

Patient: \_\_\_\_\_ Appointment Date: \_\_\_\_\_  
Arrival Time: \_\_\_\_\_ Procedure Time: \_\_\_\_\_

## **FLEXIBLE SIGMOIDOSCOPY**

**PLEASE READ THE ENTIRE FORM WHEN YOU RECEIVE IT. IT CONTAINS IMPORTANT INFORMATION CONCERNING DIET AND MEDICATIONS, SOME OF WHICH NEEDS TO BE DONE 1-WEEK PRIOR TO THE PROCEDURE.**

**\*\*\* On day of procedure please report to central registration (Surgical Daycare) department at RVH in Barrie. Enter the hospital at the Atrium Entrance \*\*\***

- Appointment changes by our office may occur due to unforeseen emergency cases.
- If you need to cancel, please call at least 7 days prior to your appointment. Waiting times are a major problem. Short notice cancellations may be subject to a fee of \$200.
- Bring all of your medications (including insulin) and your Ontario Health Card with you.
- Bring a bag for clothing. Do not bring valuables, jewelry, or large sums of money.

### **What is a Flexible Sigmoidoscopy?**

- A flexible sigmoidoscope is a thin, flexible tube with a camera on the tip. The scope is inserted into the rectum, and usually only part way through the large intestine. The procedure allows your doctor to examine the lining of the sigmoid colon and rectum. This procedure differs from a colonoscopy where the entire large bowel is examined. During the procedure, devices may be used to take biopsies, remove polyps, and sometimes to help control bleeding.

### **What are the risks of Flexible Sigmoidoscopy?**

- First it is important to understand the benefits. Flexible sigmoidoscopy is required for the diagnosis and treatment of certain diseases. Common indications include: blood in the stools, ulcerative colitis, abnormal imaging results, or known rectal or sigmoid polyps. Flexible sigmoidoscopy is an essential test since there are no effective alternatives to image the lining of the rectum and sigmoid. Additionally, biopsies which often help in the diagnosis of several common conditions, and removal of polyps, can only be done using direct visualization with sigmoidoscopy.
- The major risks of Flexible sigmoidoscopy include: **sedation (<1%), aspiration (<1%), bleeding (1%), infection (<1%), and perforation (<1/1000)**. The individual risk for each patient will vary depending upon patient and procedural factors.

### **Will I be sedated for the procedure?**

- An anesthesiologist will ensure your comfort during the procedure and most patients will remain completely asleep for the entire procedure.

- After receiving sedation, you will be unable to drive, operate machinery, or make any major decisions for the remainder of the day.
- Whoever is coming to pick you up can either wait for you (2-3 hours after arrival time), or they can arrange to be called when it is time to come and pick you up. If you are taking a taxi, someone must accompany you other than the driver.
- You will require someone to stay with you at home the evening after your procedure. **If you have nobody to stay with you after the procedure, your procedure will be cancelled.**

#### **What will happen after the procedure?**

- The doctor will speak to you and leave a brief report on what he/she has found and plans for future investigation, treatment, or follow-up. Most patient can resume regular eating, drinking, and activity within a couple of hours after the procedure.
- You can expect to be at the hospital about 2-3 hours from arrival to discharge.

#### **How do I prepare for the procedure?**

- **PURCHASE 2 FLEET ENEMAS AT ANY DRUGSTORE**
- **About 1 hour before coming to hospital:**
  - Heat two fleet enemas in warm water (not too hot)
  - Remove the cover from the nozzle. Lie on your left side with your knees bent and gently insert the nozzle into your rectum.
  - Squeeze the container slowly until all the fluid has been given
  - Try to hold the first enema for 5 minutes, then evacuate your bowels
  - Repeat the procedure with the second Fleet Enema, and hold the fluid only until you are unable to hold any longer
  - It is normal to experience some lower abdominal cramping.
- **DO NOT HAVE ANY SOLID FOODS FOR 8 HOURS BEFORE YOUR PROCEDURE. YOU MAY HAVE CLEAR LIQUIDS UNTIL 4 HOURS BEFORE YOUR PROCEDURE** (e.g., water, broth, clear drinks)
- After this time, **NOTHING BY MOUTH** including water, gum, candy or mints.
- Take your morning medications (except diabetes meds) with small sips of water.
- **IF YOU ARE TAKING ANY BLOOD THINNERS THESE MAY NEED TO BE HELD UP TO 1 WEEK PRIOR TO THE PROCEDURE.** Examples of blood thinners include: Plavix (clopidogrel), Brillinta (ticagrelor), Coumadin (warfarin), Pradaxa (dabigatran), Eliquis (apixaban), Xarelto (rivaroxaban), Lixiana (edoxaban), Lovenox (enoxaparin), or Heparin.
- **YOU MAY CONTINUE TAKING ASPIRIN, THIS IS SAFE.**

- **IF YOU ARE UNSURE ABOUT STOPPING ANY OF YOUR MEDICATIONS, PLEASE CALL YOUR DOCTOR.**
- If you are a diabetic, to avoid low blood sugar, please do NOT take your oral diabetes medications or any insulin on the morning of your procedure unless specifically instructed to do so by your physician. You can resume your diabetes medications after the procedure, once you have eaten. If you are taking insulin it is always a good idea to check with your endocrinologist or primary doctor as to the best way to manage your blood sugars. Please bring your insulin with you.
- If you are a smoker, you should not smoke at least 6 hours before the procedure.