



Colonoscopic ultrasound (CUS)

Information for patients attending King's College Hospital site only

This information leaflet answers some of the questions you may have about having a colonoscopic ultrasound. It explains the risks and the benefits of the test and what you can expect when you come to hospital. If you have any more questions, please do not hesitate to contact a member of staff.

Endoscopy Unit

Reception	020 3299 3599
Pre-assessment Clinic	020 3299 2775
Nurse's Station	020 3299 4079

Confirming your identity

Before you have a treatment or procedure, our staff will ask you your name and date of birth and check your ID band. If you do not have an ID band we will also ask you to confirm your address. If we do not ask these questions, then please ask us to check. Ensuring your safety is our primary concern.

Contents

What is a colonoscopic ultrasound?.....	Page 3
Why do I need this test?.....	Page 3
What are the benefits?.....	Page 4
What are the risks?.....	Page 4
Are there any alternatives?.....	Page 5
Do I need to have a sedative?.....	Page 5
Will it hurt?.....	Page 5
Do I need to prepare for the test?.....	Page 5
Do I need to stop taking my medication?.....	Page 6
What will I need on the day of the test?.....	Page 6
Things to remember.....	Page 6
What happens when I arrive for my test?.....	Page 7
Consent.....	Page 7
What happens before the test?.....	Page 7
What happens during the test?.....	Page 7
How long does the test take?.....	Page 8
What happens after the test?.....	Page 8
Advice after having a sedative.....	Page 8
What happens when I go home?.....	Page 9
When will I get my results?.....	Page 9
Who can I contact with queries and concerns?.....	Page 9
Sharing your information	Page 10
Care provided by students.....	Page 10
PALS.....	Page 10

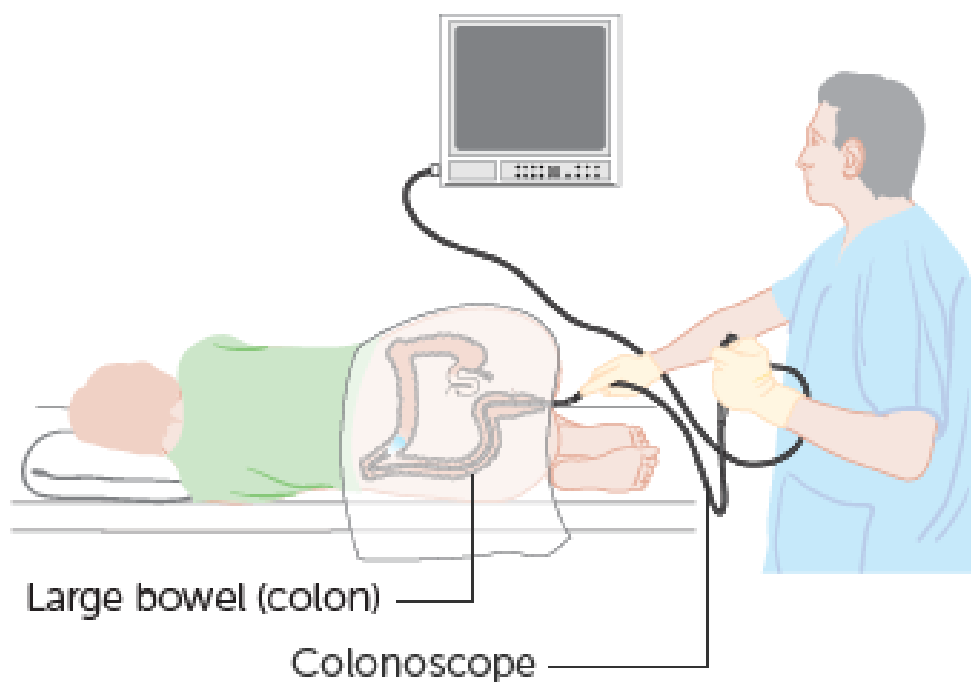
Important information

Please make sure you read and follow the instructions in the following sections on pages 5 to 6:

- Do I need to prepare for the test?
- Do I need to stop taking my medication?
- What will I need on the day of the test?
- Things to remember?

Failure to follow this advice will result in your appointment being cancelled.

What is a colonoscopic ultrasound?



A colonoscopic ultrasound is a procedure we use to diagnose problems in your colon (large bowel) and bottom.

It involves passing a long, thin, flexible tube called a colonoscope into your bottom (anal canal) and higher up into your colon. The colonoscope is a bit thicker than your little finger and has a light and a camera in its tip. The ultrasound is a tiny probe which fits through the middle of the colonoscope.

The colonoscope and ultrasound send video images and ultrasound pictures to a monitor screen.

Why do I need this test?

Your hospital specialist has recommended you have this test to investigate the cause of your symptoms. Usually, we have already found an abnormality during another test that

we need to take a closer look at.

During this test we can also take biopsies (small pieces of tissue) or fluid samples that we can look at in a laboratory to help us make a diagnosis. If certain types of polyps are seen during the procedure, they may be removed at the same time (known as a polypectomy).

It is important that you understand why you are having a colonoscopic ultrasound. If you are not clear about the reasons, please do check with the endoscopist who sees you on the day of your test.

What are the benefits?

A normal test can reassure you that all is well. It can also help us to make a diagnosis. This test will also help your endoscopist to decide on the best way to treat any previously identified abnormality.

What are the risks?

A colonoscopic ultrasound is a safe procedure and serious complications are very rare. The risks are the same as for a routine colonoscopy.

- **Bleeding.** It is common to have bleeding after a biopsy. This lasts no more than a few seconds. Do not worry if you poo after the test and notice some blood. We will let you know what to expect after your colonoscopy and who to contact if required. Bleeding after polypectomy which may require a short admission for observation, blood transfusion or surgery happens in less than 1 case in 200.
- **Perforation** (a hole in the gut wall) which may require admission to hospital and possible surgery. Perforation may occur in less than 1 case in 2,000. Perforation following polypectomy happens in less than 1 case in 500.
- **Drug reactions** may occur very rarely. If you do have a reaction, we will give you medication to reverse the effects.
- **Missed lesions.** If the bowel is not clear of poo or you can't hold the air we put in your bottom during the procedure to inflate your bowel, there is a small risk of abnormalities not being seen. If the endoscopist feels the views were unclear, they may request that you have a repeat colonoscopy at a later date. Abnormalities are rarely missed.
- **Failure to complete examination.** If you need to have alternative examinations, your endoscopist will explain the reason why and how this will be managed.
- **Discomfort** from the air used to inflate your bowel. Please see the section 'Will it hurt?' on page 5.

If any of the above complications happen, you may be admitted to the hospital for observation or further treatment.

Are there any alternatives?

You can have a CT scan so we can take x-ray images of this part of your body. But this is not a useful test for most conditions that require close examination, and we cannot take biopsies or fluid samples with a CT.

The other alternative is to not have the test at all. This would result in no biopsies being taken, no diagnosis being made, and no endoscopic treatment being performed.

Do I need to have a sedative?

Some people need or prefer to have a sedative, but many do not.

If you are anxious about having the test, then a sedative may help. It relaxes you but does not make you unconscious or 'knock you out'. You should still be able to talk to the staff during the test, tell them how you are feeling and see the monitor screen if you wish.

Will it hurt?

We may put air or gas into your bowel so that we can see well. You may feel 'wind' or cramps during the procedure and perhaps a sudden, sharp 'localised' discomfort as the tube is pushed around the bends.

If you are finding the procedure too uncomfortable, please tell the endoscopist. They can give medication to ease the pain or change what they are doing.

They can take biopsies or remove polyps during the test by passing thin instruments through the tube. This is unlikely to hurt, and you may not feel it happening at all.

Do I need to prepare for the test?

- If you are expecting to have sedation for your procedure you must arrange an escort to collect you from the department and stay with you for at least the first 12 hours. We cannot give you a sedative unless you arrange this.
 - See 'Do I need to have a sedative' on page 5 for more advice.
 - See 'Advice after having a sedative' on page 8 for advice about things you should not do during the first 24 hours after having sedation.
- This procedure requires you to have a nursing pre-assessment before the date of your procedure. If we are unable to contact you for your pre-assessment, we will not be able to advise you how to prepare for your procedure. Therefore, the procedure may be cancelled on the day.
- We need to get a clear view of the inside of your colon so it must be as clean as possible. You need to take a laxative beforehand to prepare your bowel. Information which explains how and when to use the laxative will be ready for collection or will be posted to you after the pre-assessment.

Do I need to stop taking my medication?

If you are taking any medication which you have been told may thin your blood, inform the nurse during your pre-assessment. You may need to stop taking them for a short time.

If you take iron tablets, stop taking them at least one week (preferably up to two weeks) before the colonoscopic ultrasound, if possible.

If you are taking any other medications, including for diabetes, discuss these with the pre-assessment nurse, they may need to be stopped prior to the procedure.

What will I need on the day of the test?

- Please wear comfortable, loose clothing.
- Please bring a list of any medications that you are currently taking.
- Please bring your reading glasses as you will need to read and sign your consent form.
- You may want to bring something to read while you wait or headphones to listen to music or a podcast.
- Please bring your appointment letter if you were sent one.
- You may need to change into a hospital gown for your test, so you may want to bring a dressing gown and slippers to wear for walking to the toilet.
- Please bring a re-usable bag to put your belongings in while you are having your procedure.
- Please consider walking or using public transport on your way to the hospital, if you can, to reduce the carbon footprint of your appointment.
- If you use a NIPPY at home for sleep apnoea, please remember to bring it with you.
- There is no general public car parking at our King's College Hospital, Denmark Hill site. Please see the following website for further information:
www.kch.nhs.uk/patientsvisitors/getting-to-kings/parking

Things to remember

- Your appointment time is the time you are expected to arrive in the department. However, you should plan to be in the Endoscopy Unit for the whole morning or afternoon. The department has 5 rooms running at the same time and also accommodates emergencies. Someone with a later appointment than you may be seen before you. If you have any concerns, please ask a member of staff.
- Please do not bring children with you unless there is someone to look after them. We do not have any childcare facilities in the unit.

- We cannot take responsibility for any valuables, but your things will be kept with you at all times (on a shelf on the examination trolley).
- The waiting room has limited seating, please be aware that only one escort can remain in the waiting room throughout your stay. Escorts will not be allowed into clinical areas.

What happens when I arrive for my test?

When you arrive, a nurse will fill out an assessment form with you if you have not already done so. A member of the clinical team will come and explain the procedure to you.

Consent

We must by law obtain your written consent to any procedures beforehand. Staff will explain all the risks, benefits and alternatives before they ask you to sign a consent form. If you are unsure about any aspect of the treatment proposed, please do not hesitate to ask to speak with a senior member of staff.

What happens before the test?

We will ask you to change into a hospital gown, remove your underwear and, if available, put on modesty shorts in a changing cubicle. We will then make you comfortable while you wait for your procedure.

A nurse or doctor will put a cannula into your arm or hand. This is a very thin plastic tube through which they can give you any medication required. It is policy to cannulate all colonoscopic ultrasound patients, whether you are having sedation or not.

You will be taken into the endoscopy room. The nurse will attach a monitor to your finger to measure your oxygen levels during the test and you will be given oxygen through nose 'prongs'. If you are having a sedative, they will also attach a blood pressure monitor. A nurse will be with you at all times during your procedure to reassure you and talk you through what is happening.

If you are having a sedative, you will be given it just before the start of the test.

What happens during the test?

When you are ready, the endoscopist will put the colonoscope into your bottom and move it along the length of your colon.

They may ask you to change position to:

- make you more comfortable
- make it easier to pass the colonoscope around your bowel

- and/or ensure they can see as much of the inside lining of your bowel as possible.

When the endoscopist reaches the area they want to look at with the ultrasound, they will insert the ultrasound probe through the colonoscope. They then slowly pump water into your bowel to cover the area they are examining so they can take the ultrasound pictures. This is not painful, but water may leak from your bowel so your bottom may be a little wet.

Photographs, videos and ultrasound images will be taken during the procedure for the purpose of adding clinical information to your medical notes. Additional consent is required for these images to be used for any other purpose.

Trainees often attend the department to gain skilled supervised training. You have the right to refuse being treated by a trainee. Your treatment will not be affected by your decision.

How long does the test take?

It usually takes no more than 30 to 45 minutes.

What happens after the test?

Your recovery time will depend on whether you have had a sedative. You should plan to spend the whole morning or afternoon of the test in the Endoscopy Unit.

If you have had a sedative, you will need to stay until the effects have reduced. This usually takes at least 30 to 45 minutes. If you have not had a sedative, you can leave as soon as you are ready.

We will make sure you have all the documentation and instructions you need. We will also send a copy of the report to your GP.

Advice after having a sedative

If you have a sedative you may feel tired, dizzy or weak straight afterwards. You must have someone to collect you from the Endoscopy Unit and stay with you for at least the first 12 hours.

During the first 24 hours you should not:

- drive a car
- operate machinery (including kitchen appliances)
- drink alcohol
- take sleeping tablets
- sign legal documents
- look after young children and/or dependants alone

What happens when I go home?

- If you keep getting wind pain, we advise you to lie on your side and bring your knees up to your tummy. Try the right side first, and then the left. You can also walk around if you are stable on your feet.
- You may notice a little blood with your next poo, on your underwear or toilet tissue.
- As you had bowel prep, it may take up to three days before your colon fills up and you have a poo.
- You can eat and drink as normal and continue to take your regular medication unless advised otherwise.
- We recommend you drink plenty of fluids to keep hydrated.

Please contact your GP if you have any of the following symptoms:

- severe abdominal (tummy) pain and bloating
- passing a large amount of blood or clots through your bottom
- pooing black (tarry) stools
- temperature of 37.4°C and higher
- chills.

When will I get my results?

Before you leave, we may give you a copy of your test report and any instructions you need. We will also send a copy of the test report to your GP (home doctor).

Who can I contact with queries and concerns?

If you have any questions, such as what to do about medication, before or after your test, contact the Endoscopy Unit Nurses' Station on **020 3299 4079** from 9am to 5pm, Monday to Sunday.

If you want to change your appointment or need another information leaflet, contact Endoscopy Unit Reception on **020 3299 3599**.

Out of the hours above, for urgent worries or queries, you may contact NHS Direct on 111 or go to your nearest Emergency (A&E) Department and take a copy of your report with you.

The Endoscopy Department is working hard to reduce the impact of its service on the environment, to find out more please see

www.kch.nhs.uk/services/services-a-to-z/endoscopy/

Sharing your information

King's College Hospital NHS Foundation Trust has partnered with Guy's and St Thomas' NHS Foundation Trust through the King's Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas' hospitals. King's College Hospital and Guy's and St Thomas' NHS Foundation Trusts share an electronic patient record system, which means information about your health record can be accessed safely and securely by health and care staff at both Trusts. For more information visit www.kch.nhs.uk

Care provided by students

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

PALS

The Patient Advice and Liaison Service (PALS) offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams. The PALS office is on the ground floor of the Hambleton Wing, near the main entrance on Bessemer Road – staff will be happy to direct you.

PALS at King's College Hospital, Denmark Hill, London SE5 9RS

Tel: 020 3299 3601

Email: kch-tr.palsdh@nhs.net

If you would like the information in this leaflet in a different language or format, please contact our Communications and Interpreting telephone line on 020 3299 4826 or email kch-tr.accessibility@nhs.net.