



REFERRAL AND/OR REQUEST(S) - TO CAULFIELD ENDOSCOPY

Appointment Time:

Date:

Address: 544 Hawthorn Road, South Caulfield, Victoria 3162

Name:

Date of Birth:

Address:

Telephone (H):

Telephone (B):

Med. No.

REFERRAL/REQUEST(S) FOR:

CLINICAL DETAILS:

REFERRING DOCTOR DETAILS:

PROCEDURE:

RESULTS:

- Gastroscopy**
 Colonoscopy
 Consultation

- Email Report ()
 Post Report
 Facsimile Report ()

COPIES TO:

DOCTOR'S SIGNATURE:

DATE:

DOCTOR:

- DR S Pianko
 DR A Dev
 DR D Ratnam
 DR V Knight

PROCEDURE:

- Glen Eira Day Surgery
 544 Hawthorn Road
 Caulfield South 3162
 Cabrini Day Procedure Centre
 Isabella Street
 Malvern 3144

CONSULTING:

- Glen Eira Day Surgery
 544 Hawthorn Road
 Caulfield South 3162
 Wattleree Specialist Group
 198 Wattleree Road
 Malvern 3144
 Moorabbin Specialist
 Consulting Centre
 873 Centre Road
 Bentleigh East 3165

GASTROSCOPY

Gastroscopy is a simple and safe procedure which allows accurate views of the oesophagus, stomach and duodenum. It is unlikely to cause problems for patients unless they have serious heart or chest problems. At Gastroscopy, there is a small risk of perforation of the gullet (oesophagus) in the order of approximately 1%, if a dilatation is performed.

You will be given an injection into a vein to make you relaxed and drowsy and you may remember little about the test.

Special instructions for gastroscopy:

1. **You must not eat or drink for six hours** before your appointment.
2. You may take essential medication with a sip of water.
3. If you are a diabetic, please discuss fasting with your diabetic specialist.
4. **Do not drive a car, operate machinery or sign important legal documents** for the rest of the day.
5. Arrange to be picked up after the appointment. You will be at GEDS for about 2½ - 3 hours. One of our nurses will contact your "pick up" half an hour before your discharge.
6. Please bring your private health insurance details and a **valid Medicare card** with you on the day of your appointment.

IMPORTANT: These medical procedures carry a small risk of bleeding, perforation or unexpected reaction to the anaesthetic agents. If you have any questions, please do not hesitate to discuss them with the physician performing the procedure.

PLEASE NOTE: that you will not be admitted into theatre immediately. There may be some delay between initial presentation to GEDS and your theatre admission.

COLONOSCOPY

Colonoscopy is a procedure which allows inspection of the large bowel, removal of polyps and taking of biopsies (small tissue samples) if necessary. **Bowel preparation is required for colonoscopy**, this and an information sheet **which you should read** regarding the test and all the associated risks, need to be picked up from **Glen Eira Day Surgery (GEDS)** prior to your appointment.

Before the test you will be given an injection that will make you drowsy so that you should be comfortable during the procedure. You will be at GEDS for about 3 hours. GEDS staff will advise your friend / relative when you can be collected.



544 Hawthorn Road, South Caulfield, Victoria 3162

t: 9595 6666 f: 9595 6611

Patient Information – Colonoscopy

WHAT IS A COLONOSCOPY?

Colonoscopy is a procedure used to inspect the bowel and allows for a variety of operations to be carried out through the colonoscope. These operations may include taking small tissue samples (biopsy) and removal of polyps. An alternative method of examining the large bowel is barium enema. Colonoscopy has the advantage over barium enema of allowing tissue samples or biopsies to be taken.

HOW ARE YOU PREPARED

Prior to the colonoscopy you will need to pick up a kit from 544 Hawthorn Road, South Caulfield containing full instructions. This enables the bowel to be cleaned out to provide good views of the bowel.

You will be given a sedative drug through a vein in the arm before the procedure to make you more comfortable.

SPECIAL CONSIDERATIONS

You should advise nursing staff if you are sensitive (allergic) to any drug or other substance (especially Latex).

You should **cease iron** tablets and any drugs to stop diarrhea **five** days before the procedure. You should inform your doctor if you are taking blood thinning tablets, have heart valve disease, or have a pace maker implanted.

WHAT DO WE DO

The colonoscope is a long and highly flexible tube about the thickness of your index finger. It is inserted through the rectum into the large intestine to allow inspection of the whole large bowel.

As a cancer of the large bowel arises from pre-existing polyps (a benign wart-like growth), it is advisable that if any polyps are found they should be removed at the time of examination. Most polyps can be burnt off (polypectomy) by placing a wire snare around the base and applying an electric current.

SAFETY AND RISKS

For inspection of the bowel alone, **complications of colonoscopy are uncommon**. Most surveys report complications of 1 in 1000 examinations or less.

Complications which can occur include

- An intolerance of bowel preparation solution or reaction to sedatives used
- Perforation (making a hole in the bowel) or major bleeding from the bowel is rare, but can occur. This may then require surgery.
- When operations such as the removal of polyps are carried out during the procedure, there is a slightly higher risk of perforation or bleeding from the site where the polyp has been removed.
- Complications of sedation are uncommon and are usually avoided by administering oxygen during the procedure and monitoring oxygen levels in the blood. Rarely however, in patients with severe cardiac or chest disease, serious sedation reactions can occur.
- A number of rare side effects can occur with any endoscopic procedure. Death is a remote possibility with an interventional procedure. If you wish to have full details of *rare* complications, you should indicate to your doctor before the procedure that you wish for all possible complications to be fully discussed.
- Because of the risk of cancer, it is recommended that all polyps found at the time of colonoscopy be removed. However, it will not be possible to discuss the removal with you at the time of examination, as you will be sedated. Therefore, it is necessary that you agree to having removed any polyps found during the procedure. If you have any questions or reservations about this, please inform your doctor.
- In the unlikely event of haemorrhage occurring, a blood transfusion may be necessary.

AFTERWARDS

YOU SHOULD NOT DRIVE, OPERATE MACHINERY, RETURN TO WORK OR SIGN ANY IMPORTANT DOCUMENTS FOR AT LEAST TWENTY FOUR HOURS AFTER YOUR COLONOSCOPY.

The sedative painkiller you are given before the procedure is very effective in reducing any discomfort. However, it may also affect your memory for some time afterwards. Even when the sedative appears to have worn off, you may find you are unable to recall details of your discussion with the doctor. For this reason, a relative or friend should come with you if possible. If you do not recall discussions following the procedure, you should contact your doctor.

If you have any severe abdominal pain, bleeding from the back passage, fever or other symptoms that cause you concern, you should contact us immediately on 9595 6666 or 9387 1000 (Drs Pianko, Dev, Ratnam & Knight). If you have any problems contacting us, please see your local doctor or present to the nearest Accident and Emergency centre / Casualty.