Combined Colonoscopy + Oesophago-Gastro Duodenoscopy (OGD)
Essential information for patients
**What is Colonoscopy?**

A colonoscopy is a procedure that allows the endoscopist to look directly at the lining of the large bowel or (colon). It is performed using a thin tube (colonoscope) with a camera and a light on the tip which is used to look at the area being examined. The procedure is the most accurate way we have of looking at the large bowel (colon) to establish whether any disease is present.

It also allows for:

1. A sample of tissue (biopsy) to be taken for examination by the pathology department.
2. The removal of polyps (which are like little cherries) that can grow on the bowel wall.
3. The treatment of haemorrhoids (piles) with banding or injection of oily phenol.

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**What is a Oesophago-Gastro Duodenoscopy (OGD)/Gastroscopy?**

A Gastroscopy is a procedure that allows the doctor to look at the lining of the oesophagus (tube that food passes down), stomach and duodenum (first part bend of the small intestine). A narrow flexible tube called a Gastroscope is passed through the mouth into the stomach, it has a light at one end to allow the doctor to see.

The tube is thinner than a little finger and doesn’t interfere with your breathing at all. The procedure itself lasts for 5 to 10 minutes and is not painful, it may be uncomfortable but you will be offered either local anaesthetic or sedation before your procedure. Your doctor will discuss this with you.
Risks of the Sedation

Conscious Sedation
For your double procedure, most patients choose to have sedation.

Intravenous sedation option
If you choose to have conscious sedation you will have a small tube called a cannula put into a vein, usually in your hand or lower arm.

- Conscious sedation will be administered through this cannula.
- It will make you sleepy and relaxed.
- It may make you fall asleep during the procedure, but it is completely normal to be awake. It has an amnesia effect, therefore making you forget.

If you chose to have sedation, you must arrange someone to escort you home and stay with you for 12 hours after the procedure.

He/she should come with you for the appointment or be contactable by phone when you are ready to leave. The nurse will need this person’s contact details during admission process.

Patients who have sedation, will be required to stay in the hospital a minimum of 4 hours.

If you do not have an escort or have not arranged for someone to collect you, then your procedure will be cancelled.

Risks of the Colonoscopy

Failure of the Procedure:
Colonoscopy is usually a very successful procedure, allowing the whole colon to be visualised in over 90% of procedures. Occasionally it may not be possible to advance the instrument all the way around your colon and further tests such as a scan or X-ray may be required instead.

Drug Reaction:
The sedation used for the procedure is safe with only a very slight risk of reaction. Your Heart rate and blood pressure will be monitored at all times, by a qualified nurse and the Consultant throughout your procedure.

Bleeding:
If a polyp is found during the procedure, this will be removed, which can result in some bleeding. This bleeding can often be stopped straight away but may occasionally be more serious or may even occur a few days later. Depending on the size, the risk of bleeding is 1 in 200 polyps removed. Many polyps are the type which can turn into cancer if left untreated for a long period of time and removing them when still benign eliminates the risk.

Perforation:
If you do not have polyps removed there is a less than 1 in 2000 chance of causing a perforation, which is a little tear in the lining of the bowel wall. If polyps are removed, this may occur in 1 in 500 cases. This may extend your hospital stay for a short time and you will need to be given antibiotics, or it may require further intervention.

Missed Pathology:
It is important to remember that no test is perfect and even with complete examination, a significant disease may be missed in up to 20% of cases.
About the Consent Form

Before a doctor or health care professional examines or treats you, they will need to gain your consent. This will be required in writing. If you later change your mind, you are entitled to withdraw consent even after signing the document.

- Please read this Colonoscopy patient information leaflet, prior to signing your consent form.
- Please read the consent form in full, prior to your procedure.
- You will meet the doctor on the day of your procedure, to ask any questions or concerns you may have.

Risks of Oesophago-Gastro Duodenoscopy (OGD)/Gastroscopy?

The majority of Gastroscopies are safe and uncomplicated.

However, as with any procedure there is a small chance of side effects or complications:

- National studies have shown that serious complications such as drug reaction, bleeding and perforation (a tear of the gut) are very rare.

- There is a slight risk of damage to loose teeth, dental bridgework or crowns. Please tell the nurse and consultant if you have had any dental work before your procedure.

- You may experience a sore throat or feel some wind in your stomach after the procedure.

- Missed Pathology: It is important to remember that no test is perfect and even with complete examination, a significant disease may be missed in up to 5% of cases.

Before the procedures

Medicines

You should continue to take your regular medications as normal on the day of your procedure. Apart from the medication mentioned below:

- **Iron Tablets** - These will need to be stopped one week before the procedure – as the iron makes your faeces look black in colour, which can be mistaken for blood in the bowel during the examination.

- **Diabetic** - medication will need to be stopped when you are taking your bowel preparation, as you will not be eating any food - phone the endoscopy unit for advice on 01 650 4617. Please bring your diabetic medication with you for your appointment. i.e. your insulin pen or your tablets.

- **If you are taking any of these medications** - Aspirin, Warfarin, Clopidrogel (Plavix), Rivaroxaban (Xaralto), Dabigatran (Pradaxa), Apixaban (Eliquis) phone the endoscopy unit for advice on 01 650 4617.

Do not stop any of these medications without advice from a nurse or Doctor.

If you take warfarin or Plavix, we will need one weeks’ notice to stop it.

Please bring a list detailing your regular medications. If you are in doubt, please contact your GP or local pharmacy to provide the list.

If you use a GTN spray for angina – please bring this with you.

If you are asthmatic – please bring your inhalers with you.
Preparing your bowel for the procedure
To obtain a clear view, the bowel must be completely empty, so that the doctor can complete a thorough examination. You will be prescribed a bowel prep by your doctor.
Bowel prep is a type of laxative and will cause you to pass liquid stool to clean out the bowel.
You should not have anything to eat once you have commenced your bowel preparation.
Make sure you are near a toilet when you start taking your bowel preparation. It may take up to 3 hours for the bowel prep to start working after you drink the first litre.
A copy of the bowel prep instructions will be given to you with this leaflet, with specific instructions on taking your bowel prep for your morning or afternoon appointment.

Recommended Drinks to take over the fasting from food period, the day before and day of your procedure.
Recommended Drinks – TRY TO DRINK AT LEAST 3 LITRES OF FLUID OVER THE 24 HR period. This will stop you getting dehydrated.

- Black tea or coffee – No milk – You can add a spoon of sugar or a spoon of honey.
- Water – plain, sparkling or flavoured.
- Add squash to your water i.e. cordial juice – NO red or blackcurrant squash, as this can look like blood in the bowel.
- Jelly - NO red or blackcurrant colour jelly, as mentioned above.
- Lemonade or Lucozade – If you are diabetic we recommend to take a sugary drink every 2 - 3 hours.
- Clear Broth - MUST NOT HAVE ANY FOOD BITS IN IT.
- Herbal Teas – any flavour.

NB: ENSURE YOU STOP DRINKING FLUIDS AT LEAST 2 HOURS BEFORE YOUR APPOINTMENT TIME, SO THAT YOUR STOMACH IS EMPTY FOR THE PROCEDURE

Interpretation services
If you require an interpretation service please ask an English-speaking person to call us as soon as possible so that an interpreter can be arranged for you.

Special Requirements
If you use a wheelchair or have any physical and/or other disabilities, please contact the unit to arrange any support that you may need to make your endoscopy journey as easy as possible for you.
On Arrival

- On arrival at the hospital, go to the Endoscopy reception area on the second floor.

- The receptionist will take some information regarding your name, address, date of birth and next of kin.

- You will be admitted to the unit by a nurse who will ask information regarding your health history and medical conditions.

- You will be given opportunity to ask any questions or concerns you may have at this stage.

- You will be given a hospital gown and disposable shorts to wear for the procedures.

- You will be asked to wear your dressing gown and slippers, once changed into your gown.

- A small tube called cannula will be put into a vein. This will happen even if you choose not to have sedation.

- Once the admission assessment is completed by the nurse, you will be brought to a waiting lounge area, where the team from the procedure room will collect you from.

Please bring a dressing gown and slippers with you. You are advised not to bring any valuables or any large sums of the money into hospital with you.

During your procedures

- When you are brought into the procedure room, you will meet two registered nurses and the Consultant.

- Any glasses and dentures will be removed.

- A local anaesthetic throat spray will be administered.

- In the procedure room, you will be made comfortable on the bed, lying on your left side with your knees drawn up.

- You will be able to see the endoscopy screen in front of you.

- A mouth guard will be placed between your teeth to keep your mouth open slightly. This will protect your teeth and stop you from biting the endoscope.

- This mouth guard is held in place by an elastic band around the back of your head.

- You will receive oxygen through your nose.

- A monitor will be placed on your finger to measure your oxygen levels and your blood pressure will be taken every few minutes via a blood pressure cuff on your arm.

- A nurse will look after you throughout the procedure, they will monitor your pulse, blood pressure and heart rate once sedation is given.

- A nurse and doctor will ensure that you are feeling comfortable throughout the procedure.

- You will be given sedation to make you feel relaxed and drowsy but not entirely asleep or unconscious (this is not a general anaesthetic). This will be administered before the procedure starts through the cannula in your arm / hand, and given a few minutes to start working, before the procedure begins.
• The doctor will pass the gastroscope gently in through your mouth.

• You may gag briefly, this is a normal reaction. The nurse will suction any saliva in the mouth.

• The doctor may put some air in to your stomach to give a clearer view of the lining. It is not painful but may make you burp. The gastroscope is removed quickly and easily.

• Your bed will be turned around to proceed to your Colonoscopy. The nursing staff will change the scope to a colonoscope to examine your large bowel (Colon).

• The endoscopist will gently pass the colonoscope in through your back passage.

• Air will be passed into the bowel via the scope, this may cause you some discomfort but will pass quickly.

• The procedure takes approximately 60 minutes – however can take longer if biopsies need to be taken or polyps need to be removed.

After your procedures

• You will be brought to the endoscopy recovery area, on your bed.

• Your heart rate and blood pressure will be monitored by a registered nurse.

• Here you can have a rest for a while after your procedure.

• Following your procedure, you may experience some crampy pains and bloating. This is due to trapped wind, it will settle down soon after your procedure. You are encouraged to pass the wind during and after your procedure for your comfort.

• Once you are alert and the sedation has worn off, you will be asked to get up and dressed from the bed.

• You will be escorted by the nurse to a chair in the Endoscopy discharge lounge and handed over to the nurse in this area. Here you will be given some food. You will have a choice of brown or white toast, hot or cold drinks. We do cater for dietary needs, so please let the nurse know when they are ordering your food.

• Your escort should collect you from the Endoscopy Discharge area also located on the 2nd floor. We always wait for your escort to arrive to the unit before giving you any discharge information as you tend to forget it, due to the sedation.

• Your cannula will be removed from you hand or arm once you have had something to eat, passed urine and are not experiencing any side effects from the procedure or medications.

• It is the decision of the consultant performing the test if he/she will be seeing you immediately following the test or if an appointment will be made in the outpatient rooms.

• The consultant’s secretary will arrange this appointment for you if needed.
**If you have received sedation:**

**You must not drive, drink alcohol, operate machinery or sign important documents for the next 24 hours.**

Please note that following a sedated procedure, you **WILL NOT** be permitted to leave the unit unaccompanied.

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**Frequently Asked Questions**

If the symptoms have stopped before my endoscopy, should I still come for the test?

Yes. It is important that you still arrive for your test. Your doctor has organised this test to ensure you have no problems within your digestive tract. Although symptoms may have subsided, it is important to proceed in order to ensure all is clear.

Does the procedure hurt?

Colonoscopy – You may feel some discomfort from the air that is used to inflate the bowel so that the doctor can have a full view of the lining of the large bowel. Some patients have described this as a ‘cramp’ like feeling. However, the painkiller and sedative will help with this. Every effort is made to make sure you feel as comfortable as possible.

If the doctor removes polyps or takes biopsies, pain is not experienced. You may experience some discomfort post procedure until all of the air is gone, the doctor will try to remove most of this air, when withdrawing the scope. Your bowel function should be back to normal within 24 hours.

OGD - No, this procedure is not painful. You may feel some discomfort from the air that is pumped into the stomach so that the Endoscopist can view the lining adequately. Some patients find the air used to inflate the stomach slightly uncomfortable.

If biopsies are taken you will not feel pain, some patients say that they feel a slight tugging sensation.

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**Results**

- After your procedure, when the sedation has worn off, a doctor/nurse will speak to you about the outcome of the procedure.
- Any biopsies or polyps removed are sent to the laboratory for analysis to assist the doctor in diagnosis.
- We will send a copy of the Endoscopy report to your GP and the any lab results should follow within 2-3 weeks.
- The consultant that performed your Colonoscopy may request to see you in their outpatient clinic after the procedure, usually in a couple of weeks and will go through your results.

Any advice or recommended further tests will be given upon discharge.
Can I drive after the procedure?
No, you may not drive for 24 hours post sedation.

The sedation remains in your system for 24 hours. Therefore, it can cause you to feel drowsy at any time within this period. You are not covered by your insurance in the unfortunate event that you are involved in an accident while driving under the influence.

We advise for you not to get public transport as you may feel a little dizzy after the sedation. Escorted home via taxi or NOK drives, is ideal.

What should I expect when I am sent home?
If sedated, you must be accompanied home by a responsible adult. The sedation used will make you forget things. You may find your memory of the few hours immediately after your flexible sigmoidoscopy to be impaired.

You may experience a sore throat for a couple of hours after the procedure.

You may experience some abdominal discomfort for 24 hours. If you have had biopsies taken, polyps removed or any procedure on haemorrhoids you may experience slight bleeding from the back passage.

Should you experience any sudden onset of pain or sudden blood loss, go to your closest Accident and Emergency Department.

You may resume normal daily activities the day following your Colonoscopy + OGD.

You will be given discharge information details on the day.

Can I return to work after the procedure?
This is dependent on the time of your appointment.

Morning appointments may be okay to return to work the following morning.

If you have an afternoon appointment, it is dependent on how you feel and how much sedation was given on the day of your procedure.

What are the key things to remember?
It’s your decision! It’s up to you to choose whether or not to consent to what is being proposed. Ask as many questions as you like and please express any concerns you may have about medication, allergies or past medical history.

Do I have everything ready for my procedure?
• List of Medication and Medical history.
• Details of your health insurance if applicable
• Slippers and dressing gown.
• I am fasting from food since I started drinking my bowel prep.
• I am fasting from drinks for 2 hours before procedure.
• I have arranged an escort to take me home if I choose to have sedation.
Location and Parking Information

Beacon Hospital is located in Sandyford, Dublin 18 and can be accessed by Luas, Dublin Bus and car.

**LUAS**

The Luas (green line) goes directly from St. Stephen’s Green to Sandyford. Beacon Hospital, Dublin is located in Sandyford, 10 minutes walk from the Kilmacud Luas station. On exiting the Luas at the Kilmacud station, take the lift/stairs and follow the pathway to the entrance of the station. Turn left here and you will see Beacon Hospital located at the top of the road at the crossroads (this is right beside the Beacon Hotel).

**CAR PARKING**

An underground public car park is available by turning right on entering the Beacon Court car park.

You may pay your ticket fee on exiting the hospital lobby.

**DUBLIN BUS**

Beacon Hospital is serviced by the following bus routes:

– No. 11 bus from Wadelai Park (via O’Connell Street). Alight at stop no. 4847 Blackthorn Drive, Luas Car Park.

– No. 75 bus from Tallaght/Dun Laoghaire. Alight at stop no. 449 Blackthorn Road, Corrig Road.
DRIVING

A If coming from the Leopardstown Racecourse direction

1. Take the Sandyford Industrial Estate exit.
2. Pass ‘Woodies’ on the left and keep going straight on.
3. At the T-junction at the end of this road, turn left (signposted ‘Local Traffic’).
4. The Hospital is at the end of this road on your left on the corner. You will see the entrance to the car park.

B If coming from M50, travelling southbound

1. Take the Sandyford Industrial Estate exit.
2. Pass ‘Woodies’ on the left and keep going straight on.
3. At the T-junction at the end of this road, turn left (signposted ‘Local Traffic’).
4. The Hospital is at the end of this road on your left on the corner. You will see the entrance to the car park here.

C If coming from M50, travelling northbound

1. Take the Sandyford Industrial Estate exit.
2. Pass ‘Woodies’ on the left and keep going straight on.
3. At the T-junction at the end of this road, turn left (signposted ‘Local Traffic’).
4. The Hospital is at the end of this road on your left on the corner. You will see the entrance to the car park here.

D If coming from Dundrum Village via Upper Kilmacud Road

1. Follow the Upper Kilmacud Road to the T junction after the ‘Holywell’ estate (estate is on your right).
2. Take a right at this T-junction.
3. Keep straight until you see Beacon Hotel on your left.
4. Take a left, and then first right. The entrance to the car park will now be on your right.
Endoscopy Unit Opening Hours:
Monday - Friday 7:00 - 19:30 hours

Enquiry Lines open Monday to Friday:
Telephone - 01 650 4617 for Clinical Enquiries, between 7:30 - 19:30 hours.
Telephone - 01 293 8656 for Scheduling Enquiries, between 8:00 - 16:00 hours.