



Information Guide

Gastroenterology

**Long colonoscopy
Colyte & Dulcolax**

Definition:

Long colonoscopy involves inserting a flexible tube with a camera through the anus to examine the entire large intestine up to the level of the appendix.

During the examination, you will feel a sensation of bloating in your abdomen, as the camera blows in air. You may experience some cramps, which are generally very brief (a few seconds).

If necessary, small biopsies (surface samples) will be taken or polyps (small flesh balls) will be removed using a clamp inserted by the camera.

What are the steps during the examination?

- The long colonoscopy lasts about 15 to 30 minutes.
- The nurse in the examination room will ask you to lie on a stretcher on your left side. Your legs will be folded up onto your stomach.
- The doctor will perform a rectal exam and then insert the tube into your rectum. It is normal to feel a false urge to have a bowel movement, as the rectum is inflated with air. This false urge will decrease as the camera progresses through the intestine.

It can also happen that you experience bloating for a few hours following the examination. The passage of gas will gradually relieve the discomfort.

Possible complications of the examination:

Complications are very rare.

- Perforation of the intestine or bleeding is rare, but can occur. The risk is slightly increased if biopsies are taken or if polyps are removed.

Preparation before the examination:

Due to the medication that may be given to reduce pain and discomfort, it is mandatory that you be accompanied for your return home. You will not be allowed to drive your car. A nurse will monitor you for a minimum of 30 to 60 minutes. Please plan for this delay with your companion.

Most of your medications can be taken as usual, including aspirin (ASA™), except:



- Stop all **iron supplements** (as it colors the stool).
- If you are taking **blood-thinning medications** (Coumadin™, Pradaxa™, Plavix™, etc.), special instructions will be given to you by a nurse to indicate when to stop and resume taking them. This nurse will have informed the doctor who prescribed the medication for you. If you have not received these instructions, please call the appointment center at 418-682-7888.
- If you are **diabetic and taking insulin**, special instructions will be given to you by a nurse to indicate when to stop and resume injections. This nurse will have informed the doctor who prescribed the medication for you. If you have not received these instructions, please call the appointment center at 418-682-7888.
- If you are **diabetic and taking medications other than insulin (by tablet or injection)**, do not take them on the day before (during the liquid diet period) and the morning of your examination. You can take these medications at the scheduled time of your next dose in the day following your examination or at the scheduled time during the week. If you have any questions, please contact the health professionals responsible for your diabetes (doctor, nurse or pharmacist).
- If you are **diabetic and taking a medication by injection once a week (other than insulin)**, take your medication as directed, regardless of the time of your examination.

**Note well!**

If you receive your appointment **within a shorter period than a week, start preparing as soon as possible.**

The large intestine must be completely clean for the exam to be accurate and complete. Using Colyte™ & Dulcolax™, you must properly prepare your intestine, otherwise your exam will have to be repeated.

Obtain this product at your pharmacy

-  **Colyte™** 4 liters.
-  **Dulcolax™** 5mg, 2 tablets.

7 days before the exam:**Foods to avoid until the exam:**

- x Nuts or seeds (cereals, multigrain bread, whole wheat, etc.).
- x Fruits with small pits (strawberries, raspberries, tomatoes, grapes, etc.).
- x Legumes (red beans, lentils, chickpeas, etc.).
- x Corn.

The day before the exam:**Liquid diet:**

- ✓ Water.
- ✓ Clear fruit juices (apple, white grape, or white cranberry).
- ✓ Broth or bouillon.
- ✓ Iced tea, coffee or tea (without cream or milk).
- ✓ Gatorade®, Kool-Aid®, Jell-O® or fruit-flavored beverages (except red, green, blue, or purple).
- ✓ Popsicles® (except red, green, blue, or purple).
- ✓ NON-FIBER nutritional supplements: Boost®, Ensure®, or diabetic supplement (e.g. Glucerna®) in vanilla flavor only (**a maximum of 2 supplements is allowed and must be taken before 6:00 pm on the evening before the long colonoscopy**).

 **Not allowed:**

- x No solid food.
- x No juice with pulp (red grape, orange, or pineapple juice).
- x No dairy or dairy substitutes (e.g. soymilk).
- x No beverages that are red, green, blue, purple, or dark-colored carbonated beverages (Coke or Pepsi).
- x No alcoholic beverages.

 **Attention:**

- If you are **diabetic**, monitor your blood sugar regularly.
- Unless otherwise instructed by your doctor, it is important to **drink plenty of fluids** throughout the preparation period up to 1 hour before the exam.

The day BEFORE the exam:**MORNING**

- **Upon waking up**, start the **liquid diet** following the recommendations from the list above.
- Proceed to prepare **Colyte™** and refrigerate for best taste

PM

- At **3:00 PM** take a **temporary break** from the liquid diet to promote intake of **Colyte™**

EVENING

- From **6 PM** take **2 liters of Colyte™** (about 1 glass every 10 minutes). If you are nauseous, drink Colyte™ more slowly, but you must take at least 1.5 liters before the examination.
- Then continue the liquid diet
- At **9 PM**, take the **2 tablets of Dulcolax™ 5 mg**

The day of the exam

4 hours before the exam

- Take 2 liters of Colyte™ (about 1 glass every 10 minutes). If you are nauseous, drink Colyte™ more slowly, but you must take at least 1.5 liters 4 hours before the examination.

1 hour before the exam

- You must be completely fasting from this point on. Do not take any liquids anymore.

30 minutes before the exam

- Report to the gastroenterology department of the CHU 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 make one at the admission service.
- Bring an **up-to-date list of your medications**.
- If you have a **pacemaker**: bring your identification card and a copy of the latest check.
- Do not consume **alcohol or drugs** 24 hours before and after the exam.
- Bring a snack that you can have after your exam.
- Do not wear any jewelry or nail polish.
- If you receive **medication to reduce discomfort during the exam, you must be accompanied by someone who can drive you because driving is prohibited for 24 hours after the procedure**.
- For women, menstruation is not a hindrance to the exam.

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 colonoscopy

Consult the document *post-colonoscopy*.

Personal notes:

This guide provides recommendations in accordance with the scientific information available at the time of its publication, namely January 17th, 2023. However, these recommendations do not in any way replace the judgment of a clinician. If you have any questions, we invite you to contact your healthcare professional. If, in any way, you misuse the information contained in this document, the CHU de Québec cannot be held responsible for damages of any kind in this regard.

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