

Instructions for Colonoscopy Preparation with PREPKIT-C for Morning Procedure

Colonoscopy Date.....

Admission Time.....

The success of your examination depends on the bowel being as clear as possible, otherwise the examination may need to be postponed and the preparation repeated. Please carefully follow the instructions below.

The week before the colonoscopy:

- You will need to obtain **PREPKIT-C** from your chemist. This kit contains 2 sachets of
- PICOPREP (15.5g) and 1 sachet of GLYCOPREP-C (70g). You will not need a prescription.
- Notify your doctor if you are pregnant, allergic to medication or latex, have a cardiac pacemaker or heart valve disease.
- 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 your doctor at least one week prior to the colonoscopy.
- Stop taking iron tablets or anti-diarrhoeal medications 7 days prior to your colonoscopy.
- All other regular medications can be continued.

Two days before the colonoscopy:

- Maintain a low fibre diet. Avoid brown or wholegrain breads, cereals, and any foods containing seeds, nuts or yellow cheese. Limit your intake of vegetables and fruit.
- You may have egg, steamed white fish, boiled chicken, white bread, white pasta, white rice.

On the day before the colonoscopy:

- You may have a normal breakfast. Thereafter, you may only have clear fluids for the rest of the day. **Approved clear fluids include water, clear fruit juices (eg. apple juice), clear cordials, soft drinks, black tea & coffee (no milk), plain jelly, Bonox, Lucozade, clear broth, barley sugar.** You must have no solid food or milk products after breakfast.
- Mix sachet of GLYCOPREP-C into ONE LITRE of water and refrigerate until required. A small amount of cordial can be added to improve the taste.
First Dose - 5.00 PM: Dissolve contents of ONE sachet of PICOPREP in a glass of water and drink slowly but completely. Make sure that you have plenty of water or approved clear fluids afterwards. 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 toilet facilities.
- **Second Dose - 6.00 PM:** Remove the GLYCOPREP-C from the refrigerator and try to drink a glass of the preparation every 15 minutes. Total intake time should be approximately 1 hour. If you start to feel nauseated whilst drinking the preparation. slow down the rate of intake.
- **Third Dose - 8.00 PM:** Dissolve contents of ONE sachet of PICOPREP in a glass of water and drink slowly but completely. Make sure that you have plenty of water or approved clear fluids afterwards.
You may continue to drink approved clear fluids until midnight but should have nothing to eat or drink after midnight.

On the day of the colonoscopy:

- You should have **nothing to eat**. You may drink up to 100mls water per hour until 2 hours before the tests. After that, have **nothing to drink**. You may take your usual medications (excluding those listed above) with a sip of water.

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 procedures 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 your doctor 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 passage of wind. If you have a biopsy or 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 the 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 important 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.

If you wish to have a more detailed discussion about potential risks, please ask your doctor prior to the procedure.

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 in routine use 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.