

Buderim Gastroenterology Centre
Colonoscopy Informed Consent

PATIENT LABEL

(This form must be read, understood, signed and returned to Buderim Gastroenterology Centre)

A Colonoscopy is the examination of your colon with a flexible, lighted scope. The reason this procedure is most often done is for:

- colon cancer investigation following for example, a positive faecal occult blood test (FOBT), family history.
- follow up and removal of polyps (abnormal growths), and
- investigation and possible treatment of iron deficiency anaemia, bleeding, diarrhoea or other bowel problems.

The benefits of colonoscopy allow for various procedures to be performed to aid in diagnosis or treatment. Such as:

- A biopsy, which is a small tissue sample about the size of a match head, may be taken and sent to pathology.
- If a polyp is noted, it may be removed using a small instrument that is passed through the scope. If a polyp is too large to be removed or if cancer is suspected, the site can be “tattooed” by injecting sterile ink. This is an aid for future follow up or for surgical resection of the polyp.
The removal of polyps has been shown to greatly reduce the risk of developing colon cancer.
- Abnormal bleeding may be treated with cauterisation, injection of constricting medicines or metal clips.

Colonoscopy performed by specially trained and experienced gastroenterologists is generally a very safe procedure, but, like any medical procedure does carry some possible risks:

- Nausea, vomiting; Faintness or dizziness; Headache; Pain, redness or bruising at the sedation site; Muscle aches and pains.
- Major complications such as bleeding or perforation (making a hole or tear in the colon) occur in less than 1 out of 1000 colonoscopy procedures and may require surgery to repair the hole. Bleeding and perforation are more likely when large polyps are removed.
- About 1 person in every 100 will experience a significant bleed from the bowel where the polyp was removed. Bleeding may occur even up to 14 days after polyp removal and is more likely to occur if you take certain medications that thin the blood.
- Reactions to the sedative medications given during the procedure may occur, although this is uncommon. Please see Anaesthetic consent form.
- Very rarely, there can be unforeseen complications that include breathing or heart problems, stroke, infection in the blood, injury to other internal abdominal organs, or even death.
- Sometimes it is not possible to see the entire bowel. This can happen if your bowel is not completely clean or the colonoscope could not be passed to the end of your large bowel. This could include missed polyps, growths or bowel disease.

Depending on the reason for your colonoscopy, you should also know that there may be potential risks to **not having the Colonoscopy**, such as delayed diagnosis of cancer or missed diagnosis of disease.

There are alternatives to colonoscopy:

- Barium enema or CT colonoscopy.
- Flexible sigmoidoscopy (looking at the lower 60 cm of the colon with a lighted scope).

