

ABOUT COLONOSCOPY

THE FRIST CLINIC MEDICAL GROUP - GASTROENTEROLOGY

After careful medical assessment, your doctor has recommended that you have a colonoscopy. A colonoscopy usually lasts 15-60 minutes. During colonoscopy, a thin, flexible fiberoptic tube (colonoscope) is passed through the rectum into the lower intestinal tract. The colonoscope is connected to a video display monitor. This procedure allows the doctor to examine and view the lining of the rectum and the large intestine (colon) and to identify any abnormalities.

In most cases, you will be given a prescription for a laxative to take at home prior to the procedure. This will cleanse out your colon so that it can be examined. A clean colon is imperative for an accurate examination. You will need to have a clear liquid diet approximately 12-24 hours prior to the colonoscopy. Water, ginger ale, or apple juice is permissible. Check with your doctor for your specific instructions.

Before the procedure, a needle for intravenous (IV) medicines will be placed in your arm vein. Medicine will be injected through this needle to make you sleepy and relaxed. Your blood pressure, heart rate, and breathing rate will be monitored during and after the test.

As you lie on your left side with a drape covering you, a lubricated flexible colonoscope is carefully advanced through the colon and the doctor will examine the bowel lining thoroughly. You may feel some cramping or gas due to the air, which the doctor is putting into the colon. You may be asked to change positions during the procedure to assist in passage of the colonoscope.

Often a biopsy specimen (tiny bit of tissue) is taken for microscopic examination. If you have a polyp, it may be removed by

electrocautery through the colonoscope for laboratory examination. You will not feel any sensation or discomfort if/when the biopsy is performed or a polyp is removed.

Many people do not recall any of the procedure because of the effect of the medicine. After the procedure, you will probably feel drowsy and may sleep for up to an hour. You may feel some bloating from the air inserted during the procedure. You will feel more comfortable if you expel this air.

Before you leave, the doctor will discuss the findings with you. The GI nurse or technician will give you instructions to follow when you get home. Since you will be sedated, you will need a driver to get you home.

➤ **Why may I need a colonoscopy?**

Colonoscopy is proven to be the best way to completely view the entire colon and to diagnose colon and rectum problems. Your physician may recommend a colonoscopy if: you have a change in bowel habits, bleeding, unexplained abdominal symptoms, colitis, or you test positive for blood in the stool. Colonoscopy also helps physicians monitor patients with a past history of colon polyps or cancer and can help physicians verify findings of polyps or tumors located with a barium enema exam or after sigmoidoscopy.

➤ **At which hospital will the colonoscopy be performed?**

Frist Clinic gastroenterologists generally perform colonoscopy at Centennial Medical Center on an outpatient basis. Some insurers require that Baptist Hospital or another facility be utilized. Please let your physician know if you are aware of such a requirement.

- **Who will perform my colonoscopy?**
Your colonoscopy will be performed by either Thomas J. Lewis, M.D., Saeed Fakhruddin, M.D., or Wallace McGrew, M.D. Drs. Lewis, Fakhruddin and McGrew are board certified in gastroenterology and have successfully performed thousands of colonoscopies.
- **What insurance considerations are there?** Aside from ensuring that an in-network facility is utilized for the procedure, your physician's office will generally be required to obtain a preauthorization from the insurance company so that the procedure will qualify for third-party reimbursement. It is the patient's right and responsibility to confirm that this important administrative step has taken place prior to the procedure. Also, it is a good idea to make sure you are familiar with your insurance company's deductible, copay, or coinsurance requirements for this and all medical services.
- **How is a colonoscopy scheduled?**
Once your physician has decided to recommend a colonoscopy, he/she will notify the Gastroenterology nursing staff who, in turn, will contact you to identify a convenient time and date to schedule the procedure. The nurse will answer any questions you have at that time. We will then contact both the insurance company to obtain a preauthorization as well as the hospital to schedule the procedure. You will be contacted to confirm the date and time and will receive information from the hospital regarding the admission processes, etc.
- **What happens after the procedure?**
Your physician will formally contact you regarding the results and findings of your colonoscopy and, if needed, of any recommended course of action going forward.

- **What are the benefits of colonoscopy?** Colonoscopy has been shown to be more accurate than any of the other forms of colon diagnostic procedures. It allows your physician to thoroughly examine the entire colon, viewing the most distal portion. Colonoscopies may be used to examine the colon, perform biopsies, or remove polyps. With colonoscopy, it is possible to simultaneously detect and remove most polyps without abdominal surgery. Most colonoscopies are done on an outpatient basis with minimal inconvenience and discomfort.
- **What are Medicare's reimbursement guidelines?** Starting July 1, 2001, Medicare will reimburse beneficiaries for screening colonoscopy. Patients that are considered high risk (e.g. family history of colon cancer) may be screened no more than once every two years. Patients who are considered average risk may be screened no more than once every 10 years. Non-screening colonoscopy (a published Medicare-approved medical condition clearly necessitates and justifies the procedure) is virtually always covered.

The Frist Clinic Gastroenterology Medical Staff:

Thomas J. Lewis, Jr., M.D. is board certified in both Gastroenterology and Internal Medicine. He performed his fellowship training in Gastroenterology at Vanderbilt University. Dr. Lewis has been practicing since 1995.

A. Saeed Fakhruddin, M.D. is board certified in both Gastroenterology and Internal Medicine. He performed his fellowship training in Gastroenterology at the University of Tennessee – Memphis. Dr. Fakhruddin has been practicing since 1996.

Wallace R. G. McGrew, M.D. is board certified in both Gastroenterology and Internal Medicine. He performed his fellowship training in Gastroenterology at Vanderbilt University. Dr. McGrew has been practicing since 1984.