Information for patients for lower endosonography (internal ultrasound above the anus)

Label

Information protocol submitted by:

Date:

Dear patient

Please read these documents **immediately** upon receiving them. Fill in the questionnaire, if possible date and sign the documents on the day before the examination. If you have any questions, please contact your doctor or specialist (gastroenterologist).

You have been advised to have a procedure known as a **lower endosonography (internal ultrasound above the anus).** Before the examination you'll receive the following:

- an information leaflet
- a questionnaire
- informed consent form

Information leaflet:

On the information leaflet you can find information about the course of the examination as well as its objectives and risks. Please read this leaflet carefully.

If you have further questions about the necessity and urgency of the examination, about alternatives or any risks posed by the examination, please contact your doctor. Most of these questions can be answered by the doctor who registered you for the examination. Specific questions about the examination's technical details or specific problems can be answered by the specialist (gastroenterologist) who will carry out the procedure, if necessary. If you wish to do so, we kindly ask you to contact us or the referring doctor in good time.

Questionnaire:

You are kindly asked to fill out the enclosed questionnaire in full to clarify the bleeding tendency and to answer the questions about medication, intolerances or allergies. If you are taking **anticoagulant medication** for blood thinning (e.g. Sintrom, Marcoumar, Xarelto) or or regularly take **Aspirin**, **Alcacyl**, **Tiatral**, **Plavix**, **Clopidogrel etc.**, please discuss with your doctor in good time (at least 1 week before before the examination) the possibility of stopping the medication. Please bring the questionnaire with you to the examination. You are kindly asked to date and sign the questionnaire <u>one day before the examination</u> if possible. If you have any problems or there are ambiguities in answering the questions, please contact your doctor or us in good time.

Informed consent:

Please read the informed consent form through very carefully. Also date and sign it no later than the day before the examination.

The information leaflet is yours to keep.

The questionnaire and the informed consent will be kept by us in the medical files.







Information sheet for lower endosonography (internal ultrasound above the anus)

Why is a lower endosonography (internal ultrasound above the anus) carried out?

A pathological process was found in your colon/rectum. Endosonography is performed to better define this process and to better assess its extension in depth and to the adjacent structures. Endosonography differs from colonoscopy in that a special device with an ultrasound device at the tip is used to take images of the intestinal wall and surrounding tissue structures. If a tissue sample is taken with a needle (endosonographically controlled fine needle puncture), this is done in the same examination. The sample collection is painless.

What preparations are necessary for a lower endosonography (internal ultrasound above the anus)?

In most cases, an enema is given before the examination to cleanse the rectum. If the lesions to be assessed (diseases of the mucous membrane) are located further up the intestine or punctures through the intestinal wall are planned, the intestine must be cleansed with laxative drugs as for a colonoscopy. In this case, please follow the instructions for colon cleansing exactly.

Ability to drive/ ability to work?

As a rule you will be given no sedation and or pain medication before the examination. Whether you are fit to drive is therefore given after the examination.

If you or your doctor decide on the administration of sleeping and/or pain medication (examination of higher structures, tissue sampling), you should not drive after receiving this medication. Do not come with your own vehicle. Make sure that someone personally accompanies you. After these medications have been administered you are not capable of signing any documents for the next 12 hours. This means that during this time you should not conclude any contracts.

What happens during a a lower endosonography (internal ultrasound above the anus)?

The examination is carried out either with a thin movable "tube", at the tip of which a light source and a camera are attached, or with a rigid "ultrasound rod". At the end of each of these instruments there is a special device with an ultrasonic device. After inserting the instrument into the anus, it is brought to the section of the intestine to be examined, so that an image of the organ wall and neighbouring organs can be obtained. If a tissue sample is taken with a needle (endosonographically controlled fine needle puncture), this is done at the same time. The examination and additional procedures do not cause any pain. During the examination a specially trained nurse is also present in addition to the doctor.

What are the risks associated with a lower endosonography (internal ultrasound above the anus)?

Complications due to a endosonography above the anus are extremely rare. However, despite the greatest care being taken, complications can occur, which can be life-threatening in exceptional cases. Allergic reactions should be mentioned to any medication you might be given. Bleeding and infection are very rare. Rarely, the administration of sleep medication can lead to the impairment of respiratory and cardiac function. In very rare cases, the introduction of the device can lead to an injury of the mucous membrane (even more rarely to a hole in the intestine). If samples are taken with a needle, infection or bleeding outside the intestine may also occur very rarely

What about after the examination?

If <u>abdominal pains</u>, severe pain in the rectum or other disturbances of well-being occur after the lower endosonography (e.g. dizziness, nausea, vomiting) or if there is bleeding from the anus (usually in the form of light red blood), inform your doctor immediately or go to a hospital emergency department.

Questions about the examination?

If you have any further questions about the planned examination, please contact your GP. If you are still unclear, contact the specialist (gastroenterologist) who is carrying out your examination.

You can contact the following doctors if you have any questions or problems:

General practitioner	Tel:
Gastroenterology	Tel:







Questionnaire



yes no

Questions to clarify bleeding tendency:

1. Do you have heavy nosebleeds for no apparent reason?

2. Do your **gums bleed** for no apparent reason (brushing your teeth)?

3. Do you have **"bruises" (Haematomas)** or small bleeds under the skin without obvious injuries?

4. Do you have the impression that you bleed longer after minor injuries (e.g. when shaving)?

5. Women: do you have the impression that you have **prolonged menstrual bleeding** (>7 days) or that you must change tampons or sanitary towels very frequently?

6. Have you had prolonged or heavy bleeding during or after dental treatment?

7. Have you had prolonged or heavy **bleeding during or after surgery** (e.g. tonsillectomy, appendectomy, birth)?

8. Have you received any blood or blood products during surgery?

9. Does anyone **in your family** (Parents, siblings, children, granchildren, uncles, aunts) have a **disease with increased bleeding tendency**?

Questions about medication. allergies. concomitant disease:

 Are you taking anticoagulants for blood thinning (e.g. Sintrom, Marcoumar, Xarelto) or have you been taking Aspirin, Alcacyl, Tiatral, Plavix, Clopidogrel, etc. or flu medication, pain killers or rheumatism medication in the last 7 days? If 'yes', what exactly? 		
2. Do you have an allergy/ hypersensitivity reaction (to medications, latex, local anaesthetics, sticking plasters)? If 'yes', which ones?		
3. Do you suffer from a heart valve defect, heart or lung disease? Do you have an ID card for endocarditis-prophylaxis?		
4. Do you have a heart pacemaker / defibrillator or a metal implant?		
5. Are you aware of a renal dysfunction (renal insufficiency)?		
6. Are you diabetic?		
7. Women: are you pregnant or is there a possibility that you could be pregnant?		
8. Do you have any loose teeth, dentures or a dental disease?		

I. the undersigned. have completed the questionnaire to the best of my knowledge.

Place, date

Patient's name

Patient's signature







for a lower endosonography (internal ultrasound above the anus)

Information protocol submitted by:

Date:

I, the undersigned, have read the information sheet.

I have been informed by the doctor of the reason (Indication) for the lower endosonography (internal ultrasound above the anus). I understand the nature, procedure and risks of a a lower endosonography (internal ultrasound above the anus). My questions have been answered to my satisfaction.

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_		k the appropriate box)		
I agree to having a lower endosonography (internal ultrasound above the anus)			no	
l agree examir	to a sedative and/or pain relief being administered during the nation	yes	no	
	Patient's name	Doctor's	name	
Place, date	Patient's signature Place, date	Doctor's signature		
For pa	tients who cannot give consent themselves:			
	Legal representative or proxy	Doctor's	name	
Place, date	Representative's name Place, date	Doctor's	signature	





