index finger.
It is inserted through the rectum and allows for inspection of the whole large intestine. As cancer of the large bowel arises for pre-existing polyps (benign wart-like growths) it is advisable that any polyps that are found are removed at the time of the colonoscopy. Most polyps can be burnt off by placing a wire snare around the base and applying and electrical current (polypectomy).

Safety and Risks
Complications of colonoscopy are uncommon. Most surveys report complications at 1 in 1000 procedures or less. Complications which are uncommon, but can occur include:

- Intolerance to bowel preparation
- Reaction to sedatives
- Perforation (making a hole in the bowel)
- Bleeding from the bowel
- Splenic Injury
- Anaesthetic risk aspiration (fluid/food going into the lungs from the stomach)

Because of the risk of cancer, it is recommended that all polyps found at the time of the colonoscopy be removed. However, because you will be sedated, it is not possible to discuss this with you at the time of procedure. Therefore, it is important that you know this before.

Death is a remote possibility with any interventional procedure. If you wish to have full details of rare complications, you should indicate to your doctor before the procedure that you wish for all possible complications to be fully discussed.

Following the procedure
The sedative that you are given for the procedure may affect your memory and judgment therefore it is important to note:

YOU MUST NOT DRIVE, OPERATE MACHINERY, RETURN TO WORK OR SIGN ANY IMPORTANT DOCUMENTS FOR 24 HOURS AFTER YOUR COLONOSCOPY.

It is advisable, therefore, to have a reliable adult drive you home after the procedure and be with you that evening. If no-one is available you may go home by taxi-cab (not public transport) as long as the medical staff are satisfied that you are alert and well enough.

The gastroenterologists at Glen Eira Day Surgery all participate in the Gastroenterology Society of Australia Recertification Program. To do this certain data must be provided to a central database controlled by the Society. We provide the following information without your name or date of birth. Age, gender, polyp detection, histology, adequacy of bowel preparation and procedure time. This data is provided to ensure that your gastroenterologist is of the highest standard and remains so and they are assessed every 3 years to ensure they continue to meet quality standards. Please sign below to acknowledge your consent.

If you have any problems contacting us, please see your local doctor, or go to the nearest casualty (hospital).

I _____ (insert name), HAVE READ AND UNDERSTAND THIS INFORMATION
I HAVE BEEN GIVEN THE OPPORTUNITY TO ASK QUESTIONS

Signed _____ Date _____

PATIENT INFORMATION SHEET FOR COLONOSCOPY