

Gastroenterology - Colonoscopy

Introduction

The COVID-19 pandemic has had a significant impact on the NHS ability to provide routine elective services. We recognise that patients are waiting longer than we would all like and it is not always possible to identify when treatment will take place. This document provides you with information on how you are able to support yourself while waiting to attend the hospital. The guidance has been written by clinicians who are responsible for your care.

When you are waiting for further treatment it can sometimes feel like a long wait. The information and advice here is aimed at helping you manage that wait so you arrive for your appointment in the best possible physical and mental health.

The NHS has limited resources which means that we are unable to treat you as quickly as we would like. Each healthcare provider has to consider the type of help you need, how quickly you need treatment, the best course of action to help you and when and where you can be seen.

The process of sorting patients based on their individual needs is called prioritisation. The system of prioritisation is applied consistently across the NHS to help us to decide the order in which patients receive their treatment. This is essential to ensure that we provide care based on need. The system means that care is delivered in the fairest way possible.

Once a referral has been made from primary care to secondary care, the specialist team reviews your case and will make a decision on the urgency of investigations and appointments that is appropriate for you based on the information provided by the referrer.

Our Endoscopy Department sees patients at the Royal Bournemouth Hospital and Poole Hospital routinely six days a week. Our dedicated staff perform more than 23,000 procedures per year by clinicians from a variety of medical and surgical specialties. The unit at the Royal Bournemouth Hospital has five endoscopy rooms and an x-ray suite and the unit at Poole Hospital has three endoscopy rooms.

We provide the following services:

- Gastroscopy
- Flexible sigmoidoscopy
- Colonoscopy
- Endoscopic Retrograde Cholangiopancreatography (ERCP)
- Endoscopic Ultrasound (EUS)

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- Enteroscopy
- Video Capsule Endoscopy
- HALO radiofrequency ablation (for Barrett's oesophagus)

The Endoscopy Bookings Office will contact you directly to arrange an appointment and you will be provided with a written information booklet that details specific instructions relating to your procedure.

If you have any communication difficulties, require a translation service or have mobility difficulties or any concerns about your appointment please let the Endoscopy Bookings Office know in advance of your appointment and they will ensure that you have the support you require.

Please don't be a DNA!

A DNA is someone who Did Not Attend for a hospital appointment and did not advise us beforehand. Many appointments each year are wasted in this way. If you cannot attend, or need to rearrange your appointment, please contact the Endoscopy Bookings Office.

Further information –

Further information on endoscopy can be read on the NHS Choices website. Please also refer to this site for further information on other endoscopy providers in your area.

NHS Choices - Endoscopy

<http://www.nhs.uk/Conditions/endoscopy/Pages/introduction.aspx>

Guidance for Patients

Your Doctor has recommended a Colonoscopy.

A colonoscopy is an investigation in which the lining of your colon (large bowel) is examined with a colonoscope. A colonoscope is a long, thin, flexible endoscope; a smooth bendy tube with a light source and camera built into the tip. Colonoscopy is usually performed as a day case. Following a special diet and taking bowel preparation (strong laxatives) in the days leading up to colonoscopy helps to ensure the bowel lining is visible.

Your doctor may have referred you for this procedure in order to investigate symptoms such as anaemia, rectal bleeding or a change in your bowel habit. You may have been referred for further investigation of an abnormality shown on x-ray, or as a result of a screening programme. You may also be having a colonoscopy as part of your follow-up for surveillance of conditions such as inflammatory bowel disease, bowel cancer, or after removal of a polyp.

During the procedure the endoscopist can take a biopsy (a small sample of tissue) for testing if necessary. The tissue is removed painlessly through the colonoscope using tiny forceps and sent off for examination. We can also treat and remove polyps if any are found. Polyps are small, fleshy growths on the lining of the bowel, which are usually harmless but in some cases can progress to form cancers.

The Endoscopy Department is very busy and sometimes appointments are delayed due to emergencies or unforeseen problems. Every effort will be made to see you punctually, but it may not always be possible

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for you to be seen at precisely the time stated on your appointment letter. The colonoscopy usually lasts about half an hour, although it may take longer in some cases. You should expect to be in the hospital for at least 3-4 hours so that you can be admitted and recovered safely and it is advisable to bring a book or something to read to help you pass the time.

Please remember, the time of your appointment is not the time you will have your test. It takes time to safely admit you and prepare you for your procedure. You may observe others being called before you who may have arrived after you, this is because we have several lists running at the same time and not everyone will be having the same procedure.

Do not bring valuables or large quantities of money into the hospital as we cannot accept responsibility for them.

You will need to get undressed for your procedure. We will provide you with a hospital gown to wear and shorts to protect your dignity if you wish. Some people like to bring a dressing gown and slippers with them. Your clothing and belongings will remain with you at all times. It is advisable to wear loose, comfortable clothing as you may feel slightly bloated with air following your investigation.

You will be given a choice of having your colonoscopy with sedation or with Entonox (gas and air). If you choose to have sedation and analgesia (pain relief) this will make you feel relaxed and drowsy but it is unlikely to send you to sleep. It will reduce your awareness of time and may make you forget the procedure itself. The pain relief used is a strong opiate analgesic given intravenously through a cannula in your arm. Afterwards you will need to be monitored for approximately an hour before you can get up and have refreshments. It takes about 24 hours for the sedation to leave your system. Until then your reaction times will be slower and your judgement will be impaired.

If you have sedation you must be supervised by an adult for 12 hours after the procedure AND for 24 hours you must not drive any motor vehicle, work, operate heavy machinery, sign any legally binding document, drink alcohol or take sedative medication, or look after babies or young children. Please make sure that a responsible adult is available to collect you after your procedure and stay with you for at least 12 hours. Make sure you bring their contact details with you when you come.

What should I do if my health is deteriorating?

If your symptoms deteriorate please contact your GP who will then get in touch with us if required.

Urgent Health Advice

For urgent health advice about physical or mental health, when it's not an emergency, please call 111 from any landline or mobile phone. You can also visit www.nhs.uk. The NHS 111 service is available 24 hours a day, seven days a week.

Life Threatening Emergencies

For something life threatening – severe bleeding, breathing difficulties or chest pains – please dial 999.

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Contact Us

Endoscopy Bookings Office:

Bournemouth site:

Telephone - 0300 019 4667 (lines are open Monday-Friday, 0830-1630)

Email - Endoscopy.Enquiries@uhd.nhs.uk

Poole site:

Telephone - 0300 019 2939 (lines are open Monday-Friday, 0830-1630)