

Colorectal Telephone Assessment Clinic

The following information explains what will happen now that your doctor has referred you to the Specialist Colorectal (bowel) Team.

Why have I been referred?

Your doctor (GP) believes that you may have a problem with your bowels and has referred you to the hospital to have some tests or see a bowel specialist. We know that bowels are an embarrassing subject and no one likes to discuss them, but the specialist bowel team at the hospital, known as the Colorectal Team, are very used to this subject. Try not to feel embarrassed or uncomfortable about discussing your symptoms or asking them questions. This booklet contains some of the questions you might have about your referral for bowel problems. It will also explain what to expect when you are contacted by us and what follows when you attend the hospital for your tests / appointments.

What will happen now?

Your GP has referred you to the Colorectal Telephone Assessment Clinic. You will receive a letter explaining how to arrange your telephone assessment; either online or by contacting the booking centre. Once you have made the booking, you will receive a letter confirming the date and time of this appointment. A Colorectal Specialist will call you at the specified date and time on the telephone number (mobile or landline) that you

supplied when your GP arranged the referral. Please ensure that you are available and free to talk at the time of this phone call. You do not need to attend the hospital. During this telephone call, the specialist will ask you questions about your health, your symptoms and your personal circumstances and advise what test/s you need to have. An appointment will follow for any tests you need. We are unable to give you the date and time of the test over the telephone but we will be able to give you an indication of when this is likely to be.

What test am I likely to need?

Different tests give us different information about you and your bowels. The most common tests performed are:

- Flexible Sigmoidoscopy
- Colonoscopy
- CT Colonography
- CT scan

You can find brief descriptions of these tests in the glossary. It is likely you will have a direct referral for one of these tests. However in some cases we may ask you to come to the out-patient department first to see the Colorectal Specialist. With your appointment letter we will send you detailed information about the test you need, including the risks and benefits.

What if I choose not to have the tests you recommend?

You will have an opportunity to discuss this with the Colorectal Specialist at your telephone

assessment appointment. If following this you do not feel you want to proceed with the recommended tests you should discuss this with your referring GP.

What happens after my investigation or test?

In some cases we will be able to tell you there and then what we think has been causing your symptoms and offer you treatment straight away or refer you on for treatment. For some people we may need to refer you for further tests if we have not found the cause of your symptoms. This could include blood tests or further x-rays, endoscopy tests or scans (see glossary). If attending the x-ray department for your test, the bowel team will contact you either by telephone or letter about the results and any follow-up appointments you require.

Please contact us if you have not heard anything within a few weeks of your test.

Useful tips

It is helpful if you can think about your symptoms carefully before your telephone

Your medical history:

- Have you had any bowel or digestive problems in the past?
- Have you had any operations?
- Do you have any cardiac (heart) past medical history?
- Do you take any blood thinning medicines?
- Are you diabetic? If so do you take tablets or insulin?

It would be helpful if you could have a list of your current medication to hand.

Family medical history:

- Have any of your family members had cancer, especially bowel cancer?
- Have any of your family members had a bowel disorder eg. Crohn's disease or colitis?

Your personal circumstances:

- Do you live alone?
- How mobile are you / do you need help getting around?
- What support do you have around you?

Most people with bowel symptoms do not have cancer but it is important to have your symptoms checked out. The cause is usually something minor like piles or irritable bowel syndrome.

If you have any concerns or questions please ask us, we are here to help you.

Glossary of terms

Colo- refers to the large bowel (known as the Colon)

Colonoscopy – a thin flexible telescope with a camera on the end that is inserted into the bowel via the back passage to examine the whole of the large bowel. We will send you strong laxatives to take the day before this test. A sedative injection is available for this test if required.

Computerised Axial Tomogram (CT scan) - a special scan where a doughnut shaped x-ray machine takes cross sectional x-ray pictures of you while you lie on a table. We will give you a special dye injection and ask you to drink some special contrast fluid when you come in for this test. CT

Colonography – sometimes called virtual colonoscopy. This is a specialised CT scan that uses a CT scanner to produce very detailed pictures of the inside of the colon and rectum. The day before the test you will have to take a drink containing dye or perhaps a strong laxative. Flexible

Sigmoidoscopy - a thin flexible telescope with a camera on the end that is inserted into the bowel via the back passage to examine the lower end of the large bowel. You will need to have an enema on the day of the test. This will be performed in the endoscopy department.

Rectal – refers to the rectum (lowest part of the large bowel nearest the back passage).

COLORECTAL TELEPHONE ASSESSMENT CLINIC COLORECTAL SERVICE

Patient information leaflet

