



Information Guide

Gastroenterology

Short colonoscopy

Definition:

This examination consists of inserting a small flexible camera through the anus to examine a portion of the large intestine. The inner lining (mucosa) of the rectum and colon is visualized up to about 70 cm. If necessary, small superficial samples (biopsies) are taken or polyps (small pieces of flesh) are removed with the help of the camera.

What are the steps?

- The short colonoscopy only lasts a few minutes.
- The nurse in the examination room will ask you to lie on a stretcher on your left side. Your legs will be bent on your stomach.
- The doctor will perform a rectal exam, and then insert the camera into your rectum.

During the examination you may feel:

- A false urge to defecate, as the rectum is inflated with air. This false urge will decrease as the camera progresses through the intestine.
- A feeling of swelling in your belly due to the air blown by the camera.
- Some short-lived cramps (a few seconds).
- A few hours after the examination, you may experience bloating. The passage of gas will reduce them.

If you wish, medications to help you relax and painkillers may be administered before the examination. If this is the case, you must be accompanied for the return home.

Possible complications:

Complications following a colonoscopy are rare. However, the following may occur:

- Intestinal perforations or bleeding. The risk is slightly higher if polyps are removed.
- Complications related to medication given for pain relief: temporary drop in blood pressure and slowed breathing, an allergic reaction.

Preparation before the examination:



Note well!

If you are given medication to reduce pain and relax you:

Make sure you are accompanied for your return home for the next 24 hours. This is MANDATORY.

You will not be able to drive your vehicle for the next 24 hours following the examination.

Should I continue taking my medications?

Unless otherwise advised by your doctor, take your medications as usual.

If you are taking blood-thinning medications (Coumadin™, Pradaxa™, Plavix™, etc.), you can continue to take them as usual UNLESS you have been instructed to stop them.

The large intestine must be completely clean for the examination to be accurate and complete. You must prepare your intestine well; otherwise, your examination will have to be redone.

Get these products at your pharmacy:

- ✎ **Two (2) sodium phosphate enemas (Fleet™)**

On the morning of the examination.

- Take your usual medications with your breakfast.
- Have a light breakfast (juice, coffee, toast).
- You can have a light meal up to 2:30 hours before the examination.

2:30 hours before the examination.

- Administer the first sodium phosphate enema (Fleet™) through the anus, following the instructions on the box. Hold it for 5 to 10 minutes for it to be effective.
- Do not eat anything from this moment on. You can drink water.

1:30 hours before the examination.

- Administer the second Fleet™
- It is normal to be able to hold it for less time than the first.

30 minutes before the examination.

- Report to the gastroenterology department of the site where you have an appointment.

Plan your visit

- Bring your hospital card and health insurance card.
- If you do not have a hospital card, plan to arrive a little early to obtain one at the admissions department.
- Bring an **up-to-date list of your medications**.
- If you have a **pacemaker**: bring your identification card and a copy of the last verification.
- Do not consume alcohol or drugs 24 hours before and after the examination.
- Bring a snack that you can have after your examination.
- Do not wear any jewelry or piercings, or nail polish.
- If you receive medication to reduce discomfort during the examination, **you must be accompanied by someone who is able to drive you, as driving is prohibited for 24 hours after the procedure**.
- For women, menstruation is not a barrier to the examination.

If you cannot attend your appointment, call 418-682-7888.

Where to go:

Site	Instructions for the gastroenterology department
Centre hospitalier de l'Université Laval (CHUL)	2705, boul. Laurier, Québec, G1V 4G2: room K-0526 Main entrance, turn right after the gift shop, follow the white arrows on the ground.
Hôpital de l'Enfant-Jésus (HEJ)	1401, 18th street, Québec, G1J 1Z4: at door E Main entrance, turn left down the hallway, take the elevator and go down to the basement, the gastroenterology sector is at the far right of the central waiting room.
Hôpital du St-Sacrement (HSS)	1050, chemin Ste-Foy, Québec, G1S 4L8: local D0-32 Main entrance, turn left down the hallway, take the elevator and go down to the ground floor (RC), continue down the right corridor to the gastroenterology reception.
Hôpital de St-François d'Assise (HSFA)	10, Espinay road, Québec, G1L 3L5: room A1-121 Main entrance, continue down the central corridor and head towards the emergency department.
Hôtel-Dieu de Québec (HDQ)	11, Côte du Palais, Québec, G1R 2J6 : room 7421 Main entrance, take the central elevator and go up to the 7 th floor, turn right when exiting the elevator.

After the short colonoscopy

Consult the *Post-Gastroscopy and Post-Coloscopy* document

Personal notes:

This guide makes recommendations in accordance with the scientific information available at the time of its publication, i.e. 24/04/2023. However, these recommendations are in no way a substitute for the judgment of a clinician. If you have any questions, we invite you to contact your healthcare professional. If in one way or another you misuse the information contained in this document, the CHU de Québec cannot be held responsible for any damages of any kind in this regard.



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