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### COLONOSCOPY:

A colonoscopy allows the physician to look inside your entire large intestine, from the lowest part, the rectum, all the way up through the colon to the lower end of the small intestine. The procedure involves the insertion of a small, flexible scope about the size of your little finger. The scope has a light with a lens on the end which allows the physician to look directly into the rectum and the colon. Because the scope is flexible it can be maneuvered and directed around the many bends of the colon.

Abnormalities which can be seen on x-rays can be verified and lesions not seen on the x-ray can be found. The advantage of colonoscopy over other methods of viewing the colon, is that at the time of the examination, a biopsy may be taken if necessary, and the removal of polyps, or small groups within the colon, can be performed. A biopsy is the removal of a small piece of tissue which is to be examined under a microscope and the patient does not feel a biopsy. The colonoscopy procedure is used to look for early signs of cancer in the colon and rectum. It is also used to diagnose the causes of unexplained changes in bowel habits. A colonoscopy enables the physician to see inflamed tissue, abnormal growths, ulcers, and bleeding.

### PREPARATION:

In order to obtain the full benefits of the exam, the colon must be clean and free of stool. The patient receives instructions on how to do this, a prescription for the medication to be used along with dietary instructions. Usually the patient drinks only clear liquids and eats no food for the day before the exam and has nothing to eat or drink after midnight before the exam.

The physician advises the patient regarding the use of regular medications during that time. If you take insulin or diabetic pills, **do not take** until after the colonoscopy.

It is important to stress how critical your preparation is, because it has been found that the most common problem is an inadequate preparation which could cause the colonoscopy to be rescheduled.

### PROCEDURE:

Colonoscopy is usually performed on an outpatient basis. You will be asked to change into a hospital gown and a small I.V. line will be placed into a vein in your arm. You will be mildly sedated to help you relax and make you drowsy.

The examination will be done and the scope will be passed through your rectum into your colon and should cause little or no discomfort. Your heart rate and breathing are monitored throughout the procedure. The procedure takes 15 to 30 minutes and is seldom remembered by the sedated patient.

## **AFTER THE PROCEDURE:**

You will be in the recovery area so the nursing staff can monitor vital signs until you are fully awake, approximately one hour. During this time, the doctor will speak with your family to let you know exactly what was found. You will be able to eat after the medication has worn off. Since you were given a sedative, you will NOT be able to drive. It is imperative you have some one to drive you home.

## **SIDE EFFECTS AND COMPLICATIONS:**

It is normal to experience mild cramping or abdominal pressure following the exam. This usually subsides in an hour or so. Although the incidences of complications are below 1%, as with any procedure there are risks. Worst case would be a perforation or a hole poked in the colon. Should this happen, surgery may be necessary, but this complication is rare. Other possible complications include: bleeding, medication reactions or inflammation at the IV site.

## **POST COLONOSCOPY INSTRUCTIONS:**

Do not drive a car or operate machinery for at least twelve hours (12) after the examination.

You should not do strenuous activity or exercise for at least 24 hours.

You may eat and drink normally, unless you are instructed otherwise.

Mild abdominal discomfort and bloating may be common the first day after the procedure. Rest and eating lightly may reduce these symptoms.

A small amount of blood from the rectum may be seen.

For the next two days watch for the following:

- Severe or persistent abdominal pain
- Temperature elevation/fever
- Bloody bowel movement(s) or rectal bleeding
- Vomiting

Do not take aspirin for one week, if a polyp has been removed.

This is a safe procedure and gives the physician a great deal of information which will let her help you. If you have questions, concerns or problems, please call our office at 210-268-0120 or 210-656-3070.