

CONSENT FOR COLONOSCOPY

Colonoscopy involves examination of the inside of the bowel with a flexible tube incorporating advanced video-television technology. Colonoscopy is a highly accurate and superior examination of the bowel than either a barium enema or virtual colonoscopy. Very rarely a polyp or a small cancer may be missed if vision within the bowel was impaired by an inadequate clearance of faeces from the bowel by earlier bowel cleansing procedures. Depending on the quality of bowel cleansing, miss rates of 12% have been reported in the literature. To the best of our knowledge, in the 29,868 procedures performed to date (as at 20th Sept 2016), at Southcoast Digestive, no significant lesions have been missed.

Complications such as perforation of the bowel can occur in one in a thousand procedures or less frequently. However, perforation rate is slightly higher if a polyp or growth were to be removed by electrical snares. This is also a rare risk of bleeding from polypectomy site. Some polyps are benign growths, & some have cancer potential and as such, it is recommended that all polyps encountered at colonoscopy are removed. Very rarely removal of polyps by cautery result in inflammation of the bowel wall called serositis which may require hospitalization for antibiotics and analgesia for two to three days. Likewise, minute tissue samples of the inner lining of the colon may need to be taken (biopsy) dictated by disease conditions encountered at the examination. Since you will be under sedation during the examination, it will not be possible to discuss such removal of polyps or biopsy and therefore, please sign this consent form to indicate your agreement.

In case of needle stick injury to Doctors or Nurses, it will be necessary to take a blood sample from you. Since you may be under sedation at the time, it will not be possible to discuss this blood test with you. Please sign this consent to indicate your agreement to this blood test if required.

In the unlikely event of a perforation occurring, surgery may be needed. Likewise, if significant bleeding (which is rare) occurs after polypectomy, transfusion will be needed after hospital admission.

The colonoscopy procedure is performed under sedation such that 99% of patients do not have any recollection of the procedure. Anaesthetist/Sedationist Doctor will enquire from you prior to colonoscopy, any previous reaction to anaesthetics. Despite that, rarely sedation related complications may occur. Rarely patients' with underlying severe heart, chest or nervous system disease manifest under sedation. All patients receive oxygen during colonoscopy and are carefully monitored in an attempt to prevent some of these complications and be able to detect any problems early on.

Please understand that driving home after receiving intravenous sedation is illegal, and not recommended until the next day. If you have not made arrangements to be driven home, then your procedure would be cancelled & re-booked for another time. Once home, a responsible adult should stay with you for the next 12 hours.

Please be sure to report to us any severe abdominal pain or bleeding in the days or hours after colonoscopy. After hours, please report to your nearest hospital who shall then contact us. If you have any further queries or concerns, please discuss with our staff, Anaesthetist/Sedationist Doctor or Dr Chakravarty or another gastroenterologist on duty for the day.

I have read and understood the above information concerning the performance of colonoscopy and polypectomy. I hereby agree for the procedure to be performed upon myself by Dr Bhaskar Chakravarty or another Gastroenterologist on the day.

Full Name: _____

Date: _____

Patient Signature: _____

Witness: _____