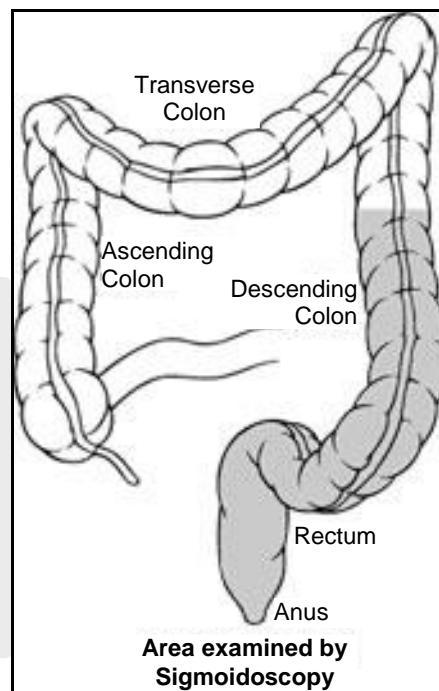


Trafford General Hospital
& Manchester Royal Infirmary
Endoscopy Department
Tel: (0161) 701 8555

Information for Patients

Your Sigmoidoscopy



Please Note:

Your test may be carried out at Manchester Royal Infirmary or Trafford General Hospital. Please check your appointment letter to make sure you attend the right unit.

You may need to start preparing for your test up to a week before your appointment. Please ensure you read this information in good time to ensure you know what to do. Poor preparation can result in cancellations and incomplete procedures.

If you are unable to keep your appointment, please telephone the Waiting List Office as soon as possible via the number above. Your appointment can then be offered to someone else which helps to keep waiting lists shorter.

Thank you.

Introduction

Your doctor has advised you to have a test called a sigmoidoscopy. This booklet has been written to inform you about the test and to answer the most frequently asked questions. If you have more questions, or if there is anything that you do not understand, please ask. There is a phone number on page 1 of this booklet.

Where is the Endoscopy Department?

Hospital site	Location	How to get here
Trafford General Hospital	In the Park Unit, Entrance 8	Visit mft.nhs.uk/trafford/patients-visitors/visitors/getting-here , or Google "Trafford general getting here"
Manchester Royal Infirmary	On the second floor of the Acute Medical block, burgundy area	Visit mft.nhs.uk/mri/patients-visitors/visitors/getting-here , or Google "MRI getting here"

Site maps are included at the back of this leaflet for your convenience.

What is a sigmoidoscopy?

A sigmoidoscopy is a test to look at the lining of the back passage (rectum) and the left part of your large bowel (sigmoid). This is done using an endoscope that has a thin flexible tube, about the width of a finger, which is passed into your back passage. The test will be carried out by a doctor or specialist nurse, called an Endoscopist.

Why do I need the test?

Your symptoms may be caused by a problem in your large bowel. The test will help your doctor to find any problems and then plan your treatment.

Preparation for the test

To allow clear views of your bowel, it must be as clean as possible. The left side of the bowel can be cleaned by using an enema. A nurse will give you the enema on the unit when you arrive.

Eating and drinking on the day of your test:

- If you choose to have sedation for your test (sedation is explained in detail later on)
 - You must not have anything to eat or drink for at least 6 hours before your test.
 - You may then have sips of water only, up to 2 hours before your test.
 - Then, you must not eat or drink anything until after your test when you have been advised that it is safe to do so by a member of staff.
- If you choose not to have sedation you may eat and drink normally until you have the enema. After that, you may have clear fluids only.

Should I take my usual tablets or medications?

Iron Tablets or Stool Bulking Agents (such as Fybogel): Stop taking these seven days before your test.

Blood Thinning Tablets

Tablet Name	Advice
Warfarin Synthron	Please contact your anticoagulant clinic and ask them to check your clotting levels within 1 week of your test. The anticoagulant nurse will advise you if your dose needs changing. Do not stop taking it unless you are specifically told to do so.
Apixiban Edoxaban Fondaparinux Rivaroxaban Dabigatran	Do not take on the day of the procedure. Some patients may need to stop taking these medications for a longer period of time. You should have been advised at your outpatient appointment. If you require further advice, or did not receive this advice, please call us.
Asasantin Clopidogrel Dipyridamole Ticagrelor Prasugrel	You should have been advised at your outpatient appointment whether you should continue or stop taking these prior to your test. If you require further advice, or did not receive this advice, please call us.
Clexane Dalteparin Enoxaparin Inhixa	Please call us. We may need to speak to your doctor for advice.

If you are a diabetic treated with insulin or tablets:

- You will need an early morning appointment. If you have been given a later appointment, please contact us.
- You will need to contact your diabetes specialist (E.g. Diabetes clinic, GP, Practice Nurse) for advice on how to manage your diabetes whilst taking your bowel preparation.
- On the morning of your test, do not take your insulin or diabetic tablets.

All other medication normally taken in the morning may be taken as follows:

- Morning appointments - take your medication before 7am or bring it with you to take after your test.
- Afternoon appointments - take your medication before 10am.

Medical History

If you have a Pacemaker or Implantable Cardioverter Defibrillator (ICD), please ensure this has been checked within 12 months of your procedure, and that the technicians are happy that the device is fully operational. Please bring your ID card showing the make and model of the device.

Also, please let us know if you:

- Are pregnant or breast feeding
- Have had a heart attack within the last six weeks
- Are waiting for heart surgery
- Are waiting for coronary angioplasty

What pain relief is available?

Some patients choose not to have any pain relief for this procedure – it isn't always needed. However, if you would like some pain relief, or something to help you relax, there are two choices:

1. Sedation can be given as an injection into a vein in your hand or arm. The sedation will make you feel relaxed and less anxious but won't make you go to sleep. You will be awake and will still be able to communicate with us. Sedation may make you forgetful. Afterwards you may remember very little about the test.

You must have a responsible adult (18+) to take you home and look after you for at least 12 hours after having sedation. You will need to be collected from the Endoscopy Department directly. Do not travel home on public transport.

After having sedation you will be drowsy and small amounts of medication will remain in your body for up to 24 hours. During this period, although you may feel wide awake, you will still be under the influence of the sedation. Your concentration and co-ordination may be impaired and you may feel light-headed, faint or become forgetful. Due to this you must NOT do the following for 24hrs:

- Drive a car, van, ride a motorbike or bicycle or any other vehicle (you will not be covered by your insurance if you have an accident in the 24 hour period after sedation)
- Operate any machinery or electrical items such as kitchen appliances or a lawn mower for example
- Drink alcohol (the sedation may mean that the effects of alcohol are greater)
- Sign any legally binding documents or make life changing decisions
- Return to work
- Take any recreational drugs including cannabis
- Carry children or climb heights (you may feel lightheaded following sedation)
- Take sedative drugs or sleeping tablets
- Be responsible for anyone else including children or elderly relatives

2. Entonox is a gas that you can breathe in through a mouthpiece. It consists of 50% Oxygen and 50% Nitrous Oxide. Nitrous Oxide is sometimes used for anaesthetics but in this combination it works as a short acting painkiller. Entonox is sometimes called 'gas and air' and is most commonly used during child birth. As Entonox is short acting, it can be used as a painkiller for any treatment that requires short-term and rapid pain relief. It does not affect your memory.

Before your test, you will be shown the Entonox equipment and the nurse will explain how to use it. To get the best effect you need to take slow breaths slightly deeper than normal through the

mouthpiece. You are in full control of how much or little you use.

There are minimal risks to using Entonox which are usually associated with certain medical conditions. As part of your admission the nurse looking after you will complete a checklist to make sure it is appropriate for you. Please tell the nurse if any of the following apply to you:

- Eye surgery (with gas bubble insertion) in the last 6 months.
- Head injury with impaired consciousness.
- Facial injuries.
- Heavy sedation.
- Previous laryngectomy.
- Pneumothorax (collapsed lung), lung surgery, chest drain.
- Severe Chronic Pulmonary Disease (breathing problems)
- Extensive swelling of the abdomen or bowel obstruction (blockage).
- Decompression sickness (recent dive in the last 48 hours).
- Air embolism.
- Are pregnant or believe you may be pregnant.
- Vitamin B12 Deficiency
- Myringoplasty / middle ear surgery

You may experience some mild side effects from using Entonox:

- It can make you feel drowsy and a little light-headed.
- Sometimes, you may experience a dry mouth and nausea.
- If used for longer than 6 to 8 hours, Entonox can cause anaemia, but this is rare and you would never be using it for that length of time for this test.

Most patients find that if they persevere and concentrate on breathing slowly, then they quickly get used to the sensations from using Entonox. There are no long lasting side effects when using it for this test and any effects you do experience wear off quickly when you stop using it. However, we advise that you should be cautious about getting up and walking around until your balance has fully returned. You must wait a minimum of 30 minutes before attempting to drive, but this may be longer if you have been given other pain relieving medications.

How long will I be in hospital?

Your length of stay can vary, but you should expect to be in the department for up to three hours. If your test and recovery is complete, you may be allowed home sooner.

We will always try to see you at your appointment time. However, please note that there are several factors that may cause unavoidable delays. We will endeavour to keep you informed of any major delays.

Do I need to bring anything with me?

- Please bring a copy of your most recent prescription or a list of your medication.
- A bag in which to keep your belongings. This will remain with you at all times.
- A book or magazine to read whilst you are waiting.

Visitors

Please note: Due to the current Covid restrictions, friends and family are not permitted to wait in the department.

Our Endoscopy Units are very busy and to ensure the privacy and dignity of all our patients we are unable to accommodate friends and relatives in the treatment areas. However, staff may assess your circumstances and make exceptions where necessary. For example:

- The patient concerned has special needs
- The patient is 16 to 18 years of age
- The patient requires support with communication needs

During your test, friends and relatives may wish to use our on-site facilities for refreshments. Friends and relatives may be able to wait in our reception areas but this cannot be guaranteed due to the number of patients using the department. If you are having sedation you will need to be collected from the department. Staff can contact friends and relatives by phone when you are ready if necessary.

If you would like to discuss your needs before arrival, please telephone the Endoscopy Department.

What happens when I arrive?

The receptionist will ask you a few questions and ask you to take a seat in the waiting room. A nurse will then take you to a private area where:

- Your personal details will be checked.
- You will be asked some questions about your general health.
- Your blood pressure, pulse and oxygen level will be recorded.
- Your test will be explained and your questions answered.
- Arrangements for going home and aftercare will be checked. If the person that is collecting you is not present, we will need to call them to confirm they are available to collect you.
- You will be shown to a changing room and asked to change into a hospital gown. In order to maintain your dignity at all times, disposable privacy pants will be provided to wear beneath your hospital gown.
- If you wish to have sedation, a needle will be inserted into the back of your hand or arm. The needle will be removed and a soft plastic tube left in place. This will be used to give your sedation or a medicine to relax the bowel during the test.
- If you are a diabetic your blood sugar level will be checked before and after your test.
- If you are taking tablets to thin your blood, we will check the result of your most recent blood test. Occasionally, we may need to take another sample to make sure it is safe to carry out your test.
- The nurse will give you the enema.
- You will be asked to take a seat in the sub-waiting area. Please refrain from returning to the reception area in your hospital gown.

Please do not bring valuables to the hospital. We cannot be responsible for loss or damage to personal property.

To maintain patient privacy and dignity, we provide single sex accommodation.

Before the test

Your admitting nurse, or the endoscopist, will make sure you understand the test before asking you to sign a consent form.

Please make sure you fully understand the test and any possible treatments before signing your consent form. You may ask questions about anything you are unsure of.

What happens during the test?

- When you enter the procedure room, additional checks will be completed (For example, your name, date of birth, allergies, medical history etc.).
- You will be asked to lie down on your left hand side initially, although we may need to ask you to change position during the test.
- A probe will be clipped on to your finger to monitor your breathing and heart rate. We may also periodically check your blood pressure.
- If you are having sedation, this will be given just before the test starts.
- If you are having Entonox, we will show you how to use it.
- The Endoscopist may need to examine your back passage with a gloved finger.
- The flexible tube is passed into your back passage.
- Air is gently blown inside to expand your bowel to allow good views.
- We may take internal photographs. These images are only used for medical purposes. Your privacy will be respected.
- Tiny samples of tissue may be taken and small polyps (fleshy overgrowths of tissue, usually on a stalk) may be removed via the scope. This is painless.
- Anything unusual, which we can treat during your test, will be treated unless you ask us not to before the test begins.
- Normally the test will take on average 15 minutes. At the end of your test, the flexible tube is easily removed.
- If you decide to watch your test on the monitor, please note that images are greatly magnified.

Who will be present during my test?

As a minimum:

- The Endoscopist.
- Two members of endoscopy nursing staff.

Sometimes, additional staff may be present, depending on circumstances on the day of your test:

- *A trainee Endoscopist, who may carry out your procedure under the supervision and guidance of a consultant Endoscopist.
- Another doctor in an observational capacity.
- A specialist nurse if required.
- *A student nurse or medical student on placement.

*The Trust participates in the training of doctors, nurses and other healthcare staff. Should you wish to discuss this during your visit, please speak to a member of the nursing staff.

After your test

- If you have had sedation, you will be transferred into the recovery area on a patient trolley. Otherwise, you may be given the option of walking.
- You will be able to rest in the recovery area.
- You will be monitored by the nurses until you are fully recovered.
- You may feel a little bloated with wind. This should settle quickly.
- When you feel sufficiently recovered, you will be offered a drink and a biscuit.
- A nurse will talk to you (in a private room) about the findings of your test and any follow-up. If you would like someone with you whilst receiving results, please inform the nurse. You will also be given written information about this and a discharge advice sheet. If we have taken biopsies (samples) during your test, you will be informed of the results either at a future out-patient appointment or by letter. If you have sedation, the person collecting you will need to speak with the nurse to know how to look after you before you can go home.
- Again, you will be able to ask any questions you have.
- If someone is taking you home, we will contact this person for you when you are ready to go. If you have not had sedation, you may leave on your own if you wish.

After you have left the unit

Problems following your test are unusual. When you leave the unit, we will provide you with a discharge advice sheet which will contain the possible after effects of your test and contact details should you need them.

What are the benefits of having the test?

The test will give us the information we need to treat your condition. If we find anything unusual, we may be able to treat it during your test.

What are the possible risks or complications of having this test?

The test is usually very safe. However, as with any procedure, there is a small risk of complications. These may include:

- Failure to complete the test. The colon has a number of bends and it is not always possible to pass the scope around them.
- Changes in your heart rate and breathing caused by the sedation or the test itself. To avoid this, we may give you some oxygen and monitor your oxygen levels carefully throughout the test.
- Missed lesions (5 to 10% risk).
- Bleeding (less than 1 in 150 risk).
- A hole in the bowel (less than 1 in 1500 risk, or less than 1 in 500 risk when a polyp is removed).

If you experience these complications, they can be minor and resolve themselves fairly quickly. However, sometimes you may need to stay in hospital for observation, have a blood transfusion, undergo a repeat endoscopic test or radiological test, or have an operation to repair damage.

Although complications are rare, you should get in touch with your GP straight away (or attend the

nearest A&E department if your GP is not available) if you notice any of these symptoms in the 48 hours after your test:

- Severe stomach pain worsened by moving or coughing.
- Bleeding from the back passage that is persistent or severe, including blood clots.
- Pain in the tip of the shoulder.
- Persistent or increasing abdominal swelling.
- Shortness of breath.
- Very dark or blackish motions.

What are the discomforts of the test?

Some patients experience discomfort or abdominal pain during the test. This may be caused by the flexible tube and air being passed inside. This is rarely distressing enough to stop the test. We remove as much air as possible when the test is complete.

Is there an alternative test?

A Barium Enema can be used to look at your lower bowel. A white liquid is introduced into the back passage and x-ray pictures are then taken. Your doctor will have explained to you why a sigmoidoscopy is thought to be best in your situation.

What will happen if I don't have the test?

This will vary depending on your individual circumstances. If you do not have the test your doctor may not be able to find the cause of your symptoms. Should you have any questions about this, please speak to your doctor.

No Smoking or Vaping Policy

The NHS has a responsibility for the nation's health. Protect yourself, patients, visitors and staff by adhering to our no smoking policy. Smoking, and the use of e-cigarettes, is not permitted within any of our hospital buildings or grounds.

For some great information go to: www.nhs.uk/smokefree

Violence, aggression and harassment

We are committed to the wellbeing and safety of our patients and staff. Please treat others with the courtesy and respect that you expect to receive. Verbal abuse, harassment and physical violence are unacceptable and will lead to prosecution.

Comments, complaints, concerns and compliments

During your visit, we may ask you to provide feedback on the service you have received in one of the following ways:

- Fill in the Friends and Family Test (FFT) via a card or tablet.
- Complete a patient survey form online.
- Complete a paper version of the patient survey which you can post back to us (a stamped addressed envelope will be provided).

Other ways in which you can provide feedback are:

- Ask to speak to the ward or department manager. If you would like to discuss a concern or make a complaint, they may be able to help straight away.
- Complete the Family and Friends Test (FFT) online at mft.nhs.uk/fft. Please make sure that you select the correct hospital and ward/unit.
- Contact the Patient Advice and Liaison Service (PALS):
 - Write to PALS, Ground Floor, Entrance 2, Manchester Royal Infirmary, M13 9WL.
 - Telephone (0161) 276 8686.
 - Email pals@mft.nhs.uk.
 - Ask for a PALS information leaflet.
- Log onto the Patient Opinion website www.patientopinion.org.uk and click on “Tell Your Story”.
- Inpatients can speak to a senior nurse or manager by contacting the Tell Us Today service on (0161) 701 1999.

We welcome your feedback so we can continue to improve our services.

Check list

- Are you able to keep your appointment? If not have you phoned to cancel or change it?
- If you are worried or have any questions to ask, have you contacted us?
- If you are having sedation, have you arranged for an adult to take you home and look after you for at least 12 hours?
- If you are taking anticoagulants, such as Warfarin or Sinthrome, have you been in touch with your anticoagulant clinic to have your clotting level checked within one week of your appointment?

Translation and Interpretation Service

It is our policy that family, relatives or friends cannot interpret for patients. If you require an interpreter for your test, please call to let us know.

These translations say “If you require an interpreter, or translation, please ask a member of our staff to arrange it for you.” The languages translated, in order, are: Arabic, Urdu, Bengali, Polish, Somali and simplified Chinese.

اذا كنت بحاجة الى مترجم، او ترجمة، من فضلك اطلب من احد موظفينا ترتيب ذلك لك
اگر آپ کو ایک مترجم، یا ترجمہ کی ضرورت ہے، تو برائے کرم ہمارے عملے کے کسی رکن سے کہیں کہ وہ آپ
کے لیے اس کا انتظام کرے۔

আপনার যদি একজন দোভাষী, অথবা অনুবাদের প্রয়োজন হয়, দয়া করে আমাদের একজন
কর্মীকে বলুন আপনার জন্য ইহা ব্যবস্থা করতে।

Jeśli Pan/Pani potrzebuje tłumacza lub tłumaczenie prosimy w tym celu zwrócić się
do członka personelu.

Haddii aad u baahantahay tarjubaan, fadlan waydii qof ka mid ah shaqaalahayga si
uu kuugu.

如果你需要翻译或翻译员，请要求我们的员工为你安排



@MFTNHS

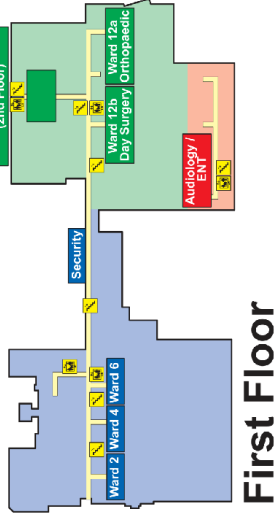
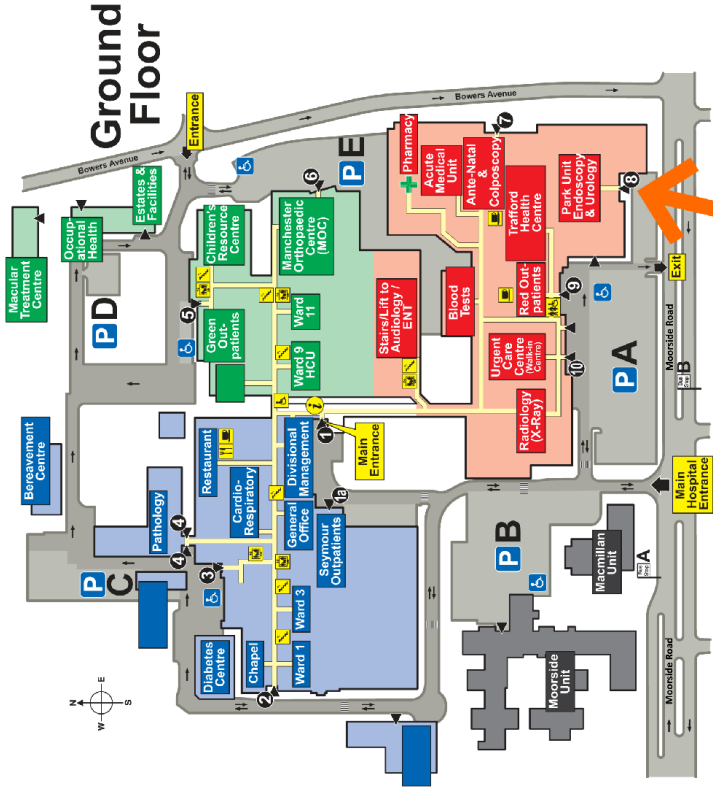


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www.mft.nhs.uk

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Trafford General Hospital Ward & Department Guide



- Site entrance
- Car park
- Disabled parking
- Bus stop
- Building entrance
- Main reception
- Main corridors
- Lift
- Stairs
- Restaurant
- Tea bars

**Endoscopy Unit
 Ground Floor, Entrance 8**

Zone	Floor
Acute Medical Unit	Grd
Ante-Natal Clinic	Grd
Audiology	1st
Bereavement Centre	Grd
Blood Tests (Phlebotomy)	Grd
Boardrooms 1, 2 & 3	1st
Cancer Services	Grd
Cardio-Respiratory Unit	Grd
Chapel / Prayer Room	Grd
Children's Outpatients	Grd
Children's Resource Centre	Grd
Children's Ward	Grd
Colposcopy	Grd
Day Surgery	1st
Dental / Oral & Maxillofacial	Grd
Diabetes Centre	Grd
Divisional Management	Grd
Ear, Nose & Throat (ENT)	1st
Education Library	1st
Endoscopy	Grd
Estates & Facilities	Grd
Finance & Procurement Business Unit	2nd

Zone	Floor
General Office	Grd
Gynaecology	Grd
INRU	Grd
Macmillan Unit	Grd
Macular Treatment Centre	Grd
Manchester Orthopaedic Centre (MOC)	Grd
Moorside Unit	Grd
Occupational Health	Grd
Occupational Therapy	Grd
Oral & Maxillofacial / Dental	Grd
Orthopaedics	1st
PALS	Grd
Pathology Laboratory	Grd
Pharmacy +	Grd
Phlebotomy (Blood Tests)	Grd
Physiotherapy	Grd
Pre-Operative Assessment	Grd
Radiology (X-Ray)	Grd
Restaurant	Grd
Rheumatology	Grd

Zone	Floor
Security	1st
Seymour Outpatients	Grd
Speech & Language Therapy	Grd
Stroke Unit	Grd
Stroke Suite 5	Grd
Tea Bar	Grd
Trafford Health Centre	Grd
Trafford High Care Unit	Grd
Ultrasound	Grd
Urgent Care Centre (Walk-in Centre)	Grd
Urodynamics	Grd
Urology	Grd
Ward 1 (Stroke Unit)	Grd
Ward 2	1st
Ward 3 (INRU)	Grd
Ward 4	Grd
Ward 6	1st
Ward 9 (Trafford High Care Unit)	Grd
Ward 11	Grd
Wards 12a (Orthopaedics) & 12b (Day Surgery)	Grd
Wards 15 & 16	1st
X-Ray (Radiology)	Grd

Manchester University NHS Foundation Trust

Oxford Road Site, Manchester, M13 9WL / 0161 276 1234 / www.mft.nhs.uk

Use MRI Entrance 2 to access Zone D.

Endoscopy Unit
Second Floor



Key

- Building Entrance (Pedestrians)
- Emergency Department Entrance (Pedestrians)
- No Entry (Vehicles)
- Pick Up / Drop Off
- Pedestrian Access
- Accessible Entrance
- Bus Stop
- Visitor Parking
- Accessible Parking
- Bicycle Rack
- Pedestrian Crossing
- Pharmacy (Hospital prescriptions only)
- Lift
- Stairs
- Zones (A to N)



Please remember

