

**Taiwan Adventist Hospital**

Name of Patient: \_\_\_\_\_ Birthday: \_\_\_DD\_\_\_MM\_\_\_YY Medical Record No#: \_\_\_\_\_

**Informed Consent for Lower Gastrointestinal (GI) Tract Endoscopy**

I (patient or patient's family) \_\_\_\_\_, by signing this informed consent, acknowledge that the doctor has discussed and explained to me the examination (or medical treatment) purpose, benefits, procedure and potential risks, and I fully understand the explanation from the doctor and the written description on this informed consent. I sincerely believe that the medical personnel of Taiwan Adventist Hospital will conduct the procedure and medical treatment to the best of their abilities in case of any accidents occur.

- Agree  Disagree: To undergo the necessary special procedure or treatment, including biopsy, polyps excision, stanch bleeding, etc., due to necessary conditions that may occur during the examination.
- Agree  Disagree: To pay for the expenses for self-paid consumable material or treatment due to necessary conditions that may occur during the endoscopy examination without dispute.

※ **Please check off the following boxes to let us know more about your condition.**

- Significant medical history in the past:  Glaucoma  Prostatic Hypertrophy  
 Hypertension  Diabetes  Other disease: (please specify) \_\_\_\_\_
- Drug allergy: name of the drug: \_\_\_\_\_
- Heart disease (including arrhythmia)  Artificial Valve  Artificial Vessel  
 Pacemaker
- Special drug intake  Anticoagulant  Aspirin  Ginkgo  Others: please specify: \_\_\_\_\_
- Pregnant  Yes  No

※ **Bowel movement after cathartic intake (please check one):**

- The movements are a transparent, light yellow liquid, and contain no fecal matter
- The movements are yellow, turbid, and contain fecal matter
- No movement

I do hereby consent to undergo the above procedure / treatment.

**Signature of the Patient/Patient's Family:** \_\_\_\_\_

**Relationship to the Patient:** \_\_\_\_\_

Signature of the Witness (medical personnel of the hospital/patient's family): \_\_\_\_\_

\_\_\_\_\_DD\_\_\_MM\_\_\_YY

**Supplement from the doctor:**

Demonstrative doctor (sign): \_\_\_\_\_ Date: \_\_\_\_\_DD\_\_\_MM\_\_\_YY

This informed consent pertains to the purpose, potential risks and procedure regarding the examination (or medical treatment) you are scheduled to undergo. Please read the contents of this document carefully. You may wish to discuss this information with

your doctor. If you still have any questions about the examination (or medical treatment), please discuss these with your doctor before signing this consent.

**Examination (or Medical Treatment):**

**Examination Scope:** The “Lower Gastrointestinal Tract” here means intestines. In general, there are two types of endoscope examinations:

1. Sigmoidoscopy: The procedure covers the area from the anus to the sigmoid, which covers a total of about 60cm in length.
2. Colonoscopy: The procedure covers the area from the anus to the caecum.

The duration of the examination is between 10-60 minutes, depending upon each patient’s condition. During the examination, your doctor may suggest you to take necessary procedures or treatment (such as biopsy, polyps excision, stanch bleeding, etc.). Normally these treatments will not cause pain. However, if you have doubts about the procedure or treatment, please consult your doctor before undergoing the examination.

**Pre-Exam Preparation:**

1. Please take low fiber food one to two days before the endoscopy examination. On the examination day, patient should take two bags of Klean-prep that mixed with 2,000cc water.
2. As an alternative, patient may take 2 bottles (45CC/bottle) of Phosphosoda infused to 120cc each, one bottle per dose.
3. Patients undergoing Sigmoidoscopy should start taking light and low fiber food one to two days before the examination. Take 2-3 tablets of Dulcolax at 9:00PM before the examination day and then drink as much water as possible. Take one Dulcolax suppository in the morning of examination day and drink much water as possible.

**Examination Procedure:**

1. 20mg of Butylzropolamine will be given to reduce intestines peristalsis according to individual condition.
2. Doctor will conduct rectal examination before starting the procedure.
3. The endoscope is an electronic optics procedure that allows the physician to make a direct, inner observation through a video endoscope. The scope is inserted through the anus and then pushed upwards gradually. Therefore, it is normal to feel spasm and abdominal distension during the procedure. For the purposes of better observation and treatment to the lesions, some air will be injected to expand the intestine while pulling back the endoscope. In order to complete the whole procedure smoothly, please cooperate with the medical personnel.

**Examination Benefits:** (Through the examination, you may receive the following benefits. However, the doctor cannot guarantee any of the benefits. You should weigh the benefits and risks of the examination.)

1. The purpose of endoscopy is to examine the possible lesions or bleeding source in the lower gastrointestinal tract that allows for further treatment.
2. Limitation of endoscopy is that the examination is unable to be completed if the intestines are not clear of fecal matter, if there are obstructive lesions, or special intestinal anatomy structure does not allow completion of procedure.

**Examination Risks:** (The following risks have been commonly recognized while some unpredicted risks may not be included here.)

Generally speaking, endoscopy examination for lower gastrointestinal tract is safe. However, a few patients will suffer abdominal distension, abdominal pain or borborygmus (rumbling of the stomach). The most severe condition is intestinal laceration or perforation.

Only very few patients will need to take emergency surgery. Patients currently taking aspirin, analgesic, anticoagulant, insulin or drugs containing iron should inform and consult with doctor to determine whether to stop the intake or to reduce the dosage.

1. Biopsy: This is an examination to identify the nature of the lesions, which utilizes a long thin metal clamp to gather tissue through endoscopy procedure. The possible complication is bleeding or enterobrosia, however, the incident rate is less than 0.1%.
2. Polyps Excision: This procedure is not only for examination purpose but also treatment. The polyps are excised by electrocautery through the endoscope. The possible complication is bleeding or enterobrosia, however, the incident rate is less than 0.2%.

**Alternative Treatment:**

According to individual symptom and indication, patient can choose alternative examination, such as lower gastrointestinal (GI) series.

**Cautions after Examination:**

1. Patients can take food directly after endoscopy examination.
2. Some air will remain in the gastrointestinal tract during the procedure. Some patients will suffer abdominal distension or colic after the examination. The symptoms are normal, however, and will disappear after the air is exhausted.
3. Some patients will suffer sore anus or complication of light bleeding due to nervousness during the procedure which increases the friction between anus and the endoscope. In this case, it is advised to avoid spicy foods, and take only soft food. The symptom should disappear in a day or two.
4. Patients undergoing biopsy or polyps excision should observe the color of stool for the next 2-3 days after the examination as some patients with chronic disease or abnormal coagulation may experience bleeding. Please contact the Emergency Room in case of continuous bleeding.
5. It takes 7-10 days to complete the biopsy report. Patients are requested to return to inpatient clinic for the examination result, or for further treatment.
6. The contact phone number of the Gastrointestinal Center is 02-27718151 ext. 2563.