

Endoscopy Unit

Patient information leaflet: Information for patients having an ileoscopy

Contents

What is an ileoscopy?	1
Why do I need an ileoscopy?	1
Are there any alternatives to ileoscopy?	2
Preparing for the test	2
On admission to the endoscopy unit	2
During the test.....	2
What are the risks?	3
After the test	3
Things to remember	4
Contact us.....	5
How to provide feedback	5

What is an ileoscopy?

As you already know you have had your large bowel removed. To enable us to look at the remaining small bowel we need to have a gentle look through your stoma with an instrument called a colonoscope, which is a long flexible tube. The colonoscope is connected to a television system and has a mini camera built into the end. The test usually takes between 15 and 30 minutes - but can be a little bit longer if we need to take biopsies (very small fragments of tissue that need to be sent for analysis). Tiny forceps are used to remove the biopsies through the scope and you should not feel any discomfort/pain.

Why do I need an ileoscopy?

Your doctors would like to check that your stoma is healthy. They will also be looking at the lining of the small bowel to check that there is no inflammation. Not all inflammation is visible to the naked eye and so we may need to take biopsies, which will be sent to the laboratory to



be looked at under a microscope. If you have had any specific problems with your stoma (such as bleeding), we will be looking for a cause.

Are there any alternatives to ileoscopy?

An ileoscopy is the only way of looking at the lining of the bowel.

Preparing for the test

If you are taking iron tablets (e.g. ferrous sulphate) please stop taking them 7 days before your ileoscopy. You may start taking them again immediately afterwards.

It is advised that you wear loose fitting clothing, as this is more comfortable during and after the test. Please bring with you a dressing gown and slippers. It is important to increase your intake of clear fluids on the day before your test.

On admission to the endoscopy unit

After admission by reception staff, a member of the nursing team will prepare you for the test.

Your blood pressure will be checked and you will be asked some questions about your medical history. Please bring with you a list of any medication you are taking, including any inhalers or angina sprays.

The nurse is very aware that you may be worried or anxious so do not be afraid to ask questions. We try very hard to keep to appointment times, but please be patient if you are kept waiting, as on occasions we do have emergency patients to deal with. You will be given an estimated time for collection and it is important that your escort attends with you so they know what time to return to collect you. Please note that your appointment time is your arrival time at the unit and not the time of the actual test.

You may or may not require sedation (explained for this procedure). You can expect to be in the unit for up to two hours if you have sedation. You can alternatively use the Entonox gas - in this case you will be here for half an hour afterwards and you can come alone to your appointment and drive yourself home afterwards. You will be asked to undress, put on a hospital gown and your dressing gown and slippers.

During the test

Before you go into the procedure room the doctor will explain the test to you and ask you to sign a consent form. If you have any questions at this stage, please ask the doctor.

You may need to have a light sedative injection (please note it is not a general anaesthetic). If you choose to have sedation you will need to have a small plastic tube inserted into a vein in

your arm - usually in the back of your hand. You will be sleepy and relaxed throughout the test and aware of what is happening - but afterwards it is unlikely that you will remember much about it.

In order to monitor your blood pressure, heart rate and breathing, the nurse will place a probe on your finger and sometimes an inflatable cuff on your arm. Oxygen may be administered during the procedure. You will be asked to lie on your back. We will remove your stoma bag (we should be grateful if you could bring with you a spare bag, as we do not have all types of stoma bags). The doctor will then examine your stoma with a gloved finger to make sure it is safe to insert the tube. The flexible tube will then be gently inserted into your stoma and into your small bowel. Air will be passed through the tube to open up the bowel, to give a clear view of the lining. This may give you some wind-like discomfort, but will not last long.

You may pass some wind. Although this may be embarrassing, remember the staff do understand what is causing it. The nurse will be with you at all times giving you guidance and support.

What are the risks?

Risks are very small and occur in less than 1% of procedures. We do our utmost to avoid complications, but we have to inform you of the risks even though they are small.

They include:

- Reaction to the medication we give you
- Perforation of the bowel is rare but may require urgent treatment or even an operation
- Excessive bleeding

The possibility of a complication increases if the endoscope is used to apply treatment. Any treatments proposed will be explained to you. You may experience soreness around the stoma and abdominal tenderness. As the flexible tube passes around the bowel, it brushes against the lining and may cause a small amount of bruising. Incomplete ileoscopy occurs if the test is abandoned due to technical difficulty or because it was causing you distress.

After the test

If you have sedation you may be a little drowsy and so you will be taken to a recovery area on the trolley, where you can recover from the effects of the sedation. You will be offered a drink and something to eat while you wait for your escort home. This person must come to the unit to collect you. You will remain in the unit for about one hour after the procedure.

As you may be unsteady on your feet and may not be able to walk far, your escort should park in the hospital grounds. A nurse needs to speak to your escort before you leave the endoscopy department. We will either write down the results for you or give you or your escort (with your permission) a copy of your report, as you probably will not remember what we say if you have had sedation. We will also post a copy of your procedure report to your GP. If we take tissue samples, the results may take up to two weeks to come back and these results will also be sent to your GP. You will need someone to accompany you to and from the unit and stay with you for twelve hours afterwards if you have sedation. You will be advised not to:

- Drive or use public transport
- Go back to work
- Operate any machinery
- Drink alcohol
- Look after children
- Have a bath unsupervised
- Sign any legal documents

All the above applies for twenty-four hours after the procedure as the drugs remain in the system for this time. However, if you use Entonox only, the gas will be eliminated from your system within 30 minutes - you will go to the recovery area for a drink and biscuits and then you can go home alone or drive if needed.

We will post a copy of your procedure report to your GP.

If we take tissue samples, the results may take approximately two weeks to come back and these results will also be sent to your GP.

Things to remember

- If you are on warfarin, Clopidogrel or any other anti-clotting medication, please contact your referrer for advice.
- Do not bring any valuables to the unit.
- Please phone 01432 803060 if you cannot keep this appointment - missed appointments waste time and money and if you cannot come, someone else who is waiting can take your slot.
- If you choose to have sedation, you must have a responsible adult at home to care for you after the procedure for at least 12 hours.
- You should not drive, go to work, operate any machinery, drink alcohol, or sign any legal or important documents for 24 hours post procedure if you have sedation.

- Please bring with you a spare stoma bag.

As this is a training hospital there may be a trainee undertaking your procedure, but they will be closely supervised - with a senior colleague present in the room. Please let a member of staff know if you have any concerns regarding this on the day of your procedure.

Please note if you choose not to follow this information, the hospital cannot be held responsible for any adverse effects.

Contact us

If you experience any severe side effects in the 48 hours following the procedure, please contact either the endoscopy unit during working hours 8 am - 5.30 pm on 01432 355444 ext. 1508 or your own GP.

Out of Hours - contact your own GP, NHS 111 or the Accident and Emergency department at the hospital on 01432 372908 or 01432 372909.

How to provide feedback

Our aim is to provide a quality of care we would want for ourselves, our families and friends. If there was anything that we could have done please let us know via the department/ward staff or the patient experience team available on 01432 372986 or email PALs@wvt.nhs.uk (opening times may vary).

This leaflet is available in large print, Braille, Audio tape or other languages upon request. Please contact patient experience team on the above telephone number.

You may be asked to give your opinion on the service you have received. We welcome your feedback as this will help us to improve the care and treatment we provide to our patients.

[Wye Valley NHS Trust](#)

Telephone 01432 355444