

Section: Division of Nursing

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\* **PROCEDURE** \*  
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Issue Date: January 25, 1993  
Reviewed Date: March 3, 2005

Approval: \_\_\_\_\_  
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HACKETTSTOWN REGIONAL MEDICAL CENTER

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Reviewed by: Nursing Practice Council

**GENERIC & MINOR PROCEDURE**  
(Scope)

**TITLE: RIGID SIGMOIDOSCOPY, PROCTOSCOPY, ANOSCOPY**

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**PURPOSE:** To outline the nursing methodology in rectal procedures.

**SUPPORTIVE DATA:** These exams provide diagnostic information and may be used for a foreign body removal or to obtain tissue specimens for biopsy or microscopic examination. Anoscopy, Proctoscopy and Sigmoidoscopy are indicated for patients with recent changes in bowel habits, diarrhea, lower abdominal and perineal pain, prolapse on defecation, passage of mucus, blood or pus in the stool, surveillance following rectal surgery or known rectal disease.

**EQUIPMENT LIST:**

1. Draping sheet
2. Exam gloves
3. Lubricant
4. Gauze sponges
5. Large cotton swabs (16")
6. Anoscope, Proctoscope or Rigid Sigmoidoscope Tray
7. Emesis basin with water
8. Wall suction apparatus with tubing
9. Formalin jar with label for specimens and culture swabs or containers
10. Refer to safety procedure
11. Biopsy forceps
12. Snare/cautery equipment available
13. Silver nitrate sticks
14. Mucous trap specimen container

<b>CONTENT:</b>	<b><u>PROCEDURE STEPS:</u></b>	<b><u>KEY POINTS:</u></b>
	1. Assemble all equipment prior to patient's arrival.	Test all equipment prior to use.
	2. Obtain consent from patient and baseline vital signs.	Physician must explain procedure to patient prior to consent.
	3. Verify patient compliance with dietary and bowel preparation.	Contraindications: a. Uncooperative patients b. Cardiac arrhythmias
	4. Accompany patient to Minor Procedures Department if physician plans to do exam there.	Send chart with name plate with the patient to Minor Procedures (if the patient is an inpatient.)
	5. Obtain medical history as outlined on Minor Procedure Nursing Record.	

6. Explain purpose of the test, positioning, length of procedure, sensations patient is likely to experience during and after exam and relaxation techniques. Document teaching and patients comprehension.

7. Administer antibiotic prophylaxis, if ordered.

8. Assist patient into position requested by physician and drape the patient.

Knee-chest or Sims is the usual position for the procedure.

9. Assist physician as needed.

The physician will:

- a. Examine with gloved finger.
- b. Insert the lubricated instrument into the rectum and remove the obturator.
- c. Adjust the light to view the mucosa.
- d. Advance the scope slowly.
- e. Insufflate the bowel with air to permit better visualization.
- f. Remove any fluid or stool which may be present with cotton swab or suction.
- g. Obtain specimen for biopsy and place specimen in bottle of Formalin.
- h. Remove instrument.

10. Monitor vital signs, abdominal distention, pain tolerance and warmth, color and dryness of skin.

11. Observe for patient movement to prevent sudden change in position.

12. Offer patient reassurance during procedure.

13. Label all specimens and send to Pathology and/or Bacteriology.

If stool cultures are to be done, physician will obtain specimen. Specimen should be placed in sterile container and taken to Bacteriology as soon as possible. If stool needed for ova and parasites, physician will obtain specimen and place in containers in ova and parasites kit.

14. After scope has been removed, wipe excess lubricant from around the anus. Level table and return to low position. In order to avoid postural hypotension bring patient to seated position before standing.
15. Obtain post procedure vital signs.
16. Provide written discharge instructions to outpatient.
17. If an inpatient, return patient to room after charting procedure that was done and patient's tolerance of procedure.
  - Observe for signs of bowel perforation:
    - a. Rectal bleeding
    - b. Abdominal pain and distention
    - c. Fever
    - d. Malaise
18. Provide written discharge instructions to outpatient.
19. Wipe off gross debris from outside of scope and send scope and accessory items in paper bag, place in RED bucket obtained from C.S.R. and call them to pick up bucket.

REFERENCE: Gastroenterology A Core Curriculum 3<sup>rd</sup> Edition (Society of Gastroenterology Nurses & Associates, Inc. 2003)