

CONSENT FOR SIGMOIDOSCOPY



The examination which we propose requires your consent. In order to make this decision easier, we inform you about the type, importance and possible complications of the planned examination.

Sigmoidoscopy offers the possibility of endoscopic evaluation of the large intestine in the rectum and esica, i.e. the final section of the large intestine. The examination is usually performed when patient is suspected of anal varicose veins or colitis. Sigmoidoscopy is performed using a flexible apparatus. During the examination, in case of finding lesions, it is possible to take specimens or to remove small polyps of a few millimetres.

How the examination is conducted

The examination is performed after proper preparation, consisting in cleansing the intestine with rectal laxatives. During the sigmoidoscopy, the patient lies on their side, the camera is inserted through the anus. During the examination, air is injected into the lumen of the intestine to view its wall better. This can cause bloating, discomfort. The examination may also be temporarily painful. Persistent pain may be an indication for withholding further evaluation of the intestine. Taking specimens and removing small polyps is painless. Each instrument is disinfected after the examination and the tweezers used for taking specimens are sterilised and single use only, which protects against infection.

Possible complications

Success of the examination and full safety cannot be guaranteed by any doctor. However, complications are rare (0,2%). These include perforation of the wall of the digestive tract (0,1%), bleeding (0,008%), which usually require immediate surgery. Complications are more common with elderly people and patients with diverticula of the large intestine.

In order to reduce the risk associated with proposed examination please answer the following questions (tick the correct answer):

1. Do you have an increased tendency to bleed? YES NO
2. Are you taking medications that affect blood clotting? YES NO
(e.g. Aspirin, Polopiryna, Ticlopidine, Acenocumarol, Klopidozrel, Warfarin etc.)
3. If medications affecting blood clotting were being taken, when were they stopped?
4. Do you have a pacemaker or cardioverter implanted? YES NO
5. Women of childbearing age – is it possible that you are pregnant? YES NO

Proceedings after the examination

If anaesthesia is used, do not eat or drink for 2 hours after the procedure, in the period immediately after the anaesthesia, assistance of another person is recommended, driving is not allowed on that day. Occurrence of unclear symptoms after the examination (persistent abdominal pain, bleeding) should be reported to the nurse or doctor. Please ask if anything is unclear to you.

Patient statement

I consent to proposed examination as well as possible taking of specimens or removing small polyps. I understand that the purpose of the examination may not be achieved.

.....
(First name and surname)

.....
(Pesel)

.....
(Date and signature)

