

## Are there alternatives?

Alternative tests to examine the colon include a barium enema or other types of x-rays that allow the doctor to view the outline of your colon. A barium enema is performed in a radiologist's office. Liquid is injected into the colon and rectum and x-rays are taken of the outline of the intestine. However, this is not a direct view of the lining of the colon and therefore is not as accurate. Also, if polyps or suspicious lesions are seen on a barium enema, a colonoscopy will also have to be performed afterward to remove or biopsy them directly.

## Are there risks?

If polyps are not removed and biopsies are not taken, then the risks of anesthetic, perforation of the intestine or bleeding is negligible. When using electrical current to remove polyps, complications may occur in less than one half of one percent of cases. There are more rare complications that your doctor will be happy to discuss with you.

## Where is the test performed?

Your colonoscopy can be performed as an outpatient procedure at Griffin and Bridgeport Hospitals, St. Vincent's Medical Center or most outpatient Surgical Centers. Please let the doctor know which you prefer.

## In Summary

Colonoscopy is the best method your doctor can use to view your lower GI tract. It can reveal cancer, polyps and sources of blood loss or disease. Further, these lesions can be biopsied and/or removed through the colonoscope during the exam. Serious complications rarely occur. It is performed as an outpatient procedure. Your doctor will be happy to answer any questions you may have at this time.

# COLON & RECTAL

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## Colonoscopy

## Frequently Asked Questions

## What is a colonoscopy?

Your colon comprises the last six feet of your gastrointestinal tract, the tube through which food and waste travel. Your body uses the colon to store indigestible material and form it into solid stool by withdrawing water and liquid before it is evacuated.

The colon is full of bends and turns that require a long, flexible, lighted tube to visualize its entire length. This instrument is called a colonoscope and is specially designed to allow your doctor to move it through the bends and turns of your colon to directly view the inside. The colonoscope has a tiny light and camera that transfers the image to a television screen that your doctor uses to view your colon. It also has an open channel in the tube that allows the doctor to pass instruments, take biopsies or remove polyps from your colon. With this instrument, your doctor can search for polyps, cancer growth, sources of bleeding, and other areas of concern.

## Why do I need the examination?

Directly viewing the inside of your colon is the best exam for the following:

**POLYPS** - To find and remove the fleshy tumors which are the forerunners of colon cancer.

**CANCER** - To detect colorectal cancer.

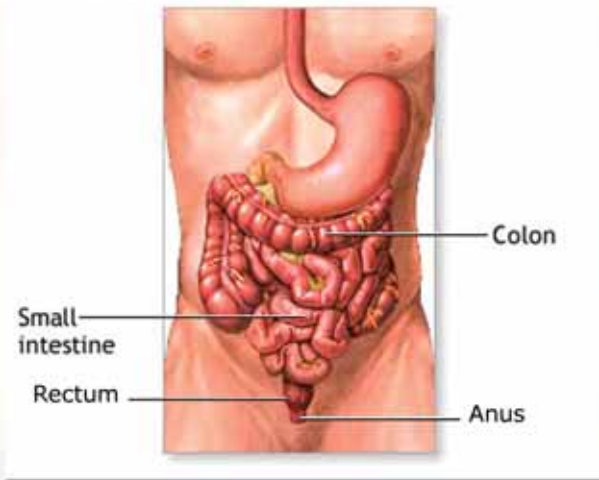
**COLITIS** - To diagnose Crohn's Disease and Ulcerative Colitis.

**DIVERTICULOSIS/DIVERTICULITIS** - Outpocketings of the intestinal wall that can become infected.

**BLEEDING LESIONS** - Hidden lesions in the colon that bleed, leaving blood in the stool.

**CHRONIC CONSTIPATION OR DIARRHEA**

## The Lower Digestive System



## How do I prepare for the exam?

The colon must be very clean when your doctor performs a colonoscopy to view the inside properly. Please refer to the specific instructions your doctor has provided and follow them exactly; call your doctor if you have any questions.

## The Procedure

Colonoscopy is performed in about 30 to 60 minutes, depending on your particular condition. It is performed on an outpatient basis. You will be sedated and most likely will remember and feel nothing at all. If you should feel some cramping during the exam, tell your doctor and more medication will be given as needed. The most common medications given are Demerol (a pain reliever) and Versed (a drug similar to Valium).

The colonoscope is inserted through the anus and is moved gently through the colon. If your doctor encounters a polyp or suspicious area, he may take a biopsy or remove a polyp through the colonoscope. These procedures are not painful.

## The Procedure *(continued)*

If polyps are encountered, your doctor will slip a tiny wire around the base and use a small electric current to burn it off. It is then sent to a pathologist for examination under a microscope. You may feel bloating or gas in the recovery room; this is due to air injected during the exam.

You will be monitored in the recovery area until you are awake. When you are awake, you will be discharged in the company of a responsible adult. 2-3 hours after the exam you will feel normal and will be able to eat anything you would like. You will have no physical restrictions except that you shouldn't drive for the remainder of the day. You should take all of your regular medications.

**If you are taking any blood thinning medication (coumadin, aspirin) please let your physician know.**

## The Drive Home

You must have someone available to drive you to and from the procedure.

## When will I know the results?

Your doctor will tell you his findings in the recovery area, but due to the sedation, you will most likely forget. A friend or relative may be told the findings of the exam if they are in the waiting area. Results of any biopsies taken will take about 7 days to be returned by the pathologist.

If you do not hear from your doctor about a pathology result in about 7 days, please call the doctor's office. Of course, your medical doctor will receive copies of all your reports and you may discuss the findings of the exam with your doctor at any time.