



Patient Information Leaflet

Having CT Colonography with Gastrografin Faecal Tagging

Produced by:

Diagnostic Imaging

Adapted from Portsmouth Hospitals CT faecal tagging colonography
Information for patients

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If you are unable to read this leaflet because English is not your first language, please ask someone who speaks English to telephone PALS on 01983 534850 for further information and help.

Polish:

Jeśli nie jesteś w stanie przeczytać tej ulotki bo angielski nie jest pierwszym językiem, poproś kogoś, kto mówi po angielsku, o kontakt telefoniczny z (PALS 01983 534850) aby uzyskać więcej informacji i pomoc

Russian:

Если вы не можете прочитать этот буклет на английском языке потому что не является первым языке, пожалуйста, попросите кого-нибудь, кто говорит на английском языке для телефонного (PALS 01983 534850) для получения дополнительной информации и помощи

Turkish:

Eğer İngilizce ana diliniz değilse, çünkü bu broşürü okumak için yapamıyorsanız, daha fazla bilgi için 01983 534850 üzerinde PALS telefon İngilizce bilen birine sormak ve yardım lütfen

Bulgarian:

Ако не сте в състояние да прочетете тази листовка, тъй като английският не е първи език, опитайте някой, който говори английски, за да телефонирам (PALS на 01983 534850) за повече информация и помощ

Czech:

Pokud nejste schopni přečíst tuto příbalovou informaci, protože angličtina není vaším rodným jazykem, zeptejte se někoho, kdo mluví anglicky na telefonní PALS na 01983 534850 pro další informace a pomoc

Bengali:

আপনি ইংরেজি আপনার প্রথম ভাষা না থাকার কারণে এই লফিলটে পড়তে অক্ষম হন, তাহলে আরও তথ্যের জন্য 01983 534850 নভেগিশেন PALS টলেফি এন ইংরেজি কথা কটে জিজ্ঞাসা করুন এবং সাহায্য করুন

This information leaflet tells you about a CT Colonography examination. This is a special type of CT scan to look inside your large bowel for any abnormality. It explains how the test is done, the risks involved and what to expect.

CT stands for computed tomography, a technique using x-rays to produce images of a 'slice' through a part of the body.

What if I cannot attend for my appointment?

If your appointment is not convenient please contact the Diagnostic Imaging department on (01983) 534679 (Mon–Fri 09.30–12.30 and 13.30–16.30) to arrange a new appointment.

What is a CT Faecal tagging colonography?

The large bowel is the last 10 feet of the intestine. When healthy, it conserves water and makes the faeces into soft solids that are easy to pass. CT Faecal tagging colonography, (also known as CT pneumocolon or virtual colonoscopy) involves using a CT scanner to produce 2D and 3D images of the whole of the large bowel (colon and rectum). This is a way of looking at the large bowel for any abnormality which may be causing symptoms such as bleeding from the bottom, stomach ache, constipation or diarrhoea.

During the scan carbon dioxide gas will be used to inflate the bowel via a thin flexible tube placed in your back passage. The gas distends the large bowel so that all its surfaces can be seen during the scan. This may feel slightly uncomfortable but should not be painful. A small injection given in your arm will prevent any bowel spasm.

What preparation is needed before my CT colonography?

For a good quality CT Colonography examination the bowel needs to be as empty as possible and the lining of the bowel must be coated with a special liquid which shows up on the scan.

- **You will need to follow a low residue diet and drink the special liquid called Gastrografin starting 2 days before the test.**
- The Gastrografin can have a laxative effect and you will need to stay close to a toilet at all times.

POSSIBLE SIDE EFFECTS OF THE LAXATIVE

- **Vomiting**
- **Rash**
- **Wheezing / difficulty in breathing**
- **Severe abdominal pain**
- Details of the low residue diet and when you should drink the Gastrografin are given on page 8.

For Female Patients:

If there is any chance you may be pregnant, please contact the department.

If you are taking the oral contraceptive pill, diarrhoea can make it less effective. Continue taking the pill but use other precautions for the rest of that cycle.

What are the risks?

Very rarely people experience side effects such as:

- Abdominal discomfort.
- Faint-like reactions.
- Reactions to contrast media (dye).
- Damage to the bowel wall: a small tear in the lining of the colon or rectum may occur but this is rare (fewer than 1 in 3000 tests).

CT scans use x-rays but modern CT scanners (such as the ones at St Mary's Hospital) are designed to keep the radiation dose as low as possible. The amount of radiation that you are likely to receive is equal to the natural radiation we all receive from the atmosphere over approximately 3 years. If your doctor has asked for a CT scan then he or she will have decided that the benefit of having the scan, and the information that it gives, is greater than the risk of the small dose of radiation.

Further information on the safety of X-Rays can be obtained by going to the Health Protection Website and searching for 'X-Rays how safe are they?'

Alternatively follow the link:

<http://www.hpa.org.uk/web/HPAwebFile/HPAweb>

If you are diabetic and taking Metformin or have any other queries about this procedure please contact (01983) 534679 and ask to speak to a CT radiographer.

Elderly / infirm patients should consider arranging for someone to accompany them, and escort them home.

Advice for diabetics

If you take insulin: Do not stop taking your insulin, but the dose will need to be reduced because you will be eating less than usual.

If you inject a long-acting insulin at bedtime: Reduce this dose on insulin by **half** for the three nights before your scan appointment.

If you inject twice a day: Reduce your doses of insulin by **half** the day before and on the morning of your scan appointment.

If you are injecting four times a day: Reduce all your doses by **half** the day before and on the morning of your scan appointment.

It is advisable to monitor your blood glucose levels regularly throughout the day and before bedtime. If you are low have a sweet drink such as Lucozade or non-diet fizzy drinks. Sip throughout the day if needed or have a small glassful as an alternative to your usual meal. Remember that too many sugary drinks may also cause your sugar levels to go too high. If your blood sugar levels are normal or too high then drink plain fluids such as black tea, black coffee or water.

Your usual insulin and diet can be resumed when the examination has been completed.

If you take diabetic tablets: Stop your tablets the day before the your scan. You may restart these with your normal diet after the examination has been completed.

If you take a combination of insulin and tablets: Stop both in the same way as explained above. Your usual insulin and tablets may be resumed after your scan is completed.

Two days before your appointment

Please start the low residue diet at breakfast time. The foods you may eat are listed on page 8. Please do not eat any foods not listed here.

Avoid all fruit and vegetables including fruit juice.

16:00 Please drink 25mls of the Gastrografin (this may be diluted into water, squash).

Sometimes Gastrografin can give you diarrhoea so it is important to drink plenty of clear fluid in the next 2 days to prevent you becoming dehydrated.

Low residue diet

Meat: Lean meats (avoid tough and gristly meat) poultry, bacon, offal. Avoid sausages and spam.

Fish: Fresh, frozen, tinned in brine (avoid skin and bones).

Cheese: Any type.

Eggs: Boiled, poached, scrambled. Up to 4 eggs per day.

Milk: Half pint daily (full cream, skimmed or semi-skimmed).

Fats: Butter, margarine—half ounce daily **or** low fat spread 1 ounce per day.

Bread: White only, no more than 4 slices per day.

Chapatti: Made with white flour (No1) – not more than 4 daily.

Potatoes: Boiled or mashed.

Rice / Pasta: White only, freshly cooked, **not** reheated (small portion).

- Sweets:** Boiled sweets, mints, jellies.
- Sugar:** Brown or white, honey, syrup, jelly-type jam and marmalade.
- Desserts:** Jelly/mousse (avoid fruit bits). French set yoghurts (no bits).
- Beverages:** Water, tea, coffee (milk from daily allowance), fizzy drinks, Oxo, wine, beer, clear soup i.e. soup that has been strained to remove the solids.
- Seasonings:** Salt, vinegar, ground pepper.

The day before your appointment

Please continue to follow the low residue diet until 16:00.

- 08.00 Please drink 25mls of the Gastrografin (this may be diluted)
- 13.00 Please drink 25mls of the Gastrografin (this may be diluted)
- 16.00 Please drink 25mls of the Gastrografin (this may be diluted).
- 16:00 onwards: From now on, follow a **clear fluid only** diet for the rest of the day. Please do not eat or drink anything else.

Clear fluids you are allowed:

- Water, energy drinks and soda water
- Tea/coffee (no milk)
- Fizzy drinks e.g. lemonade
- Fruit squashes
- Herbal and fruit teas

- Clear soups (strained)
- Bovril, Oxo, Clear jelly

On the day of your CT colonography appointment

Please have nothing to eat before the test today. You may drink **water only** up until 2 hours before the test, with nothing to drink after this.

If it is essential that you eat on the morning of your appointment because of any medication you are taking e.g. insulin, please telephone and ask to speak to a senior CT radiographer on 01983 534670

On arrival at the X Ray and Scanning department

Please report to the reception staff on arrival where you will be directed to the scanning waiting area. A radiography assistant will meet you here and show you to a private cubicle where you can undress. You will be asked to put on a hospital gown. You may bring your own dressing gown and slippers if you wish.

You may be asked to remove some of your jewellery if it will interfere with the procedure. It is better not to wear expensive jewellery as it is difficult to guarantee security.

Who will you see?

The examination will be performed by a specialist radiographer and a radiographic assistant.

Can I bring someone with me?

Yes, but they will not be able to accompany you into the CT scan room except in very special circumstances.

During the investigation

- Before the CT colonography scan the radiographer will explain the test and answer any questions. Please let him or her know if you have had any problems with your bowel preparation.
- At the start of the procedure you will have a cannula inserted into one of the veins in your arm (similar to having a blood test).
- Once in the scan room, you will be asked to lie down on the scanner table on your left side.
- The radiographer will pass a short, thin flexible tube into your back passage.
- A muscle relaxant may be injected into the cannula to help avoid bowel spasm.
- Gas (carbon dioxide) will be gently introduced into your bowel through the tube in your back passage.
- This is done at a controlled rate by a machine specifically designed for this purpose.
- Despite the muscle relaxant, you may still feel some bloating and mild discomfort in your abdomen like "bad wind".
- Once the radiographer is satisfied with the amount of gas in your large bowel, a CT scan will be taken with you lying on your back.
- You may be given an iodine-based intravenous contrast (X ray dye) via the cannula.
- You will then be asked to turn onto your front for a second scan.
- Each scan will take about 10 to 20 seconds (1 breath hold).

- After all the scans are completed the radiographer will remove the small tube and show you to the toilet.

If you have a **colostomy or ileostomy** please bring a spare bag.

How long will it take?

The examination typically takes 30 minutes but please allow to be in the department for at least 1½ hours.

Are there any after effects?

You may feel bloated for a short while until the air in your bowel works its way out. You can eat, drink, and return to your usual lifestyle straight away.

If you encounter any problems after this investigation please contact your GP.

Can I drive home after my CT colonography scan?

Yes. If you drive yourself it is necessary to wait at least an hour after the scan before driving to ensure you will not become unwell at the wheel.

The injection given during the examination to reduce movement in the bowel can cause temporary blurring of vision. This is short lived and has usually gone by the end of the examination but can occasionally last a little longer. You must make sure your vision is back to normal before you drive home.

When will I get the results?

The results of the scan will not be available at the time of your scan. The scans must be carefully analysed and interpreted by a radiologist (a specialist X ray doctor). The radiologist will prepare a report which will then be available to the hospital team who referred you for the scan.

Consent: What does this mean?

Before any doctor, nurse or therapist examines you they must have your consent or permission. Consent ranges from allowing a doctor to take your blood pressure, (rolling up your sleeve and presenting your arm is implied consent), to signing a form to say you agree to the treatment or operation. It is important before giving permission that you understand what you are agreeing to. If you do not understand please ask. More detailed information is available on request.

Access to Health Records by Diagnostic Staff

As a patient undergoing tests as part of a diagnostic procedure information about you may be accessed by other healthcare professionals and images may need to be interpreted by teleradiology service. It is normal practice in these circumstances for your consent to be implied as part of your agreement to have the test or tests performed.

Accidental over exposure of radiation

Despite all safeguards, medical exposures can occur where the actual dose is greater than was intended. The regulations governing these exposures are either IR(ME)R 2000 or IRR 99.

In the event of an over exposure the incident will be reported to the Radiation Protection Advisor. It will be down to the discretion of the RPA as to whether there is a clinical requirement to inform any patient of an overexposure.

Please complete the following statement

I have read the leaflet including the risks and benefits of CT Colonography and consent to the procedure. I acknowledge that I can ask for the procedure to be stopped at any time.

Patient signature

Date

Area below for any questions you would like answered before the start of the examination.

Please bring this leaflet with you to the examination and complete the form above.

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If you have any queries or concerns about the content of this leaflet please call (01983) 524081 and ask to speak to the relevant department.

If you require this leaflet in another language, large print or another format, please contact the PALS Team, telephone **01983 534850**, who will advise you.

Valuables should not be brought into the hospital. If patients have to bring in valuable items they should ask a nurse to store them safely and request a receipt for the items. You may not be able to have the valuable items returned if the time of discharge from hospital is out of hours.

We are sorry but the Trust cannot accept responsibility for loss or damage to items not given for safe keeping.

You can get further information on all sorts of health issues online at: **www.nhs.uk**

For Health advice and out of hours GP service please call the NHS 111 service on: **111**

We Value Your Views On Our Service

If you wish to comment on the care which you, your relative or friend has received, we will be pleased to hear from you. Please speak to the person in charge of the ward, clinic or service in the first instance or ask them to contact the PALS Team. If you wish to contact them directly, telephone on **01983 534850**.

Alternatively you may prefer to write to:

Chief Executive
Isle Of Wight NHS Trust
St Mary's Hospital
Newport, Isle of Wight, PO30 5TG

You can also share any concerns you have about our services with the Care Quality Commission (CQC) on **03000 61 61 61** or at **enquiries@cqc.org.uk**

All NHS sites are no smoking areas.

If you would like help and advice to stop smoking please call: Freephone 0800 169 0 169 to talk to the NHS Smoking Helpline.