

**Wake Endoscopy Center, LLC**  
**FLEET ENEMA**  
**PREPARATION FOR FLEXIBLE SIGMOIDOSCOPY**

**PRIOR TO YOUR PROCEDURE YOU WILL NEED TO PURCHASE:**

2- Fleet Enemas (over the counter; no prescription required)

**\* BE SURE TO LET THE NURSE KNOW IF YOU ARE ON COUMADIN, WARFARIN OR PRADAXA AS SOON AS POSSIBLE**

\*\* 5 days prior, please stop oral iron supplements and avoid nuts and seeds.

\*\*\* Diabetic medication adjustment: Day before procedure: take your normal am insulin and oral medications: take ½ of your pm dose of insulin, no oral diabetic medications. Day of procedure: do not take any diabetic medications until after the procedure.

**DAY BEFORE PROCEDURE:** \_\_\_\_\_

1. You may have a regular diet until your evening meal. For your evening meal clear liquids only. No solid foods or milk products. Clear liquid diet: coffee, tea, soft drinks, Jell-O, clear broth, popsicles, clear fruit juice, Gatorade, water, lemonade, Snapple, powdered fruit drinks. Avoid red and purple liquids.
2. You may have clear liquids until midnight. Nothing to eat or drink after midnight.

**DAY OF PROCEDURE:** \_\_\_\_\_ **2 hrs prior to arrival** \_\_\_\_\_

1. Begin enema prep. You should try to hold the contents of the first enema for ten minutes; expel the contents and immediately use the second enema. It is only necessary to hold the second enema 2-3 minutes
2. The actual procedure takes about ten minutes to complete. Biopsies may be taken if your physician decides it is necessary. Biopsies do not hurt.

If you use inhalers, C-PAP or V-PAP machine, please bring it with you to the procedure.

**YOU WILL BE SEDATED FOR THIS PROCEDURE AND WILL REQUIRE AN ADULT TO DRIVE YOU HOME. YOUR DRIVER WILL BE REQUIRED TO STAY AT THE FACILITY DURING YOUR PROCEDURE**

Your procedure is scheduled with Dr. \_\_\_\_\_

Date of Procedure: \_\_\_\_\_ Location \_\_\_\_\_

Arrival time: \_\_\_\_\_ Procedure time: \_\_\_\_\_

If you have questions please call \_\_\_\_\_ at (919) 783-4888.

## **FLEXIBLE SIGMOIDOSCOPY**

Flexible sigmoidoscopy is the visual examination of the lining of the lower intestine (sigmoid colon) and rectum. The lower intestine is 5-6 feet long. In the procedure, only the latter part (1-2 feet) of the lower intestine is examined. The purpose of the exam is to identify any abnormalities by inserting a flexible fiberoptic tube into the anus. The tube, which is about the thickness of your finger, is slowly passed into the rectum and sigmoid colon.

The results obtained from sigmoidoscopy may help explain the cause of symptoms such as rectal bleeding, pain, or diarrhea,

### **HOW DO I PREPARE FOR THE EXAM?**

The rectum and colon must be thoroughly clean in order for the exam to be accurate and complete. Usually, this is accomplished by administering two enemas. Please follow the enclosed instructions.

### **WHAT HAPPENS DURING THE FLEXIBLE SIGMOIDOSCOPY?**

While lying on your left side with your knees bent, the physician will perform a finger exam of the anus and rectum. The sigmoidoscope will be inserted, and the physician will be able to visualize the bowel wall.

As air is inflated into the bowel, you may experience slight cramping or gas. You may also feel lower abdominal pressure as the instrument is moved through the lower bowel. The exam usually takes 5-15 minutes and generally does not require sedation.

A small tissue specimen (biopsy) may be taken from the lining of the colon for microscopic analysis. This will not cause any discomfort. If there is an abnormal growth (polyp), a sample of it may be taken or your physician may schedule you to come back for a more extensive exam.

### **WHAT CAN I EXPECT AFTER THE EXAM?**

You can expect to feel bloating for about 30-60 minutes afterwards. This sensation will be relieved as gas is passed.

Your physician will discuss the findings of the exam and provide you with instructions to follow when you return home.

### **ARE THERE ANY POSSIBLE COMPLICATIONS?**

Flexible sigmoidoscopy is safe and is associated with very low risk. Complications that could occur, but are rare, include perforation (rupture) of the sigmoid colon, and bleeding if a biopsy is taken.

Please contact our office if you have any family history of colon cancer or colon polyps, as a more extensive exam may be necessary.