



# COLONOSCOPY

## Gastroenterology and Digestive Oncology

ENDOSCOPY, HEPATOLOGY, INFLAMMATORY BOWEL DISEASES  
PROCTOLOGY, FUNCTIONAL TEST MEASUREMENTS, VIDEO CAPSULE  
DIGESTIVE ONCOLOGY

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The examination will take place on ...../...../..... at .....o'clock

Please register:

- with the ENDOSCOPY DEPARTMENT (Route 510, 1<sup>st</sup> floor)
- with the ADMISSIONS DEPARTMENT in case of hospitalization
- with the DAY HOSPITAL (Route 150, 5<sup>th</sup> floor)

\*Non-contracted physicians, a fee supplement of 0 to 100% may be charged.



## Information prior to a total colonoscopy

### What is a colonoscopy?

Colonoscopy is the exploration of the large intestine (or colon) as well as in most cases, the end of the small intestine. This exploration is performed using flexible devices (or endoscopes) equipped with optical systems to visualize the walls, detect lesions, to take samples of it and to treat them if possible. The device is introduced through the anus.

### What are the reasons for proposing a colonoscopy?

The doctor will suggest that you perform this examination as part of an assessment for abdominal pain, a change in your intestinal transit, the presence of blood in the stool or as part of a screening for colorectal cancer.

During the examination, biopsies (samples of the colon mucosa using a forceps) may be carried out for microscopic analysis as well as the resection of polyps (excrescences of the colon mucosa), some of which may become cancerous.

The colon must be perfectly clean to safely ensure a quality examination. It is essential to scrupulously follow the instructions.

### How to prepare for a colonoscopy?

A 3-day no-residue diet precedes the examination. The colon is emptied by taking laxatives (two days before) and appropriate fluids the day before and the day of the examination as indicated below.

**Please note that different laxatives are available in pharmacies without a prescription (Picoprep, Moviprep, Plenvu, etc.).**

### Medication to stop before the examination

- Any iron-based medication: stop taking 10 days before the examination.
- Anticoagulants:
  - Plavix, Ticlid, Clopidogrel: stop 7 days before the examination in agreement with your cardiologist.
  - Sintrom: stop 5 days before the examination with relay by injections, according to the instructions of your doctor.
  - Injections of Innohep, Clexane, Fraxodi, Fraxiparin: to stop 24h before the examination.



- Eliquis, Xarelto, Brilique, Pradaxa, Lixiana: stop according to the instructions of your doctor.
- Antidiabetics:
  - Metformin, Metformax, Glucophage: stop 48h before your examination.
  - Insulin: consult with your endocrinologist.

### **Examinations to be performed before the colonoscopy**

Your doctor will inform you if it is appropriate to carry out a blood test depending on your condition.

Performing an ECG is required for anyone of 65 years or older. If you have a heart condition you will provide us with a consultation report from your cardiologist dating back less than a year.

### **Documents to be completed and to be brought on the day of the examination**

- We ask you to accurately fill out the attached form containing questions about your health problems, the operations you have undergone, possible allergies and the medication you take every day (**preoperative questionnaire**). Certain medicines for the treatment of diabetes and for liquefying blood must be stopped in agreement with the doctor who has prescribed them.
- Please fill out the form and hand it to us with your consent to undergo the colonoscopy.
- Please also bring your identity card, the doctor's order and, if applicable, a copy of the cardiac check and the blood test.
- If you have taken out hospitalization insurance (DKV, Ethias, AG Insurance etc.), please bring the necessary documents (responsibility, insurance card).

If something prevents you from coming, we strongly ask you to cancel the appointment for your examination at least 7 working days before the scheduled date. Failure to comply with this clause will result in the billing of an indemnity.



### Diet to be followed prior to the examination

No-residue (Fibreless) diet during the 3-4-5 days (cf. preparation for a colonoscopy below) before the examination, i.e. from this date .../.../..... and during this period drinking 2 litres of clear liquid per day:

## Preparation for a colonoscopy

Before this examination, a no-residue diet has to be followed during 3 days. This helps to clean the intestine and as such facilitate the examination for you and your doctor.

### **Some foods are therefore forbidden:**

- Brown bread, wholemeal bread, wholemeal rusks, wholegrain cereals, muesli. Products based on refined cereals are permitted.
- All types of vegetables and fruit:
  - No raw, nor cooked vegetables, not even blended vegetables.
  - No soups, no vegetable juice.
  - Fruit: in any form whatsoever.
- No fruit juice except filtered juices without pulp: grape juice, apple juice, cranberry juice and cherry juice.
- No jam but fruit jelly (without pieces or pits).
- Don't forget that nuts, hazelnuts, capers, raisins, olives, tomato sauce ... are also fruits and vegetables.
- Breaded and fried foods.
- Do not eat fibrous meat such as stew, etc.
- Rice.

### **Example of a daily menu:**

- Breakfast :
  - White bread, sandwiches, croissant, butter rolls without raisins, white buns, brioches or white rusks.
  - Butter or margarine.
  - Fruit jellies, honey, syrup, choco without nuts, curd cheese, cheese spread, Holland cheese, etc.
  - Tea or coffee with milk and sugar as usual.



Warm meal:

- Bouillon without vegetables.
- Meat, fish or egg.
- Natural potatoes, puree or pasta.
- Drinks: water, soda, etc.
- Dessert: pudding, flan, natural yoghurt, flavoured yoghurt, natural cake, dry biscuits, pastries without fruit.

Bread meal:

- White bread, rusks, buns or sandwiches.
- Butter or margarine.
- Natural condiments:
  - Sliced cheese, abbey cheeses, cheese spreads, cheese such as Camembert, curd cheese, etc.
  - Charcuterie without fine herbs (such as ham, salami, bacon, etc.).
  - Herring, tuna, fish salad also prepared without vegetables, sardines, smoked trout, salmon, halibut, etc.
- Beverages: water, soda, coffee, tea, etc.

Dessert:

- Pudding, flan, natural yoghurt, flavoured yoghurt, natural cake, pastries without fruit, etc.



## PREPARATION WITH PICOPREP

### **Preparation with Picoprep** with the examination performed in the morning:

**Two days before the examination (D-2):** take 1- 2 tablets of Dulcolax 5 mg around 17:00: yes - no

#### **The day before the examination (D-1):**

- around 17:00: take 1-2 tablets of Dulcolax 5 mg: yes-no
- around 18:00: a last light meal is allowed
- 19:00: 1 sachet of Picoprep to mix in a glass of still water (150 ml)
- 19:30 to 21:30: drink 2 litres of still water or clear liquid (tea, herbal tea, filtered broth ...)

#### **The morning of the examination:**

- fast: do not eat
- at 04:00: 1 sachet of Picoprep to mix in a glass of still water (150 ml)
- 04:30 to 06:00: drink 2 litres of still water or clear liquid
- At 6:00: take your usual medicines following your doctor's instructions
- from 06:00: do not drink anything more

### **Preparation with Picoprep** with the examination performed in the afternoon

**Two days before the examination (D-2):** take 1- 2 tablets of Dulcolax 5 mg around 17:00: yes - no

#### **The day before the examination (D-1):**

- around 17:00: take 1-2 tablets of Dulcolax 5 mg: yes-no
- around 18:00: a last light meal is allowed
- 19:00: 1 sachet of Picoprep to mix in a glass of still water (150 ml)
- 19:30 to 21:30: drink 2 litres of still water or clear liquid (tea, herbal tea, filtered broth ...)

#### **The morning of the examination:**

- fast: do not eat
- at 07:30: 1 sachet of Picoprep to mix in a glass of still water (150 ml)
- 08:00 to 10:00: drink 2 litres of still water or clear liquid
- At 10:00: take your usual medicines following your doctor's instructions
- from 11:00: do not drink anything more



## PREPARATION WITH MOVIPREP

**Preparation with Moviprep** with the examination performed in the morning:

**Two days before the examination (D-2):** take 1- 2 tablets of Dulcolax 5 mg around 17:00: yes - no

**The day before the examination (D-1):**

- have a light or liquid meal around 17:00
- prepare the Moviprep: open the packaging of the Moviprep, then open 1 cellophane sachet containing sachets A and B that you mix with a litre of cold water for a few minutes
- drink this preparation (1 litre) in 1h-2h + a litre of clear water, tea, herbal teas.

**The morning of the examination:**

- fast: do not eat
- 04:00-06:00: drink the second litre of Moviprep + 1 litre of clear water
- At 6:00: take your usual medicines following your doctor's instructions
- from 06:00 on: do not drink anything more

**Preparation with Moviprep** with the examination performed in the afternoon:

**Two days before the examination (D-2):** take 2 tablets of Dulcolax 5 mg around 17:00: yes - no

**The day before the examination (D-1):**

- have a light or liquid meal around 17:00
- prepare the Moviprep: open the packaging of the Moviprep, then open 1 cellophane sachet containing sachets A and B that you mix with a litre of cold water for a few minutes
- drink this litre of preparation in 1h-2h + a litre of clear water, tea, herbal teas.

**The morning of the examination:**

- fast: do not eat
- 08:00-10:00: drink the second litre of Moviprep + 1 litre of clear water
- At 11:00: take your usual medicines following your doctor's instructions
- from 11:00 on: do not drink anything more



## PREPARATION WITH PLENVU

- Preparation with Plenvu** with the examination performed in the morning:

**Two days before the examination (D-2):** take 1-2 tablets of Dulcolax 5 mg around 17:00: yes - no

**The day before the examination (D-1),** you may consume a snack (cream or natural yoghurt) 3 hours before the start of the preparation and then you do not eat anything more.

- At 19:00 you dilute the dose No. 1 (1 sachet) of Plenvu in ½ l of cold water and you drink the solution obtained in 30 min.
- At 19:30 you drink at least ½ l of water in 30 min. If you are thirsty do not hesitate to drink more water.

**The day of the examination (D0):**

- fast: do not eat
- At 05:00 you dilute the dose No. 2 (2 sachets) of Plenvu in ½ litre of cold water and you drink the solution obtained in 30 min.
- At 05:30 you drink at least ½ l of water in 30 min. If you wish to drink more than the amount indicated, you can do this until 06:00 at the latest. Then do not drink or eat anything more
- At 6.00: take your usual medicines following your doctor's instructions

- Preparation with Plenvu** with the examination performed in the afternoon:

**Two days before the examination (D-2):** take 1-2 tablets of Dulcolax 5 mg around 17:00: yes - no

**The day before the examination (D-1),** you may consume a snack (cream or natural yoghurt) 3 hours before the start of preparation and then you do not eat anything more.

- At 19:00 you dilute the dose No. 1 (1 sachet) of Plenvu in ½ l of cold water and you drink the solution obtained in 30 min.
- At 19:30 you drink at least ½ l of water in 30 min. If you are thirsty do not hesitate to drink more water.

**The day of the examination (D0):**

- fast: do not eat
- At 09:00 you dilute the dose No. 2 (2 sachets) of Plenvu in ½ litre of cold water and you drink the solution obtained in 30 min.
- At 09:30 you drink at least ½ l of water in 30 min. If you wish to drink more than the amount indicated, you can do this until 10:00 at the latest. Then do not drink or eat anything more.
- At 10:00: take your usual medicines following your doctor's instructions



## How is the examination carried out?

On the day of the examination, you must be fasting, i.e. you must not have eaten and have finished swallowing the bowel prep at least two hours before your examination.

The nurse will take you to your room (common room or private room depending on your preference) and ask you to undress, remove your denture and will give you a gown to pass the examination. He/she will also set up an infusion to allow the anaesthesiologist to give you a sedative so that the examination is completely painless. The average duration of the examination is 20-30 minutes.

## After the examination?

Some patients complain about abdominal cramps after the examination, related to air insufflation during colonoscopy. They disappear quickly after farting.

After the examination, the nurse will take you back to your room so that you may rest for a few hours.

The doctor will see you before you leave and explain his findings. If necessary, he will suggest that you see him again in consultation for the discussion of the results of the samples.

Sometimes the doctor will ask you to stay in the hospital for monitoring (often one night is enough) after removal of polyps, for example.

When you return home you must be accompanied and provide a means of transportation because of the anaesthesia. Do not stay alone the first night after the examination. Driving is prohibited and it is strongly advised not to make important decisions on the day of the examination.

## Practical information

A few weeks after the examination you will receive the honorary note.

The fixed amount that you have to pay yourself can be found on the invoice you receive from the hospital.

This also applies to the costs associated with the material used if a treatment is performed (for example, resection of a polyp).

Attention: If you opt for a common room, you should bring a coin of one or two euros with you in order to close the cupboard that is put at your disposal in the room.



## What complications may occur?

Complications related to the examination are rare (<1%).

**During the examination:** the perforation of the intestine and haemorrhages after resection of polyps are most often treated during the examination but will justify a hospitalization for monitoring. These complications may require a blood transfusion or surgery and may result from your medical or surgical history or from taking a certain medication. Exceptionally cardiopulmonary problems may occur during sedation.

**After the examination:** if in the days following the examination you run a temperature, experience chills, abdominal pain, rectal bleeding ..., you must contact the doctor who carried out the examination as soon as possible or go to the emergency service of the Clinique Saint-Jean stating that you had a colonoscopy in the days prior to these complaints.

It is not recommended to travel within 3 weeks after the endoscopy because of possible late complications.

## What is the risk of transmission of infections?

The endoscopes are disinfected between every examination according to a number of standardized techniques. Accessories (biopsy forceps, resection equipment, etc.) are carefully sterilized or are disposable. The risk of transmission of infection is virtually zero in the centres applying the appropriate procedures.



## Preoperative questionnaire

## Anaesthetic Department

Name: ..... First name: .....  
Proposed surgery (+ side if applicable): .....  
Date of Birth: ..... / ..... / ..... Date of surgery: ..... / ..... / .....  
Surgeon: .....  
Height (cm): ..... cm Weight(kg): ..... kg

### ■ Do you have any allergies?

No  Yes

#### What are you allergic to?

- Latex
- Antiseptics (Isobétadine,...)
- Pollen
- Animals
- Bananas or kiwi or tomatoes
- Bandages
- Contrast fluids (Iodine)
- Dust
- Antibiotics
- Other (ex: medicine): .....

#### What happens?

- Red skin or eruption or itch
- Runny nose
- Face swelling
- Asthma
- Hypotension or fainting
- Vomiting or diarrhoea
- Other: .....

### ■ Have you ever suffered from serious health problems? No Yes

Can you describe? .....

### ■ Consumption ?

- Tobacco  No  Yes  
Alcohol / beer / wine  No  Yes  
Recreational drugs  No  Yes

How many (cig/day) : ..... Stop since : .....

What and how many (glass/day) : .....

What and how much : .....

### ■ Do you have the following symptoms or diseases?

#### Lungs No Yes

- Asthma
- Chronic bronchitis / Emphysema
- Cough
- Nocturnal snoring
- Shortness of breath with moderate effort (two flights of stairs)
- Shortness of breath with light effort (walking 100 meters)
- Shortness of breath at rest or when you get dressed
- Sleep apnea (Bring your device at admission to hospital)

#### Heart No Yes

- Palpitations
- Chest pain radiating to neck or left arm with effort
- Chest pain radiating to neck or left arm at rest
- Other heart problem (infarction, cardiac intervention,...)
- High blood pressure
- Low blood pressure
- Swollen feet

#### Coagulation No Yes

- Frequent nose bleeding
- Frequent haematoma
- Bleeding gums when brushing teeth
- Wounds bleeding more than 5 minutes
- Liver problems (hepatitis, cirrhosis,...)
- Blood transfusion in the past
- Phlebitis / Lung emboli
- Medication affecting coagulation (Asaflow, Plavix, Sintrom, Fraxiparine, Xarelto,...)

#### Miscellaneous No Yes

- Diabetes  treated with insuline
- Thyroid disease
- Stomach ulcers
- Reflux of heartburn
- Brain problem (stroke, bleeding,...)
- Neurological disease (epilepsy, parkinson,...)
- Renal failure
- Recent intravenous injection of contrast fluids
- Corticoids taken during the last 3 months
- You are (maybe) pregnant

■ Right now, are you being treated (for a disease or something else) by your doctor / specialist, apart from the planned intervention ?

No  Yes Describe: .....

■ What medication do you take?

Name	Dosage	How many times per day	Name	Dosage	How many times per day

■ Have you had surgery before?  No  Yes

Name of surgery	Date (Year)	Type of anaesthesia	Name of surgery	Date (Year)	Type of anaesthesia

■ After these operations, have you suffered from...?

- Nausea or vomiting
- Bad wake up
- Difficulty breathing
- Sore throat
- Loss of sensibility (arm, leg,...)
- Memory loss
- Pain for more than 3 months after surgery
- Other : .....

■ Do you have...?

- An upper removable denture
- A lower removable denture
- A fixed upper denture
- A fixed lower denture
- Wobbly or fragile teeth
- Hearing aids
- Contact lenses

■ Has a member of your family had problems with anesthesia?  No  Yes

■ For children under the age of 12 : - was the childbirth premature?  No  Yes (... weeks)  
 - does the child have mental retardation?  No  Yes

■ Would you like to add some comments? .....

Signature



## Consent for a complete colonoscopy

I, the undersigned, Ms, M..... certify having read and understood the information contained in this brochure.

I was able to ask the questions that seemed useful to me.

I also understand that, after termination of the examination, I may not go home without being accompanied by an adult.

I give my consent to let the doctor proceed with the examination.

Name and first name: .....

Date: .....

Signature: .....

