

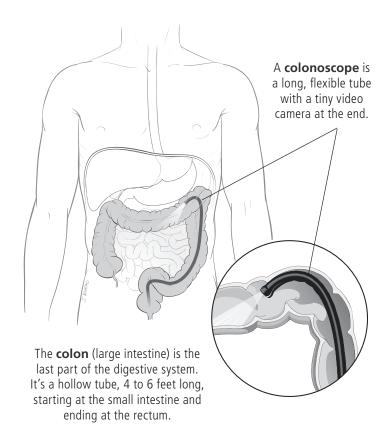
Colonoscopy

What is it?

Colonoscopy is a procedure to look at the inside of your colon and rectum. Your doctor inserts a **colonoscope**, a long, flexible tube with a tiny video camera at the end. The camera sends images to a monitor, allowing your doctor to see a variety of problems.

Why do I need it?

- Colonoscopy is the best test to screen for colon cancer, precancerous growths, and polyps. If an abnormal growth or polyp is found, the doctor can remove it, take a biopsy, or recommend surgical removal later. Finding and removing growths may prevent cancer from developing.
- A colonoscopy also helps your doctor see other problems that may be causing abdominal pain, weight loss, or changes in bowel habits. This includes ulcers, narrowed areas, inflammation, or bleeding.



Potential benefits	Risks and potential complications	Alternatives
 Colonoscopy is the best test for detecting precancerous polyps and cancer. The doctor can often remove polyps, perform biopsies, and treat problems during the procedure itself. 	 Some people have cramps and abdominal swelling. This is caused by the air used to inflate the colon, and passes shortly after the procedure. If your doctor takes a biopsy, you may see small amounts of blood in your stool after the procedure. If there's a lot of blood, you may need another colonoscopy, or possibly surgery. There is a slight risk (1 in 3,000) of perforating the colon. This may cause bleeding or infection. If this occurs, you may need immediate surgery to repair the injury. If the colon and rectum were difficult to examine or not completely empty, the procedure may not detect some problems. As with any medicine, there's a slight chance you may have a reaction to the sedative. 	 Barium enema Flexible sigmoidoscopy (only looks at the lower part of the bowel) Stool tests (not as sensitive, often used for yearly annual screening) X-rays, CT scan, and ultrasound

Preparing for a colonoscopy

 Tell your doctor about any medications you take, including prescriptions, over-the-counter medications, and herbal supplements.

If you are taking a blood-thinning medication (an anticoagulant), be sure your doctor knows about it. Contact your doctor or the people managing your blood thinner at least a week before your colonoscopy. Ask whether you should stop taking this medication for a short time. Examples of blood-thinning medications include warfarin (Coumadin), rivaroxaban (Xarelto), apixaban (Eliquis), and dabigatran (Pradaxa).

- Follow your doctor's instructions for cleaning out your colon. Your doctor will recommend a special diet that will empty and clean out your colon before the procedure. This can take 1 to 2 days. Plan to stay at home during this time, as you will need to use the restroom often. Cleaning out your colon is a very important part of the procedure.
- Arrange for a responsible adult to drive you home after your colonoscopy.

What happens before?

In most cases, you'll be given a sedative to help you relax. This is given through an intravenous line (IV) inserted into a vein in your arm.

What happens during?

- The colonoscopy will last about 30 minutes.
- You'll lie on your left side while the doctor inserts the colonoscope into your rectum.
- A camera at the tip of the colonoscope sends images to a monitor so the doctor can look closely at the inside lining of your colon. The scope puts air into your colon to inflate it and gives the doctor a better view.
- Your doctor can also insert instruments through the colonoscope to remove polyps, take tissue samples, inject solutions, destroy abnormal tissue, or help widen openings.

What happens after?

- You'll stay at the facility until you're partially recovered from the sedative. This usually takes about an hour.
 However, the sedative can take several hours (up to a full day) to wear off completely. Someone else will need to drive you home.
- You may feel bloated or have gas for a few hours.
 You may also see a small amount of blood with your first stool.
- You may discuss the results with your doctor after the exam or at a separate visit. Depending on the quality and findings of this exam, you may need follow-up procedures.