

THE BELFAST TRUST CT COLONOSCOPY (VIRTUAL) SERVICE YOUR GUIDE TO CT COLONOSCOPY USING PLENVU BOWEL PREPARATION

Your consultant has advised you have a Computed Tomography (CT) Colonoscopy to help find the cause of your symptoms or as part of a routine screening programme to detect (find) disease or abnormalities (unusual areas) at an early stage in people with no symptoms.

This leaflet tells you about CT colonoscopy and will help you understand what will happen before, during and after your examination.

This leaflet explains how the test is done, the risks involved and bowel cleansing required. It is very important you read all the information when you receive this appointment.

Important: The preparation included is for CT colonoscopy only and should not be taken for any other Imaging/ Radiology procedure.

The medicine contained within this pack has been prescribed for you only. Do not pass it on to others. Please keep out of reach of children.

You will note a tick box at the end of each section. Please tick when you have read each section. This will help ensure you have read all of this information pack.

SECTION 1

What if I cannot keep my appointment for a CT Colonoscopy examination?

Once you have received your appointment letter, you must contact the Imaging Centralised Appointments Office on **02896158900** to confirm that you will be able to attend your scheduled appointment or alternatively rearrange your appointment.

Letting us know in advance that you are unable to or no longer wish to attend allows us to offer your appointment to another patient.

How long will my appointment take, and can I drive?

The procedure takes approximately 20-30 minutes, and you will be asked to remain in the department for at least 45 minutes after your procedure to make sure any possible side-effects have worn off. You can drive to and from your procedure.

PREGNANCY: If there is any possibility you may be pregnant, please notify the CT department immediately. CT Imaging during pregnancy is not recommended unless it is an emergency. If you take oral contraceptives, the diarrhoea caused by the bowel preparation may reduce their effectiveness. Continue taking oral contraceptives but use other precautions for the remainder of your cycle.

SECTION 2

What is a CT Colonoscopy examination?

A CT colonoscopy is an examination of the large bowel. The examination uses a CT scanner to produce two dimensional images of the whole of the large bowel.

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During a CT colonoscopy scan, carbon dioxide is used to distend the large bowel via a thin flexible tube placed in your back passage. Once your large bowel is sufficiently distended with carbon dioxide two CT scans will then be carried out. You may be asked to lie on either your back and front or on both sides for your CT scan. To ensure adequate distension of your large bowel a third scan may be required. The radiographer will inform you if a third scan is required.

The procedure is not usually painful but may be slightly uncomfortable. Patients may experience a feeling of fullness and bloating which is due to the carbon dioxide passed into the bowel. Any feelings of bloating or abdominal discomfort will quickly pass once the examination has been completed.

Are there alternatives to a CT Colonoscopy examination?

An alternative is an Endoscopy procedure known as colonoscopy, where a thin tube with a camera on the end (colonoscope) is passed into the back passage and moved up and around the large bowel. It remains as a standard test for the large bowel. It is more invasive than CT colonoscopy and usually requires sedation. However, it does allow tissue biopsy or polyp removal if needed. In Belfast City Hospital, CT colonoscopy may be used to give additional information after an incomplete endoscopy.

Is there any preparation for my CT Colonoscopy examination?

To give us a clear view of the large bowel lining, your large bowel must be prepared before the examination. This involves cleansing the large bowel of stool (faeces) using a strong laxative known as Plenvu. You will also be required to drink a small bottle of Omnipaque the night before your procedure which will highlight any retained faecal material within the large bowel. .

SECTION 3

What about my medication?

If you are taking an oral medicine, do not take it 1 hour either side of drinking dose one and dose two of Plenvu. Any medicines taken orally (by mouth) may not be absorbed properly and may not have their desired effect if taken within 1 hour of taking Plenvu. If you would like further advice on when to take your medicines please speak to your doctor.

Do not take iron tablets 5 days before your examination and stool bulking medication such as Fybogel, Regulan, Loperamide, Lomitol, Codeine Phosphate.

Do not take Flozins such as Forxiga, Invokana, Jardiance or Steglatro for 48 hours before your examination.

Information for Diabetic Patients

It is important you contact your diabetic nurse or practise nurse or GP for information regarding your diabetic medication before you start taking bowel preparation.

If your diabetes is controlled and you are able to monitor your own blood sugar then most people can continue with the diet as instructed. Taking laxatives can reduce your blood sugar so you should check your blood sugar regularly while you are taking your bowel preparation and before you leave

your house to have your procedure. As the preparation section states, you are allowed to drink clear fluids at any time. This includes lucozade, fizzy drinks and fruit juice (no bits).

Ideally you will be given an early morning appointment.

Bring your insulin/tablets with you and something to eat for after the procedure.

Information for patients who have a colostomy, ileostomy or Jejunostomy (stoma)

Please contact the radiology department immediately. You may require an alternative test that will have different preparation instructions to this one.

Information for patients with Addisons Disease

If you have Addisons disease please contact the radiology department immediately. You may require different preparation instructions to this one.

SECTION 4

What is Plenvu and what is it used for?

It is a medication designed to cleanse your bowel prior to your planned CT colonoscopy procedure. It does this by causing you to have diarrhoea. It will cause frequent liquid bowel movements. You will have to go to the toilet several times while you take your bowel preparation. A clean bowel will allow a clear view of the inner lining of your colon, which is important for accurate diagnosis and treatment.

Do not take any solid food from when you start to take Plenvu until after the examination.

When taking Plenvu you should continue to take plenty of fluids. The fluid content of Plenvu does not replace your regular fluid intake.

What is Omnipaque and what is it used for?

Omnipaque is a 'contrast medium' that contains iodine which is commonly used in the Radiology department. It is used to enhance the information obtained on your CT scan.

Omnipaque can be administered using different methods. It can be taken orally.

If you develop any of below symptoms after drinking the omnipaque please discontinue use and attend your local emergency department immediately and bring the bottle of omnipaque with you:

- Difficulty in breathing or tightness or pain in chest.
- Skin rash, itchy spots, red/itchy eyes.
- Swelling of your face.

It is common after drinking omnipaque that you may feel sick (nausea). If this becomes serious please attend your local emergency department immediately and bring the bottle of omnipaque with you.

SECTION 5

What happens during a CT Colonoscopy examination?

The radiographer will explain the test and answer any questions. Please let them know if you have had any problems with your bowel preparation. We will ask you to undress in a cubicle. There is a cotton gown to wear. You may wish to bring a dressing gown with you.

You may have a cannula (a small plastic tube) inserted into one of the veins in your arm.

We will ask you to lie down on the scanner table on your right side. The radiographer will pass a short, thin flexible tube into your back passage. A muscle relaxant (Buscopan) may be injected through the cannula to avoid bowel spasm.

Please note: Buscopan is not a sedative. No sedatives are given for CT Colonoscopy

Carbon dioxide will be gently introduced into your bowel through the tube in your back passage. The carbon dioxide will be absorbed by the body and breathed out through the lungs without any harm to you.

Despite the muscle relaxant, you may still feel some bloating and mild discomfort in your abdomen like 'bad wind'. The radiographer may require you to turn on the CT scanner to assist bowel distension.

When the radiographer is satisfied with the amount of gas in your large bowel, they will position you for your first scan. During the first scan you may be given an iodine-based intravenous contrast (x-ray dye) via the cannula. You may feel a warm sensation during this injection. Each scan will take about 10 to 15 seconds (1 breath hold). Following the first scan the radiographer will position you for your second scan. The radiographer will inform you if a third scan is required.

What happens after my CT Colonoscopy examination?

After the scan has been completed the radiographer will remove the tube from the back passage and you will be able to get off the scan table. The radiographer will direct you to the bathroom if you feel it is required. We ask that you remain in the hospital for forty-five minutes after your scan, just to make sure you are feeling all right. It is normal to pass 'wind' at this time. The radiographer should provide you with an aftercare leaflet.

The radiologist (doctor who reports your CT scan) will send a report of your scan to your referring consultant. The Referrer will be in contact with you an appointment to discuss the results.



SECTION 6

Are there any risks?

Radiation Risk: CT scanners use more radiation than simple x-rays to give the doctor more information. The risk of developing cancer or leukaemia following a CT scan is small. In many situations, the benefit of a CT scan greatly outweighs the risks. However, the radiation doses from CT scans are kept as low as possible in order to minimise any risk. The information obtained from the scan may help with diagnosis or to plan your treatment

Procedural Risk: A CT colonoscopy scan is generally regarded as a very safe test. Problems occur rarely, and if they do, they are similar to those which could happen with other methods of examining the large bowel. These include the following:

- Abdominal discomfort/bloating
- Faint-like' reactions
- Reactions to the injected contrast and/or buscopan
- Damage to the bowel wall (a small tear in the lining of the colon or rectum may occur rarely, in fewer than 1 in 3000 tests).

Medication Risk: As with all medication, a small number of people may be allergic to the contrast injection (x-ray dye) and muscle relaxant Buscopan. Please tell the radiographer if you have any allergies. If you have severe abdominal pains or bleeding from the back passage that is persistent or severe, including blood clots, in the 48 hours after the test, then you should get in touch with your GP straight away. If you need further information, please phone the relevant CT department.

Extravasation Risk: Occasionally if you are having an injection of x-ray dye there is a small risk that the injection can leak out of the vein and under the skin. This is called extravasation. If this does happen, then further advice will be given to you by staff.

Bowel preparation Risk: The risk of taking Plenvu bowel cleansing preparation is that it can cause side effects such as nausea (feeling sick), vomiting, diarrhoea, bloating, abdominal (tummy) pain, sleep disturbance and anal irritation. If you feel unwell taking Plenvu please contact your GP. If your symptoms are severe please attend A&E or call 999 in an emergency.

Pregnancy risk: please refer to section one.

An aftercare leaflet will be given to you following your procedure which will advise what you need to do if you become unwell when you leave the department.

What are the risks of not taking Plenvu?

If you do not take Plenvu correctly, your large bowel will not be cleansed enough to ensure a safe and effective examination, which may mean we need to cancel your procedure.

SECTION 7

Results

Your scan will be interpreted by a Consultant Radiologist and a written report sent to your referring consultant. It is the responsibility of your referring consultant to issue your results. You should receive your results within 4 weeks. If you have any concerns regarding results please contact your referring consultant or referring consultant secretary.

SECTION 8

DIET SHEET

Please follow these instructions and **NOT** the instructions on the box of bowel prep medication that you have been sent.

Please follow these instructions closely to make sure that your large bowel is as empty as possible before the scan. Keeping to this diet will improve the accuracy of this test. You will need to stay close to a toilet the day before the examination at all times as Plenvu is a laxative which can be extremely effective.

TWO DAYS BEFORE YOUR SCAN

YOU CAN EAT LOW FIBRE foods ONLY including:

- Milk, Plain yoghurt, cheese, butter, margarine, honey, cornflakes, puffed rice cereal, eggs, tofu.
- White bread, white pitta, white pasta, white rice
- White fish or chicken: boiled/steamed/grilled.
- Potatoes with skin removed (mashed, boiled).
- Clear soups (with no solid lumps or pureed e.g. sieved chicken noodle) Bovril, Oxo
- Clear jelly, boiled sweets, ice cream, chocolate (no fruit or nut pieces).
- Salt, pepper, sugar & sweeteners.

Have plenty to drink to keep well hydrated: water, tea, coffee, fruit squash and clear fruit juices (e.g apple, grape, cranberry), fizzy drinks,

Suggested meals could include:

Breakfast: White bread/toast with butter and honey
 Boiled or poached egg

Lunch/dinner: Grilled fish or chicken with white rice or boiled potatoes (no skin).
 Scrambled eggs on white toast
 Vanilla ice cream

DO NOT EAT HIGH FIBRE FOODS such as:

- Red meats, pink fish (salmon)
- Fruit, vegetables, salad, mushrooms, sweetcorn
- Nuts, seeds, pips, bran, beans, lentils
- Brown bread, brown rice, brown past
- Pickles & chutneys

THE DAY BEFORE YOUR SCAN

Have a light lunch. (Eat nothing from 2pm until after the procedure but continue to drink clear fluids up to one hour before your CT colonoscopy).

It is important you do not eat after 2pm as this will improve your tolerance to the bowel preparation.

Step by Step Plenvu Instructions:

Step 1. DOSE ONE: At 5pm Pour the contents of Dose 1 sachet into a jug. Add 500mls of water to the powder and stir until the powder is completely dissolved and the solution is clear. Add cordial to taste (**not Blackcurrant**). Drink the 500mls of Plenvu over one hour. This can be sipped slowly through a straw. To aid bowel cleansing and to prevent dehydration **you must follow this with 500mls of water.**

Step 2. DOSE TWO: 8pm Pour the contents of Dose 2 Sachet A and B into a jug and add 500 mls of water. Drink this again over one hour followed by 500 mls of water.

Step 3. At 10pm drink 50mls bottle of omnipaque. This bottle can be opened by screwing the top off. **Please note on this bottle it states, 'solution for injection' but this can be taken orally,** however, **do not** drink this solution if you have had an allergic reaction to iodine- based contrast before.

DO NOT eat until after procedure has been performed

HINTS AND TIPS

- To improve tolerance to this preparation, make up dose 1 and dose 2 on the morning you are due to take it and store it in the fridge. This will ensure the solution is cold when you are due to take it. You may need to stir the solution again before drinking it.
- Sip very slowly over 1 hour taking very small sips and using a straw to drink it.
- Stay hydrated with plenty of fluids. As a guide, try to drink about one glass every hour (during waking hours).

THE MORNING OF YOUR SCAN

Keep drinking plenty of water but **DO NOT EAT** any solid food.

Diabetic Patients Only: A light breakfast is suggested (one slice of white bread with black tea/coffee).

After the examination: You can eat normally when you have left the department.

Key points to remember:

- Do not eat after 2pm the day before your appointment.
- To prepare Plenvu add each dose to 500mls of water and sip slowly with a straw.
- Drink an additional 500ml of water after each dose of Plenvu.
- If you are taking any oral medicine, do not take it an hour either side of drinking your dose of Plenvu.

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- After you drink Plenvu you will have lots of watery bowel movements, so stay near a toilet because you may need to use it urgently.

If you suffer from any of the following when taking the bowel cleansing preparation stop taking the preparation and seek emergency medical help:

- Difficulty breathing
- Swelling of your face, lips, tongue or throat.
- Hives (a raised itchy rash).

Please note: we do not have any childcare facilities within the department. Children will **not** be permitted into the examination room. Please remember not to bring valuables into the hospital.

SECTION 9

TIMELINE CHECKLIST

ON RECEIPT OF YOUR APPOINTMENT LETTER AND IF YOU ARE DIABETIC Confirm your appointment on **02896158900**
 If you are diabetic, contact your diabetic nurse specialist or GP who can advise how to manage diabetic medication.

FIVE DAYS BEFORE PROCEDURE Stop taking all iron medications but continue other medications.

TWO BEFORE YOUR PROCEDURE Adhere to low fibre foods (listed within the information pack)

DAY BEFORE PROCEDURE:

BREAKFAST - Continue to adhere to low fibre foods.

- **Tip:** make up dose 1 and dose 2 of Plenvu. Refrigerate until you are due to take each dose.

LUNCH - Continue to adhere to the low fibre foods. Finish lunch no later than 2pm.

5-6 PM - Take Dose 1 of Plenvu. (Stir solution). Sip slowly through a straw.

6-6.30 PM - Drink 500mls of water slowly.

8-9 PM - Take Dose 2 of Plenvu. (Stir solution). Sip slowly through a straw.

9-9.30 PM - Drink 500mls of water slowly.

10PM – Drink 50mls of omnipaque solution. Dilute with 50mls of water. You can add diluted juice to flavour.

THE MORNING OF YOUR PROCEDURE:

BREAKFAST - Continue to fast. Continue to drink water until one hour before your procedure. If you are diabetic a light breakfast is suggested (one slice of white bread with black tea/coffee).

SECTION 10

Asking for your consent

The radiographer/radiologist will ask you if you are happy for the scan to go ahead. This is called verbal consent. If you do not wish to have the scan or are undecided, please tell the radiographer/radiologist. If you wish to have a chaperone present during your scan, please alert a health care professional before the scan begins.

Students/trainees may be present during the examination but only with your verbal consent. Please remember that you can ask the radiographer/radiologist any questions you have at any time before, during or after your scan.

Image sharing

Your images will be electronically stored on the hospital picture archiving system. This data can be accessed throughout the Belfast Health and Social Care Trust and other doctors and health care professionals who are directly involved in your care. The ability to share images and radiological reports will improve the safety and quality of your care by ensuring that the right information is available in the right place at the right time.

In order to improve the medical services we provide we may also use your data as anonymously as possible for internal audit and medical education. If you would prefer that your data is not used for these purposes, please inform a member of staff when you attend for your examination.

If your data is to be used for research, then a separate consent process will be used. You will be asked for your consent, should this be the case

Contact us

If you have any queries, we will be happy to answer any questions on the day of your scan or you can call us on the numbers below and ask to speak to a radiographer (Monday to Friday 9am to 4:30pm), citing your H&C number that will appear on your appointment letter.

**Please contact the CT Department where your appointment is scheduled:
 Belfast City Hospital 02895042655, 02895041120 or 02895044610.**

Feedback

We hope you found the information in this leaflet helpful. If it did not tell you what you needed to know or you would like to provide any feedback on your experience please let us know so that we can make any necessary improvements.

You can provide feedback on your experience:

Telephone: **028 9504 8000** (Monday-Friday: 9am-4pm)

Textphone: **18001 028 950 48000**

By email: compliments@belfasttrust.hscni.net

By email: complaints@belfasttrust.hscni.net

By completing an online form: <http://www.belfasttrust.hscni.net/contact/FeedbackForm.htm>



Care Opinion

We invite you to share your experience by clicking the following link:

<https://www.careopinion.org.uk/>

or by scanning the following QR code on your smartphone or tablet:



Language and accessible support services -

Deaf/Hard of Hearing

If a Sign Language interpreter is required, please either telephone **028 9615 8900** via the Sign Video remote interpreting service (<https://signvideo.co.uk/deaf-community/>) or email us at

MPHAdminFOH@belfasttrust.hscni.net and we will arrange one for your appointment. Please have your H&C number ready when calling or include it in your email. This can be found at the top right corner of any Health and Social Care letters you may have received.

If you are unable to hear on the phone and need to contact us with regards to your appointment you can email us at MPHAdminFOH@belfasttrust.hscni.net.

Do you need this information in another format or language?

The Trust has access to interpreting and translation services. If you need this information in another language or format, including Braille, large print, CD, audio tape please contact the telephone number **028 9615 8900** or e-mail address MPHAdminFOH@belfasttrust.hscni.net, and we will do our best to meet your needs.

Polish - Czy potrzebujesz tych informacji w innym formacie lub języku?

Fundusz ma dostęp do usług w zakresie tłumaczeń ustnych i pisemnych. Jeśli potrzebujesz tych informacji w innym języku lub formacie, w tym w piśmie Braille'a, dużym druku, na płycie CD, kasecie magnetofonowej, skontaktuj się z nami pod numerem telefonu lub adresem e-mail **028 9615 8900 / MPHAdminFOH@belfasttrust.hscni.net**, a my dołożymy wszelkich starań, aby spełnić Twoje potrzeby.

Arabic - هل تحتاج هذه المعلومات بصيغة أو بلغة أخرى؟

1 تستطيع الجمعية توفير خدمات الترجمة الفورية والتحريرية. إذا احتجت هذه المعلومات بلغة أو بصيغة أخرى، بما فيها صيغة برايل Braille أو صيغة بالأحرف الكبيرة، أو في سي دي CD أو في شريط مسموع، يُرجى الاتصال برقم التليفون أو عبر البريد الإلكتروني **028 9615 8900 / MPHAdminFOH@belfasttrust.hscni.net**، وسوف نبذل قصارى جهدنا في تلبية احتياجاتك.

Lithuanian - Ar jums reikia šios informacijos kitu formatu ar kalba?

Tarnyba gali suteikti vertimo žodžiu ir raštu paslaugas. Jei reikia šios informacijos kita kalba ar formatu, įskaitant Brailio raštą, didelį šriftą, kompaktinį diską, garso įrašą, skambinkite telefonu arba susisiekite el. paštu **MPHAdminFOH@belfasttrust.hscni.net / 028 9615 8900** ir mes padarysime viską, kad patenkintume jūsų poreikius.

Romanian - Aveți nevoie de aceste informații într-un alt format sau altă limbă?

Trustul are acces la servicii de interpretariat și traducere. Dacă aveți nevoie de aceste informații într-o altă limbă sau într-un alt format, inclusiv Braille, tipărire cu caractere de mari dimensiuni, CD, înregistrare audio, atunci vă rugăm să ne contactați la numărul de telefon sau la adresa de e-mail **MPHAdminFOH@belfasttrust.hscni.net / 028 9615 8900**, iar noi vom face tot posibilul pentru satisfacerea necesităților dumneavoastră.

Tetum - Ita presiza atu informasaun ida ne'e iha formatu ka lian seluk ka lae?

Fidusiáriu ida ne'e iha asesu ba servisu durubasa no tradusaun. Se Ita presiza informasaun ida ne'e iha lian ka formatu seluk, inklui letra Braile, letra boot, CD, kasete audio, entaun favór telefone número ka enderesu e-mail **MPHAdminFOH@belfasttrust.hscni.net / 028 9615 8900**, no ami sei halo esforsu tomak atu kumpre Ita-nia nesesidade sira.