

COLONOSCOPY UNDER GENERAL ANAESTHESIA

PREPARATION WITH PLENVU®

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01 APPOINTMENT

You just received an appointment for a colonoscopy or an examination of the colon.

In this brochure, you'll be able to find information about the procedure and the preparation for the examination.

We ask you to read this brochure thoroughly. This way, you'll get a good insight in the examination and you'll also be able to inform us if you think that you're a risk patient. If there are any remaining questions after reading this brochure, you can always contact us by calling 09 332 23 00.

DATE OF EXAMINATION:

TIME OF EXAMINATION:

NAME OF APPOINTING PHYSICIAN:

Registration

At the day of the examination, you need to register with your eID (entrance 11). You'll then be appointed a number with which you can be registered by the receptionist for a day admission. Afterwards you're expected at the Endoscopic Unit (entrance 12, route 1303).

02 WHAT IS A COLONOSCOPY?

With a colonoscopy or an examination of the colon, we detect abnormalities in the colon with a flexible tube (an endoscope) that is inserted via the anus to look at the colon and the transition to the small bowel.

During the examination, we check the inside of the bowel for swellings, signs of infection, polyps and other abnormalities. When needed, we take little pieces of tissue for microscopical research. In case of the encounter of polyps, these can be instantly removed as well.

03 EXAMINATION UNDER LIGHT SEDATION

You chose for a colonoscopy under light sedation. This means that your consciousness will be reduced temporarily for you to be more relaxed during the examination. Sedation is not anaesthesia: you won't completely lose consciousness, you will become a bit sleepy.

04 DO YOU TAKE ANY MEDICATION?

Do you take any of these medications at home: Aspirine®, Asaflow®, Aggrenox®, Clopidogrel (Plavix®), Effient®, Brilique®, Sintrom®, Marevan®, Marcoumar®, Pradaxa®, Xarelto®, Eliquis®, Lixiana®? Then the nurse will give you, in consultation with the physician, the necessary directions to stop these medications in time. This is in your interest, to guaranty the safety of the procedure.

05 PREPARATION

Since the examination will be with a general anaesthesia, an electrocardiogram (ECG) and blood draw can be advised. You will be informed if these are necessary for you while setting the appointment. This is among other things dependant on your age, heart conditions, etc. You can these tests here at UZ Gent or you can get them at your general practitioner's office. In this last case, make sure to bring the results with you at the day of the examination.

For a smooth examination, the bowel needs to be thoroughly cleaned in advance. If this preparation isn't executed properly, the physician won't have a clear view and the quality of the examination will decrease significantly. Moreover an unproper preparation will have an impact on the smoothness of the examination. We suggest you to follow these instructions step by step for an optimal cleansing of the bowel.

3 days before the examination

Stop eating food that contains fibres. Also avoid kernels, seeds, peels and nuts. These can clog the scope and obstruct the examination. At the back of this brochure, you can find clear guide lines for a low-fibre diet. Follow them precisely.

The day before the examination

You can only have liquid nutrition, like for example Fortimel®, Delical®, Fresubin®, Resource® (up to 3-4 bottles/day, low-fibre). These are liquid, calory-enriched meals, available in the pharmacy. Other alternatives for solid food are: soy drinks, dairy products without fruit or fibres (natural yogurt, yogurt drinks, milk, buttermilk, chocolate milk), clear broth, clear drinks like apple juice without pulp, Aquarius®, Oasis®, Lipton Ice Tea®, tea, etc.

The evening before the examination

- ▶ Drink Plenvu® dose 1 within the hour at 5 pm.
- ▶ Method: Dissolve Plenvu® dose 1 in 500 ml cold water. Drink this dose and an extra 500 ml water within the hour. Alternately drink a glass of Plenvu® and a glass of water every 15 minutes.
- ▶ Tips & tricks: Set an alarm clock every 15 minutes. Every time it goes off, you drink a glass of 250 ml. When you dissolve the Plenvu® in cold water, the taste gets less outspoken. Drinking the liquid through a straw will make the preparation easier as well.

The day of the examination

Time of examination	Time of drinking the preparation
Colonoscopy planned before 10 am	Drink Plenvu® dose 2 at midnight (12 pm)
Colonoscopy planned after 10 am	Drink Plenvu® dose 2 at 5 am
Colonoscopy planned after 12 am	Drink Plenvu® dose 2 at 7 am

- ▶ Drink 1-2 glasses of water before you start drinking the second dose of Plenvu®. This will help you to tolerate the product better.
- ▶ Dissolve Plenvu® dose 2 [A+B] in 500 ml cold water. Drink the second dose and an additional 500 ml water within the hour. Alternately drink a glass of Plenvu® and a glass of water every 15 minutes.

DRINKING OF ONLY WATER IS ALLOWED UNTIL

FROM THEN STAY SOBER!

06 SIDE EFFECTS OF THE PREPARATION

Within the hours after drinking the Plenvu® preparation, you'll be getting diarrhoea with occasionally stomach cramps. The final goal of the bowel preparation is to get a clear defecation. If your defecation remains dark or with flakes of stool, this means the bowel cleansing is insufficient. You need to drink an extra amount of clear water until it becomes clear (don't drink anymore after the time given to stay sober).

If you experience problems with the preparation or if your defecation is insufficiently clear, you can always contact our nurses at 09 332 23 00.

It can occur, though rare, that you get emetic tendencies or that you need to vomit. When this happens, it is possible that not enough of the product will remain in your body to create a proper effect. In case these tendencies occur, it is best to pause the preparation for 30 minutes. Something that can also be helpful, is to drink at a slower tempo and to drink some water in between.

You can continue to take in your everyday medications during the preparations, including the morning of the examination. Be informed that this cleansing can decrease the effect of some medications (for example birth control pills). If you take any medication related to diabetes, consult your physician for the correct dose and time of intake or injection.

In case of a decreased kidney function or a disfunction of the heart, warn the attending physician in advance. It could be the case that you need to follow a modified schedule.

Make sure to inform us in case you take any blood-thinning medication!

07 THE EXAMINATION

During the examination, you'll be at a comfortable examination table. You'll get an IV to administer the medication. The oxygen level in your blood will be measured with a small device on your finger.

The nurse will submit the sedation. During the examination, the oxygen level in your blood and your heart rate will be followed on a monitor.

The endoscope, a flexible tube connected to a camera, will be inserted in the colon via the anus. Sometimes small pieces of tissue will be taken for further research and in case of polyps, the physician will use a loop to remove them during the procedure.

The examination lasts 10-30 minutes. If multiple polyps need to be removed, it can take longer.

08 AFTER THE EXAMINATION

You will be closely monitored during your recovery of the general anaesthesia for about 30 minutes. Some patients can experience stomach cramps after the examination. These are caused by the air that is blown into the bowel during the examination. Usually this feeling will improve after you're able to pass some gas or if the nurse places a probe to release the gas.

After the examination, you are required to stay in the hospital for about 1 hour. The nurse or the physician gives the permission to go home. In exceptional cases (such as after the removal of specific polyps) it can occur that you need to be submitted to the hospital.

In case of heavy pains, blood loss, black defecation, fever or other worrying occurrences during the hours or days after the examination, please contact your attending physician, the general practitioner or the emergency room of the hospital.

Since you got anaesthesia, you won't be allowed to drive any vehicle the day of the examination, conduct any dangerous activities or sign any important paperwork. Your reflexes and sense of judgement can be clouded.

It's important that a person accompanies you home (your partner, a family member or an acquaintance). This person needs to present at the moment you wake up and needs to bring you home. You are not allowed to stay alone the night after the examination.

09 PRECAUTIONS AND RISKS

A colonoscopy is an examination with low risk of complications. We take as much precautions as possible to ensure a safe examinations and to minimize the risks. To prevent infection, all devices get sterilised. Material such as biopsy forceps and polyp loops are single use only. You will therefore be charged for them.

There is an absolute minimal risk of intestinal perforation in case of a polyp removal. Bleedings can also occur during the removal of these polyps. The risk increases when you take blood-thinning medication or when your blood coagulation is irregular. We draw blood for these risk patients before the examination to determine the blood values.

If one of these complications occurs, hospitalisation is required.

10 QUESTIONS OR PROBLEMS AFTER THE EXAMINATION

Your attending physician will be available if you would have any questions after the examination. If you experience any trouble after the examination, please contact the hospital.

Endoscopic Unit (from 8 am – 5 pm): 09 332 23 00

Emergency Room (after 5 pm): 09 332 27 42

NOTES

Endoscopic unit

Entrance 12, route 1303

T +32 (0)9 332 23 00

www.uzgent.be/endoscopische-eenheid

Deze brochure werd enkel ontwikkeld voor gebruik binnen het UZ Gent. Alle rechten voorbehouden. Niets uit deze uitgave mag worden veeveelvoudigd, opgeslagen in een geautomatiseerd gegevensbestand of openbaar gemaakt, in enige vorm of op enige wijze, zonder voorafgaande schriftelijke toestemming van het UZ Gent.

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