



# Quinte Health Diagnostic Imaging Department

## CT Colonography Bowel Preparation

### Bowel Preparation Instructions:

Bowel preparation is essential for the CT colonography (Virtual Colonoscopy) to be successful and accurate. If the bowel has not been cleaned properly, there is a chance the test will have to be cancelled and rescheduled; therefore **please follow all instructions carefully**. If you have any questions, please contact the Diagnostic Imaging at (613) - 969-7400 ext 2860 Monday to Friday 8:00 a.m. to 4:00 p.m.

### Laxative and Oral Contrast Agents:

Laxative and oral contrast agents are both required for this examination; the laxative is necessary to clean the bowel to ensure accurate images and the oral contrast is necessary to ensure any stool remaining in the bowel can be distinguished from potential polyps when analyzing the images.

**\*\*Important: If you have any medical conditions such as insulin dependent diabetes, heart or kidney disease, please contact your family physician to determine whether the laxative recommended below is appropriate for you. Your physician may order a different laxative more suitable for your condition. \*\***

1. Laxative: Pico Salax – You will need to purchase this laxative from your pharmacy. It is important that you follow the timetable for ingesting the Pico Salax **provided below (do not follow the package instructions)**. For the laxative to be effective you must drink plenty of fluids (see liquid diet list below).
2. Oral Contrast Agent: You are required to pick up a Virtual Colonoscopy prep package at the Diagnostic Imaging Department at Belleville General Hospital. You will receive the following:
  - a. Instruction sheet
  - b. 2 bottles of Redi-Cat
  - c. 2 bottles of Gastrografin. (Mix and drink according to instructions Step 5)

### Exam Registration:

Please ensure you arrive in the Diagnostic Imaging Registration desk 30 minutes prior to your appointment time.

### Exam Report:

Please note that your report will be sent directly to your referring physician approximately 2 weeks after your exam.

### Clear liquid diet list

Please do not consume	red, orange, blue, or purple liquids, Jell-o, popsicles, etc.
<b>Avoid</b>	- Alcoholic beverages - Caffeinated beverages/food (includes coffee, tea and caffeinated soft drinks such as cola as well as chocolate candies, popsicles, etc.)
Beverages	- Lots of water, decaffeinated tea, coffee and carbonated drinks (sprite, 7-up, ginger ale), Gatorade or Kool Aid. - Fruit juices without pulp (apple, white grape, lemonade, etc.) <b>Please no orange, tomato, grapefruit or prune juice.</b>
Soups	- Low sodium clear strained broth soup (no pieces of meats or chicken)
Desserts	- Hard candies - Popsicles ( <b>no sherbets or fruit bars</b> ) - Jello (lemon, lime, white grape. <b>No fruit pieces or toppings</b> )

### 1 Day Before CT Colonography

Midnight	No solid food after midnight.
Step 1: <b>8:30 a.m.</b>	- Take 1st Package of Pico Salax - Follow liquid diet & drink 250 ml (8oz) Readi- Cat - Begin to drink 1 glass of water, fruit juice, Ginger ale or Gatorade every hour until 8 p.m.
Step 2: <b>Lunch Time</b>	- Continue with liquid diet & drink 250 ml (8oz) Readi- Cat
Step 3: <b>2:30 p.m.</b>	- Take 2nd Package of Pico Salax
Step 4: <b>Dinner Time</b>	- Continue liquid diet & drink 250 ml (8oz) Readi- Cat - Discard remaining Readi-Cat
Step 5: <b>Bedtime</b>	- 1 hour before sleep – take the Gastrografin/juice mixture (stir before drinking) (mix 2 bottles of Gastrografin with 250ml of fruit juice, Gatorade or ginger ale)

**Note: The times can vary but you must wait 3 hours between each step**

### Day of CT Colonography

Liquids only. (You may take your medication as per normal)
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## **FAQ:**

### **How is the procedure performed?**

The technologist begins by positioning you on the CT examination table, usually lying flat on your stomach or back. Straps and pillows may be used to help you maintain the correct position and reduce movement during the exam.

A very small, flexible tube will be passed two inches into the rectum to allow carbon dioxide gas to be gently pumped into the colon. The purpose of the gas is to distend the colon as much as possible to eliminate any folds or wrinkles that might obscure polyps from the physician's view.

The CT table will then move through the scanner. At this point patients are asked to hold their breath for about 15 seconds or less before turning over and lying on their back or side for a second pass through the scanner. Once the scan is done, the tube is removed.

The entire examination is usually completed within 15 minutes. The test is easily tolerated with the vast majority of patients experiencing no or at most mild discomfort.

### **What will I experience during and after the procedure?**

Patients who have CT colonography often feel fullness when the colon is inflated during the exam, as if they need to pass gas. Significant pain is uncommon, occurring in fewer than 5 % of patients. A muscle-relaxing drug is often injected intravenously. The scanning procedure itself causes no pain or other symptoms.

You will be alone in the exam room during the CT scan, unless there are special circumstances. The technologist will always be able to see, hear and speak with you through a built-in intercom system.

No sedatives are necessary and after the test you can return to your normal activities and diet.

### **How closely do I have to follow the laxative bowel preparation instructions?**

Bowel prep instructions should be followed as close as possible as it is critical to ensuring accurate results. The laxative provides for good bowel cleansing, while the oral contrast provides for residual stool tagging. If not properly cleansed and tagged, residual stool can be mistaken for lesions or could mask a polyp causing them to go unnoticed by the doctor.

The primary goal of the test is to detect small precancerous lesions. Early detection translates to improved survival. Effective bowel screening increases the chances of detecting colorectal cancer early and reduces death rates related to colorectal cancer.