

Colonoscopy/flexible sigmoidoscopy

You have received Entonox to help with pain relief during your colonoscopy today.

There are a few side-effects associated with Entonox including:

- Dizziness
- Light-headedness
- Tingling
- Sickness
- Disorientation

These effects are normally short-lived and will have passed before you are allowed to leave the department.

There are no formal restrictions on you now and providing you are fit for discharge, you will be able to go about your normal daily activities within 30 minutes.

It is advisable to take a light diet for 24 hours after the investigation as the effects of the laxatives that you took prior to the test may still cause you to have a loose motion.

In order to visualise the bowel properly and make a thorough investigation it is necessary to inflate it with air. This may give you some abdominal discomfort due to flatulence and 'wind' type pain. Any discomfort should settle down within a few hours. However, if the pain becomes more severe, changes in character or is accompanied by bleeding, please contact the Endoscopy Suite.

It is not unusual to pass a small amount of blood following this investigation, especially when you first open your bowels again. However, if this becomes excessive, persistent or is accompanied by pain, please call for advice.

If you have any problems or queries about your test, please telephone the Endoscopy Unit.

To contact us by telephone

Queen Elizabeth Hospital Birmingham, Endoscopy Unit

Monday to Friday 08:30–17:30 – 0121 371 3838

If your call is out of these hours please contact your own GP or the Accident & Emergency Department on 0121 371 2600

A report will be sent to your GP within the next few days or offered to you to take personally.

Any specimens that were taken will need to be reported on by the laboratory which takes approximately 10–14 days. The results of any specimens taken are not sent back to the Endoscopy Unit, so please do not telephone us to find out results. The results of your specimens will be sent directly to your GP.

Please note:

You may have been told that you require further surveillance colonoscopy in the future i.e. to look for further polyps, a family history of bowel cancer or to assess inflammatory bowel disease. If this is the case, your notes will be re-assessed at least two months prior to the due date. This will ensure that your procedure is still indicated, in accordance with latest guidance.