

COLONOSCOPY INFORMED CONSENT

Your physician has recommended that a colonoscopy be performed. Please read this information carefully and if you have additional questions, feel free to discuss them with a member of the team prior to the procedure.

What is the purpose of a colonoscopy?

Colonoscopy is used to examine the lining of the large intestine (colon) and, if necessary, to take biopsy specimens (tiny bits of tissue) or remove polyps (abnormal growths that can become a cancer). Since colon cancer starts as a polyp, removal of those polyps prevents colon cancer. Cancer of the colon is the second leading cause of cancer related death for men and women in Canada.

How is colonoscopy done?

Colonoscopy is a test using a video camera on a long flexible tube designed to pass through your large bowel looking for abnormalities. The image from the camera is projected on a video monitor and the doctor steers the scope around your bowel. During the procedure the tube needs to pass around some bends in your bowel, and requires that air be introduced into your bowel, to help with visualization. Sedation is provided to minimize any discomfort you may have as a result of these manoeuvres.

Up to 30% of the time polyps are found. Most can be removed through the colonoscope at the time of the procedure. Polyps can be snared (lassoed with a wire loop) and removed. A small piece of tissue (biopsy) may also be removed to send for analysis to determine if the abnormality was benign (noncancerous) or malignant (cancerous). Biopsies and polypectomies do not cause any discomfort.

How long will it take?

The procedure requires that your bowel be cleaned out the day before the test, in the privacy of your own home. Your colon must be completely clean from fecal material so that a thorough examination can be done. The recommended bowel preparation must be started on the morning of the day before your colonoscopy and you may have only clear fluids for > 24 hours before the test (no milk or solid food is allowed). Follow the bowel preparation instructions carefully or the procedure may have to be cancelled upon your arrival to the VEC and rescheduled.

At your scheduled appointment time you will visit our clinic where you will meet the doctors and nurses who will perform the procedure. The test usually takes approximately 20-40 minutes, however please allow for 2 hours at the VEC for waiting, preparation, and recovery.

What can I expect during the colonoscopy?

Colonoscopy is usually well tolerated and rarely causes much pain. An intravenous will be started, so that the doctor may give you medication to make you feel relaxed and sleepy. While you are lying on your side, the tube is inserted into the rectum and gradually advanced through the colon. The doctor will examine the lining of the bowel, perform any necessary biopsies or polyp removal, then the tube is slowly withdrawn. You may feel uncomfortable during the test from time to time because air is used to inflate the bowel.

What are possible complications?

While all the doctors at the VEC are very experienced and use the utmost caution, there are well documented small risks associated with the procedure. However the risk of not getting screened is significant (1 in 20 lifetime risk for colon cancer).

- **Bowel Preparation:** There is a risk of dehydration with the bowel preparation. Drinking lots of fluids with electrolytes (like sports drinks) helps to increase the quality of the bowel preparation and also decreases the risks of dehydration and the associated risks.
- **Drug reaction:** It is possible, although extremely unlikely, that you will develop a reaction to one of the medications. The reaction is usually mild and in the form of rashes, hives, or itching at the site of the IV catheter.
- **Perforation:** Puncture of the wall of the colon is very rare (1:1000 chance). If it occurs surgery might be necessary to repair the perforation and you will be hospitalized.
- **Bleeding:** There is a small risk of significant bleeding (1:100 chance) if a polyp is removed. Bleeding can occur up to 10 days later. This usually settles without further treatment and rarely blood transfusions or surgery may be required. Contact your physician or go to the emergency department if you have rectal bleeding of more than one half cup.
- **Missed abnormalities:** Some polyps or abnormalities might be missed. The risks are significantly higher if your bowel is not cleaned properly.

What can I expect after the colonoscopy?

Your pulse, respiration and blood pressure will be checked while you are in the recovery room. You may feel bloated or have some cramping. Due to the sedation given, your judgment and reflexes may be impaired for the rest of the day. Someone must accompany you home. You cannot drive or operate machinery for 12 hours post sedation. Unless your doctor tells you otherwise, you may resume your regular diet after leaving the VEC.

The doctor will explain the results of the examination to you and provide you with a written summary. These findings will also be communicated to your referring doctor.

What am I consenting to?

Your signature acknowledges that you have 1) read this information prior to taking the bowel preparation and give informed consent to have a colonoscopy with possible polypectomy and biopsy done, 2) that the procedure and risks have been adequately explained to you and 3) that you authorize the VEC endoscopist to perform the procedure with the assistance of any other healthcare staff, 4) you have agreed to pay for any uninsured services selected (those not covered by OHIP) either on an individual fee basis or by a block fee that is valid for 12 months, 5) a missed appointment fee of \$150 will be charged if sufficient cancellation notice is not given (72 hours prior to the procedure).

On the rare occasion, the specialist may determine that it is necessary to perform a gastroscopy. A gastroscopy is the examination of the upper part of the gastrointestinal tract. Gastroscopy is usually well tolerated and rarely causes much discomfort. The doctor may spray a local anaesthetic (xylocaine) into the back of your throat to numb the throat area. You may have a numb mouth and tongue up to an hour following the procedure and you may have some discomfort in your throat for a few hours (rarely).

If you have any questions about the information contained in this document please contact the clinic. We would be happy to assist you or provide clarification. You will have an opportunity before the procedure to discuss your concerns with a physician or nurse at your request.

Patient Name (please print): _____

Patient Signature: _____ **Date:** _____

Physician Signature: _____ **Date:** _____