Section:

Division of Nursing

Approval:

Earner RN BSN

* PROCEDURE *

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Hackettstown Regional Medical Center

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Minor Procedure (Scope)

TITLE:

COLONOSCOPY

PURPOSE:

To outline the steps for performing colonoscopy

SUPPORTIVE DATA:

Colonoscopy is an examination of the colon from the rectum to the ileocecal valve with the use of a colonscope. Abnormalities of the bowel wall such as bleeding sites, polyps, inflammation, or tumors can be observed during insertion and withdrawal of the colonscope. Therapeutically, it allows for biopsies, excision of polyps, dilation, decompression and fulguration of bleeding sites

EQUIPMENT LIST:

- 1. Refer to safety procedure
- Colonscope 2.
- 3. Light source with H₂O bottle
- 4. Monitor for cardiac, B/P, oximeter, P&R evaluation - cycle time of every five minutes
- 5. $4 \times 4's - 10$
- Chux 3 6.
- Gloves for MD and nurses 7.
- Barrier gowns for MD and nurses
- Emesis basin with H₂O for testing scope and rinsing after 9.
- 10. Lubricant 1-2 oz. Tube
- 11. Suction canister
- 12. Suction tubing
- 13. Sterile H₂O bottles X 2 with appropriate tubing
- 14. O₂ nasal cannula
- 15. ERBE/ERBEAPC/Valley Lab
- 16. Have available snares, biopsy forceps, cautery probe, interjected
- 17. Formalin containers
- 18. Simethicone diluted as for irrigation as needed.
- 19. Enzyme to clean scope immediately post procedure

CONTENT:

PROCEDURE STEPS:

Pre-Procedure Assessment/Care

- 1. Obtain consent from patient
- Verify, if outpatient, that the patient has someone to drive him home.
- Obtain brief history from patient as outlined 3. on minor procedures nursing record (current medications, any medical problems, allergies, NPO status, compliance with bowel preparation, etc.) and obtain baseline vital signs.
- Inform MD if patient is on any anticoagulants, aspirin or nonsteroidal antiinflammatory products. Report abnormal lab results if ordered...
- Start an intravenous line as ordered.
- Administer antibiotic prophylaxis if ordered.
- Explain purpose of procedure, position patient will be in, sedation the patient will receive, effects, relaxation methods and monitoring to be used, estimated length of procedure and sensations the patient may experience during and after the exam.

KEY POINTS:

Contraindications:

- Fulminate colitis
- Possible existing perforation 2.
- Acute, severe diverticulitis 3.
- 4. Presence of barium or inadequate bowel preparation
- 5. Coagulopathy
- 6. Inability of patient to cooperate or physically tolerate the procedure
- Massive colonic bleeding
- Unstable cardiac myopathy

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- 8. Test the colonoscope by checking air, water and suction functions.
- 9. Apply automatic monitor for vital signs, oxygen saturation level and ECG.
- 10. Position patient on left side with knees bent and right knee up toward chest. Place grounding pad on appropriate site if cautery is used.

B. Responsibilities During Procedure

- 1. Assist MD with medication administration
- 2. Monitor vs. color warmth and dryness of skin, abdominal distention, level of consciousness and pain tolerance.
- Observe for vagal response.
- Notify the physician if abdomen becomes excessively distended secondary to air insufflation.
- Provide emotional support to the patient.
- Reposition patient as requested by MD and apply pressure to areas of the abdomen as requested by the MD for ease in passing the colonoscope. Inform physician of the location of the light.
- 7. Provide nursing measures such as back rubbing, deep breathing exercises, etc., to help patient cooperate more fully.
- One nurse assists physician with any therapeutic procedures deemed necessary
- Properly handle and label all specimens obtained.
- 10. Monitor patient per Moderate Sedation Protocol

C. Post Procedure Assessment/Care

- 1. Monitor vital signs per Moderate Sedation Protocol.
- 2. Observe for:
 - a. bleeding
 - b. vomiting
 - changes in vital signs
 - severe or persistent abdominal pain and/or distention
 - abdominal rigidity
- Remove IV line prior to discharge
- Give written discharge instructions for outpatient/verbal report to nurse in charge of inpatient's care.
- Be sure outpatients have relative/responsible party sign discharge instructions and take them home.

Reference: MANUAL OF GASTROINTESTINAL PROCEDURES, Fifth Edition; copyright 2004; Society of Gastroenterology Nurses and Associates, Inc.