

Your First appointment at the 2 week wait colorectal straight to test clinic – Flexible Sigmoidoscopy.

If you decide not to attend this appointment please contact us on 0121 424 5000 so that we can give the appointment to someone else.

Your GP has asked us to see you within 2 weeks because he/she thinks that your symptoms may possibly be due to bowel cancer. So please make every effort to attend for everyone's peace of mind.

Please note that the vast majority (9/10) patients who attend this clinic are found not to have cancer.

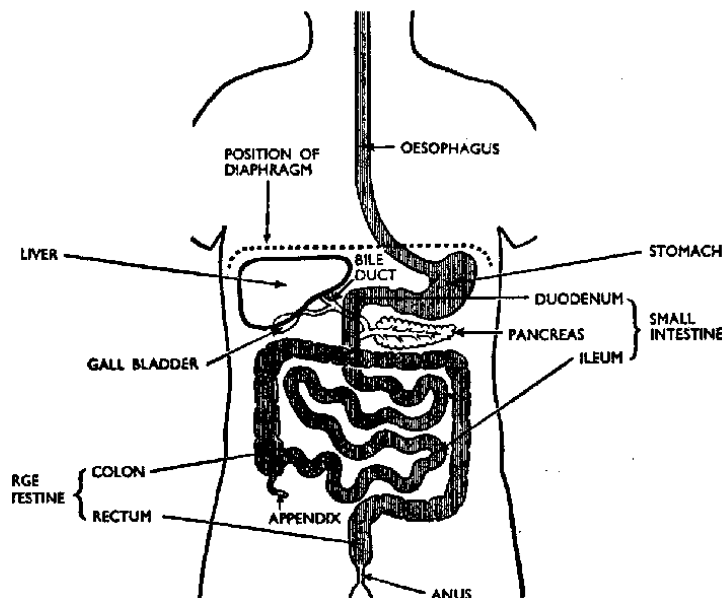
Having a Flexible Sigmoidoscopy

What is a flexible sigmoidoscopy?

This is a technique to look directly at the lining of the left side of your large bowel/intestine (colon) to try to find out what is causing your problems.

The sigmoidoscope is a thin, flexible tube with a bright light on the end. This tube is passed through the back passage and into your bowel.

It allows samples of tissue (a biopsy) or removal of small warty growths (polyps) to be removed painlessly for testing later.



What are the risks associated with this procedure?

- Bloating and abdominal discomfort are not unusual for a few hours
- Perforation of the bowel (a hole in the bowel) is a very rare complication. The risk is increased if a polyp needs to be removed (1 in 300 cases). This may require an operation to repair the damage
- Bleeding can be a complication of polyp removal (severe bleeding occurs in less than 1 in 300 cases). Rarely, this may require a blood transfusion and less commonly surgery.
- Using sedation can cause breathing complications in up to 1 in 200 procedures, which usually are not serious.
- No test is 100% accurate and abnormalities may be missed, including cancers.

A video recording and / or photographs may be taken for your records.

The person doing the test will discuss any questions you may have about the risks.

What are the benefits of this procedure?

Your doctor has referred you for a flexible sigmoidoscopy in order to investigate some symptoms you have been having, such as a change in bowel habit, rectal bleeding, or to review a problem they may have found before, like polyps or colitis. This will benefit you by providing a clear diagnosis.

During the procedure the doctor will also be able to remove small polyps. Like all tests, this is not guaranteed to demonstrate all abnormalities and on rare occasions conditions are not identified.

What are the alternatives to this procedure?

A flexible sigmoidoscopy allows direct inspection of the left side of your large bowel. It is recommended for you because either a full bowel examination is not required or sometimes it is done in combination with another bowel examination to look at the whole bowel. This includes; barium enema, Computer Tomography (CT) scan and a newer technique called virtual colonoscopy.

Preparation

Please read the information enclosed carefully. If you have any queries contact the unit where you will be having your procedure. Also enclosed is a consent form, again please read this carefully but do not fill in the details but please bring it with you to your appointment.

If you are **diabetic, on warfarin or clopidogrel** please contact the unit for further information. **Please stop all iron tablets at least four days before your appointment.**

Do not eat for four hours before your appointment. You may have water up to **2 hours** prior to your appointment and may continue with all other medication. You will be given an enema on the unit to clear the left side of your bowel. Please bring any medication you are currently taking (including sprays and inhalers) with you to your appointment. If you take a number of tablets please bring in your repeat prescription sheet.

When you arrive at the Hospital

Please report to the reception desk where a receptionist will check your details and direct you to the waiting area. Please be aware the appointment time you have been given, will be your admission time. Your procedure will be carried out as near to this time as possible however on occasions due to emergency patients being seen, this may be delayed.

- Please do not bring any valuables to the hospital
- Please bring a dressing gown and slippers for your comfort.
- Please do not wear any nail varnish, lipstick or jewellery
- Please bring a contact number of a relative or friend with you

A nurse will then explain the procedure to you, to make sure you understand the benefits, and possible risks as detailed in this leaflet. The staff will want you to be as relaxed as possible for the test, and will not mind answering your questions.

Provided you are happy for the procedure to be performed, you will be asked to sign the consent form (which has been sent with this information) to confirm your understanding of the procedure. You will be offered a copy of this.

This form also asks for your consent to further procedures that may be necessary during the procedure, including taking tissue samples (biopsies) that may be helpful in diagnosing your problem. Tissue may be used for research but you can request that no removed samples be used for this purpose on your consent form.

You will be taken to a room and asked to change into a hospital gown, your slippers and dressing gown. An enema will be given to ensure your bowel is completely clean. Just before the procedure you will also see the person doing the test who will

be performing the test and they will ask you to confirm your agreement and they will also sign your consent form.

If you need the help of an interpreter to understand any of this information, or on the day of the procedure, please contact the unit where you will be having the test, as soon as possible.

Please note relatives/friends or children should not be used as interpreters when you are required to sign your consent form. You should contact the Endoscopy Unit who will arrange for an interpreter to be present.

Privacy & Dignity

Delivering same-sex accommodation is a long standing commitment in the NHS as part of the drive to deliver the best possible experience for all patients (DOH 2007). Endoscopy Units within the Heart of England NHS Foundation Trust, maintain these standards either by operating single sex areas or single sex days.

Eliminating mixed sex accommodation is our priority except where it is in the overall best interests of the patient, i.e. in an emergency (they have a life threatening condition) or where delays to that patients treatment would mean deterioration in their condition. Should a patient of the opposite sex require such urgent care during your visit, we will ensure your privacy and dignity is maintained by screening off the patient of the opposite sex.

On occasions medications are used during this procedure, which are known as 'off shelf'. This means medicines that are used for clinical situations which fall outside of the terms of their Summary of Products Characteristics. The use of medicines in this way is seen as a legitimate aspect of clinical practice and is often necessary in many areas of medicine. For further information concerning the use of 'off shelf' drugs, please log onto the Medicines and Healthcare product Regulatory Agency (MHRA) website.

Sedation and Entonox

The procedure is usually performed without sedation or with Entonox. Entonox is an analgesic gas, highly effective in controlling pain. The nitrous oxide constituent of Entonox is rapidly eliminated.

If you have been given Entonox on its own for pain relief, it is important that you feel capable before considering whether to drive. You must wait at least 30 minutes after use before driving or using any machines. This will be discussed with you at your pre assessment visit.

Alternatively you may choose to have sedation. If you do have sedation, it will be given through a small needle in the back of your hand or arm. Sedation will make you slightly drowsy and relaxed but not unconscious. You will be in a state called co-operative sedation.

This means that although drowsy you will still hear what is said to you and therefore will be able to follow simple instructions during the procedure.

The nurse will attach a small clip to your finger or ear to measure your blood oxygen levels. You will normally be given oxygen during the procedure if you have sedation. Your blood pressure may also be measured automatically during the procedure using a small cuff around your arm.

Please note that we will not be able to give you sedation if you do not have a responsible adult to collect you and stay with you for 24 hours following your procedure.

These options will be discussed with you at your pre assessment visit.

Further information

Training doctors and other health professionals is essential to the continuation of the NHS, and improving the quality of care. Your treatment may provide an important opportunity for such training under the careful supervision of a senior doctor. You can, however, decline to be involved in the formal training of medical and other students - this won't affect your care and treatment.

During the Test

In the examination room you will be made comfortable on the couch, resting on your left side.

A nurse will stay with you throughout the procedure. The back passage will be examined using a finger before the sigmoidoscope is inserted. When the tube is inserted, air is passed into the bowel to inflate it (distend), which helps to give a clearer view. This may give you wind pains which should not last too long. You may feel the sensation of wanting to go to the toilet, but as the bowel is empty this is unlikely. You may pass wind and although this can be embarrassing for you, just remember staff understand what is causing the wind. Some discomfort can be caused by stretching of the bowel but this will be kept to a minimum.

The procedure may take 5 to 15 minutes or more if a polyp has to be removed. If a polyp or biopsy needs to be taken, a wire snare or forceps do this. This is not painful. The base of the polyp is usually cauterised (burnt) in the process. This reduces the

risk of bleeding. A sample of the bowel wall may be taken to help with your diagnosis.

After the test

You will be able to go home soon after the test if you do not have any sedation. If you have sedation you will be asked to stay in the unit to rest for one to two hours as each person can react differently to sedation. You may also have to stay in the unit for about two hours if a polyp has been removed.

Going Home

The wind pains and bloating should have settled. It is important you tell the nurse if they have not, or if they are becoming worse.

If you have had sedation it is essential that a responsible adult comes to pick you up from the unit and accompanies you home by car or taxi. Public transport is not suitable and it is advisable you have the following day off work. Please note the unit closes at 6pm. Your relative/friend should arrive no later than 5.30pm to collect you.

When you arrive home it is important to rest quietly for the remainder of the day with someone to look after you for 24 hours.

For the first 24 hours following sedation do not:

- Drive a car
- Drink alcohol
- Take sleeping tablets
- Operate any machinery or electrical items – even a kettle
- Sign any legally binding documents
- Work at heights (including climbing ladders or onto chairs)

Sedation can impair your reflexes and judgement. The effects of the sedation will have worn off by the next day and most patients will be able to resume normal activities but you are advised to have the next day off.

When will I know the results?

The nurse who has been looking after you will be able to give you a brief outline of the test results before discharge from the unit.

If a biopsy or polyp has been removed, the laboratory results will take longer, about 10 – 14 days. The nurse will advise you to discuss the details of the results and any necessary treatment with your GP or hospital specialist, whoever referred you for the

test. You will be given a Patient Centred Report with the outcome of your test written on it.

You will be given written instructions on your procedure and your aftercare. If you have any questions about the test, please contact the unit where you will be having the flexible sigmoidoscopy.

To contact us by telephone before your appointment:

Solihull Endoscopy Unit

Monday to Friday 8.30am to 5.30pm Excluding Bank holidays

An answer phone is available on **0121 424 5394** for you to leave your name, telephone number and message. We will return your call.

Patient / Nursing queries	0121 424 5042
Booking queries	0121 424 4406
Pre-Assess queries	0121 424 0423

Heartlands Endoscopy Unit

Monday to Friday 8:30am to 5.30pm. Excluding Bank holidays.

Nursing/Medical enquiries	0121 424 0438
Booking enquiries	0121 424 0430

Good Hope Hospital - Scoping Suite Treatment Centre

Monday to Friday 8:30am to 5.30pm Excluding Bank holidays

Telephone: 0121 424 7155, Diabetic/Warfarin patients please contact 0121 424 9506.

For non urgent messages an out of hours answerphone is available. If you leave a message and your contact details a member of staff will contact you when the department re-opens.

If you are unable to keep your appointment please telephone the appropriate number as soon as possible so the appointment can be allocated to another patient.

Contact us by telephone before your appointment if you need the help of an interpreter to understand any of this information or, on the day of the

procedure, please contact the unit where you will be having the test on receipt of this letter.

Please keep this information safe in case you wish to refer to it in the future.

Our commitment to confidentiality

We keep personal and clinical information about you to ensure you receive appropriate care and treatment. Everyone working in the NHS has a legal duty to keep information about you confidential. We will share information with other parts of the NHS to support your healthcare needs, and we will inform your GP of your progress unless you ask us not to.

If we need to share information that identifies you with other organisations we will ask for your consent. You can help us by pointing out any information in your records which is wrong or needs updating.

Additional Sources of Information:

Go online and view NHS Choices website for more information about a wide range of health topics <http://www.nhs.uk/Pages/HomePage.aspx>

You may want to visit one of our Health Information Centres located in:

- Main Entrance at Birmingham Heartlands Hospital Tel: 0121 424 2280
- Treatment Centre at Good Hope Hospital Tel: 0121 424 9946 or contact us by email: healthinfo.centre@heartofengland.nhs.uk.

Dear Patient

We welcome your views on what you liked and suggestions for how things could be improved at this hospital. If you would like to tell us and others about your experience please make your comments through one of the following sites:-

- NHS Choice:- www.nhs.uk
- Patient Opinion:- www.patientopinion.org.uk
- I want great care:- www.iwantgreatcare.org (Here you can leave feedback about your doctor)

Be helpful and respectful: think about what people might want to know about this hospital or how your experiences might benefit others. Remember your words must be polite and respectful, and you cannot name individuals on the NHS Choice or Patient Opinion sites.

If you have any questions you may want to ask about your condition or treatment, or anything you do not understand or wish to know more about, write them down and your doctor will be more than happy to try and answer them for you.