

Dr A. LESLIE FISHER – GOLDFIELDS GI
St Francis House, 138-140 Lily Street, Bendigo VIC 3550
Tel: (03) 5434 3393 Fax: (03) 5441 3798
Email: fisherrooms@gmail.com

Instructions for Colonoscopy Preparation with PICO-SALAX for Morning Test

Colonoscopy Date Admission Time: To be advised the day prior.
The success of your examination depends on the bowel being as clear as possible. If it is not clean, the examination may need to be postponed and the preparation repeated. Please carefully follow the instructions below.

The week before your colonoscopy:

- You will need to obtain PICO-SALAX from your chemist. This comes in a box containing two sachets. You will not need a prescription. We have this available for a fee of \$10.
- Notify Dr Fisher if you are pregnant, allergic to medication or latex, have a cardiac pacemaker, heart valve disease or have had previous major bowel resections.
- If you are on medication for diabetes (tablets or Insulin), or if you are on blood thinning medication such as Aspirin, Plavix, Iscover or Warfarin/Coumadin, you must discuss this with him at least one week prior to your colonoscopy.
- Stop taking iron tablets or anti-diarrhoea medications 7 days before your colonoscopy.

The day before your colonoscopy: NO food at all today

- **Approved clear fluids include**, water, clear fruit juices (apple or pear juice), clear cordials (no pulp), soft drinks (lemonade, ginger ale), black tea and coffee (no milk or sugar), plain jelly, lucozade, sports drinks, chicken noodle soup (just the clear broth), barley sugar. You must not drink anything that contains red, purple or blue. You must not have any solid food products today.
- **First Dose – 2.00pm**: Empty the first packet (sachet) of PICO-SALAX into a glass of 150ml of water and stir for 2-3 minutes until dissolved. The solution can be refrigerated if required. Drink the first glass of PICO-SALAX. Then drink approximately two to three glasses of water each hour until the next dose. The laxative bowel preparation usually induces frequent, loose bowel movements within one to three hours of taking the first dose. It is best to stay at home within easy reach of the toilet. Drinking lots of water is very important, the more the better.
- **Second Dose – 8pm**: Empty the second sachet of PICO-SALAX into a glass of 150ml of water and stir for 2-3 minutes until dissolved. The solution can be refrigerated if required. Drink this second glass of PICO-SALAX and ensure that you drink approximately 250ml (one glass) of water each hour for the next 2-3 hours.
- You may continue to drink approved clear fluids until midnight but should have nothing to drink after midnight (you can have sips of water) and nothing to drink for two (2) hours prior to your test.

PHENYLKETONURICS ARE WARNED THAT THIS PRODUCT CONTAINS PHENYLALANINE

On the day of the colonoscopy:

- You should have nothing to eat or drink. Do not take any medications prior to your test. Take them with you on the day and you may take them after your procedure.

General Information about Colonoscopy

What is a colonoscopy and how is it performed?

Colonoscopy is a procedure to inspect the inside of the bowel using a thin, flexible tube, introduced via the back passage. An intravenous sedative is given prior to the procedure so that you will be sleepy and comfortable during the examination. The entire procedure usually takes between 20 and 40 minutes. Several procedure can be carried out during the colonoscopy including taking biopsies (small tissue samples) of the colon and removing polyps.

What are polyps?

Polyps are small growths attached to the lining of the bowel. Some polyps can develop into cancer later in life. Therefore, if polyps are detected during a colonoscopy, they are usually removed at the time of examination. As you will be sedated, it will not be possible to discuss the removal of polyps with you during the procedure. If you have any questions regarding removal of polyps, please ask Dr Fisher before the colonoscopy.

What happens after the colonoscopy?

Following the colonoscopy, you will remain in the hospital recovery area for approximately two hours until the effect of the medication wears off. You may experience slight discomfort or bloating which usually eases with the passing of wind. If you have a biopsy or a polyp removed, you may notice a small amount of blood passed in the toilet. **If you develop severe or persistent abdominal pain, bleeding from the back passage or any other symptoms of concern, you should contact your doctor immediately or go to the nearest hospital's Emergency Department.**

Because sedation given may interfere with your judgement or ability to concentrate, you should not drive a motor vehicle, travel on public transport alone, operate dangerous machinery or sign legal documents for the remainder of the day. It is necessary to arrange for a relative or friend to take you home from the hospital and stay with you.

What are the risks of colonoscopy?

Any medical procedure carries some risk, but colonoscopy is generally considered a safe procedure and complications are rare. Potential complications may include:

- Intolerance to the laxative bowel preparation (headaches, nausea, vomiting, dehydration)
- Reaction to the sedation / anaesthetic
- Bowel perforation (estimated risk is approximately 1 in 1000)
- Major bleeding (estimated risk is 1 in 3300 for biopsies and 1 in 500 for removal of polyps)

Although rare, perforation or major bleeding are potentially serious and may require urgent surgery.

What are the limitations of colonoscopy?

While colonoscopy is the best test for excluding bowel polyps or cancer, it is not perfect and a small proportion of polyps or cancers may escape detection. In about 5% of patients, the entire colon cannot be accurately assessed. This may be due to variations in the structure of the bowel, pathology within the bowel or because of inadequate bowel preparation. If this occurs you may need to have the colonoscopy repeated another time or you may need a CT scan or x-ray.

Are there any alternatives to colonoscopy?

The established alternative to colonoscopy is a barium enema x-ray. CT colonography is not yet routine in Australia. Colonoscopy is usually recommended over the other two tests because it is more accurate and allows biopsies to be taken and polyps to be removed.

YOU SHOULD BE ABLE TO LEAVE THE HOSPITAL ON THE SAME DAY, BUT IN SOME INSTANCES, YOU MAY NEED OBSERVATION IN HOSPITAL OVERNIGHT.