**Flexible Sigmoidoscopy**

Preparing for your procedure

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<th>What you’ll need</th>
<th>7 days before your procedure</th>
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| **Items needed for your bowel preparation** (see below) are available at most pharmacies over-the-counter. **If you have kidney problems, you may need to use a different preparation. For instructions, call your gastroenterology clinic** (see the handout *Gastroenterology and Endoscopy Locations*).  
  - Magnesium citrate (a laxative)—10 ounces  
  - 2 sodium phosphate enemas (Fleet saline brand or similar generic) | **Talk to your primary care clinician about stopping any:**  
  » Anticoagulation medications, such as apixaban (Eliquis), dabigatran (Pradaxa), rivaroxaban (Xarelto) or warfarin (Jantoven or Coumadin).  
  » Antiplatelet medications, such as clopidogrel (Plavix). |
| **If you have sedation for your procedure and don’t arrange to have an adult drive you, your procedure will be canceled.** Medications you receive during your procedure affect your ability to think clearly for many hours. This makes driving or traveling alone dangerous. | **Ask your primary care clinician for instructions if you:**  
  » Take insulin for diabetes.  
  » Have heart valve disease or had heart valve replacement.  
  » Stop taking multivitamins and other medications with iron.  
  » Check with your clinician if you’ll have sedation during your procedure.  
  » If yes, arrange for a ride home from a licensed driver after your procedure. Don’t take a bus, cab or ridesharing service unless an adult rides with you. Don’t ride a motorcycle.  
  » We strongly encourage your driver or another adult stay during your appointment (usually takes about 2 hours).  
  » If your driver can’t stay, we ask that they check in at the front desk with you. Your driver will need to provide their phone number before leaving and **must** return when called. |
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<th>1 day before your procedure</th>
<th>Day of your procedure</th>
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<td>• Drink at least eight 8-ounce (237-milliliter) glasses of water throughout the day. Cross out each square as you drink a glass. ☐☐☐☐☐☐☐☐</td>
<td>• One to 2 hours before your procedure, give yourself a Fleet saline enema. Hold the solution in for 5 to 10 minutes. Go to the bathroom and expel the solution.</td>
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<td>• For your morning meal, you may eat light, solid foods, such as a piece of fruit, bowl of cereal or slice of toast and juice.</td>
<td>• Immediately repeat with a 2nd enema.</td>
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<td>• At noon, begin a full-liquid diet. Full liquids include: Milk, non-vegetable puréed soup, Sherbet, pudding and vanilla ice cream, and strained fruit juice (no pulp).</td>
<td>• Bring the following to your procedure:</td>
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<td>• At 5 p.m., continue with full liquids for your evening meal.</td>
<td>» Health insurance card</td>
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<td>• Before 6 p.m., drink 10 ounces of magnesium citrate.</td>
<td>» Photo ID</td>
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<td>• After drinking the magnesium citrate, begin a clear liquid diet. Clear liquids are liquids that look like colored water and you can see through at room temperature. Don’t drink any red or purple liquids. The color may interfere with your procedure.</td>
<td>» Adult to drive you or ride with you home if you’re having sedation</td>
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<td>• You may have any of the following:</td>
<td>• Don’t wear fragrant perfumes or lotions to your procedure.</td>
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<td>» Water, clear broth or bouillon</td>
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<td>» Coffee or tea without milk or nondairy creamer</td>
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<td>» Gatorade or Powerade noncarbonated sports drink—Regular Gatorade, regular Powerade, Gatorade G2 and Powerade Zero are OK. Choose a green-, yellow- or clear-colored flavor. Don’t use powdered Gatorade.</td>
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<td>» Pedialyte, carbonated and noncarbonated soft drinks, Kool-Aid or other fruit-flavored drinks and fruit juices without pulp (apple, white grape, white cranberry)</td>
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<td>» Jell-O, Popsicles and hard candy</td>
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<td>• You may drink clear liquids up to 6 hours before your procedure.</td>
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What is a flexible sigmoidoscopy?

Flexible sigmoidoscopy is a procedure that lets your clinician check your lower colon for any abnormalities (anything not usual or typical), including inflamed (swollen) tissue or polyps (growth of extra tissue).

The procedure involves using a thin, flexible tube (sigmoidoscope) to see the inside of your lower colon and rectum. The tube is connected to a video monitor and has a tiny video camera at the tip of the tube.

What happens during the procedure?

- When you check in, you’ll be asked for your health insurance card, photo ID and completed family health history form.
- You’ll be taken to a private preparation room where you’ll put on a gown.
- Your nurse will review your medications, allergies and medical history.
- If you’re having sedation, an IV will be placed in your arm to give you medications during your procedure. The medication relaxes you and minimizes any discomfort during your procedure.
  - Many people may not remember all or some of the procedure. You may fall asleep.
  - Talk to your clinician if you have any concerns about taking medication for the procedure.
- Your clinician who’ll do your procedure may meet with you to answer any questions you have before the procedure.
- You’ll then be taken to the procedure room, where you’ll lie on your left side with knees bent during the procedure.
- Your clinician will insert a flexible tube through your rectum into your colon. The tube, which is connected to a video monitor, has a video camera on the tip. Your clinician will then insert gas (carbon dioxide) or air into your colon.
  - The gas or air inflates your colon and provides your clinician with a better view.
  - You may feel pressure, bloating or cramping.
  - Your clinician may decide to collect tissue biopsies (samples) and remove any polyps to send to the laboratory for testing.
  - If your clinician takes a tissue sample, you will not feel it.
  - Your nurse will monitor your blood pressure and oxygen.
- When finished examining your colon, your clinician will remove the flexible tube. The gas or air is then slowly taken out of your colon.
  - The procedure usually takes about 5 to 10 minutes. The amount of time depends on how well your bowel preparation worked, the length of your colon and the number of polyps found and removed.

What happens after the procedure?

- You should be able to eat and return to your regular activities when you return home.
- You may pass gas. This’ll help relieve pressure you may have from any bloating.
- If you had sedation:
  - You’ll be taken to a recovery area and monitored until you leave for home. You’ll spend about 30 minutes in recovery.
  - Your nurse will let you know when it’s OK to drink something.
  - You may feel drowsy and sleep for a short time.
  - Don’t go to work or school, use any machinery or drive the day of your procedure.
  - Return to your regular diet, unless your clinician gives you other instructions.

What are the risks and side effects of flexible sigmoidoscopy?

Complications rarely happen, but may include the following:

- Perforation (a tear) in the colon lining—This may require surgery.
- Bleeding at the biopsy site or where a polyp was removed—This is usually minor and rarely severe enough to need hospitalization and treatment.
- A missed diagnosis—for example, a polyp that wasn’t seen during the procedure.
- Receiving too much sedation or having an allergic reaction to the sedative
- Postcautery syndrome (pain and fever from cautery burn of the colon wall)—This may require hospitalization and treatment.
**When do I call my clinician?**
Call your clinician immediately if you have any of the following symptoms:
- Severe abdominal pain
- Fever and chills
- Rectal bleeding

**How do I get my results?**
Your clinician may discuss the results of the flexible sigmoidoscopy with you before you leave for home.

If you had a biopsy, your clinician will let you know the results by letter in 14 days (or sooner if you need care right away), or online through MyChart if you have an active account.

**What about payment?**
Contact your health insurance provider about your coverage and benefits for a flexible sigmoidoscopy. Coverage and benefits depend on your insurance plan and the reason for the flexible sigmoidoscopy (routine screening or diagnostic to look for a cause related to symptoms).