

CAPSULE ENDOSCOPY INSTRUCTIONS

Capsule Endoscopy Description:

Capsule endoscopy (MBS Item number 11820) is a procedure which aids to visualise and diagnose disease in the small bowel. It is non-invasive and requires no sedation. It involves the patient swallowing a Capsule, which then travels through the digestive tract and is then excreted. The capsule is the size of a large vitamin pill and contains a camera. It captures images and records them. As the Capsule passes through, images are captured and sent wirelessly to a recording device, where the images are stored. The patient wears the recording device for a number of hours and can go about their normal duties. After the device is returned to the clinic, the doctor will review the images. The capsule is flushed away and is not returned.

Capsule Endoscopy Intended for patients with:

- Iron deficiency anaemia and suspected obscure gastrointestinal bleeding
- Diagnosis of early or suspected small bowel Crohn's disease
- Detection of benign or malignant small intestinal tumours

Not intended for patients with:

- Known or suspected gastrointestinal tract obstructions, perforations, strictures or fistula
- Who have difficulty swallowing
- Slow or delayed digestion
- Who are pregnant
- With epilepsy, heart disease/pace makers or defibrillators
- Diverticulosis of the small bowel

Side Effects:

Capsule endoscopy is a well-tolerated and safe procedure and side effects are rare. The main risk is capsule retention, which is estimated to occur in fewer than 0.75% of cases. In the rare instances when this occurs further medical treatment may be required. Please discuss with your physician.

It is important to follow the instructions carefully to obtain an accurate result.

If you are on any **iron tablets or supplements** you will need to **stop** them 1 week prior to the procedure. If you are on any **diabetic or other medication** please inform the doctor as you may need to avoid taking it for the day.

Day before the procedure

Lunch: You may have a light meal followed by a clear liquid diet - water, apple juice, jelly, black tea or herbal tea, clear soup. **Avoid any red or purple drinks.**

Fast: For at least 12 hours prior to the procedure however, you must drink as much water as you can until the procedure. This aids in faster flow of the capsule and clearer images.

Day of procedure

Clothing: Wear comfortable loose top. Do not use any lotions or moisturising cream. You will wear the apparatus directly on your skin.

Water: Please continue to drink at least 2 glasses of water per hour until the apparatus is removed.

Food: You may have a light lunch 4 hours after the procedure avoiding seeds, grains, nuts or skins (tomato, apples, grapes etc.) Continue water intake. You may have a normal meal 8 hours after ingesting the capsule.

Equipment: Do not remove or disconnect the equipment for at least 8 hours.

After the procedure

Please return the receiver to the clinic the next day, dispose of the belt.

Confirm that you have excreted the capsule. If unsure or you are experiencing any abdominal pain, nausea or vomiting contact our rooms for advice. You may require an x-ray to confirm excretion of the capsule.

Results

Once Dr Fisher reviews the video recorded, we will contact you to organise a follow up consultation to discuss the results.

CONSENT

I consent to having Capsule Endoscopy. I understand that there are risks associated with any endoscopic examination such as bowel obstruction. An obstruction may require immediate surgery.

I am aware that I should avoid MRI machines during the procedure and until the capsule passes, following the exam. I understand that due to variations in a patient's intestinal motility, the capsule may only image part of the small intestine. It is also possible that due to interference, some images may be lost and this may result in the need to repeat the Capsule procedure. I have had the procedure and it's risks explained to me along with alternatives of diagnosis and treatment and I have been given the opportunity to ask questions concerning the planned examination.