

Contrast Enema

Child/Young Person (under 18 years) | Informed consent: patient information

A copy of this patient information sheet should be given to the patient or parent/legal guardian/ other person* to read carefully and allow time to ask any questions about the procedure. The patient information sheet should be included in the patient's medical record.

In this information sheet, the word 'you' means the patient unless a parent, legal guardian or other person is providing consent on behalf of the patient, in which case the word 'you' means the parent, legal guardian or other person when used in the context of the person providing consent to the procedure.



1. What is a contrast enema and how will it help me?

A contrast enema is an x-ray procedure that examines the large bowel (colon) using contrast (either barium or iodinated contrast). Both barium and iodinated contrast make your internal organs and structures show up more clearly on the x-ray images. The Radiologist (doctor) will decide if barium or iodinated contrast is required, depending on your medical history.

A contrast enema is done using fluoroscopy. Fluoroscopy is an imaging technique that uses x-rays to create moving images of the inside of your body.

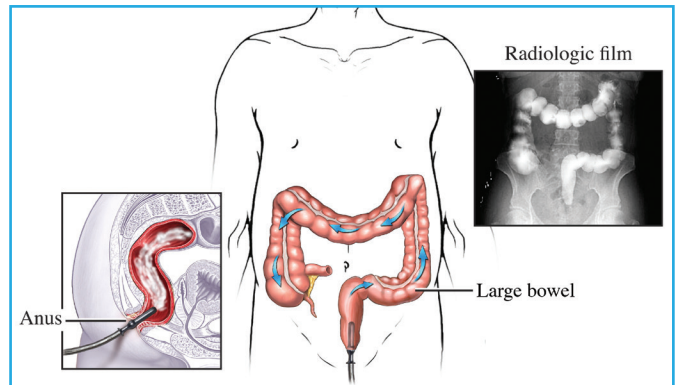


Image: Barium enema (adapted). Illustration Copyright © 2019 Nucleus Medical Media. All rights reserved. www.nucleusmedicalmedia.com

Preparing for the procedure

The Medical Imaging department will give you instructions on how to prepare for the procedure. Your procedure might be delayed if you don't follow all of your preparation requirements.

The bowel must be completely clear for the procedure to be accurate and complete. You will be given a bowel prep kit to ensure the bowel is empty before the procedure.

Please tell the doctor/clinician if you are breastfeeding or pregnant, or suspect that you may be pregnant.

No anaesthetic is required for this procedure.

It is very important that you lie very still for the procedure. Parents and staff may be required to help. Supporting straps, foam pads and light weights may also be used.

For a parent/legal guardian/other person of a patient having a contrast enema

To prepare the patient for this procedure and to ease their concerns, tell them what they can expect to happen during the procedure. This information sheet will assist you with this.

We welcome your help and support in preparing the patient for the procedure and in explaining why it's so important to lie still. At the discretion of the procedure staff a parent/ adult (unless pregnant) may be invited into the procedure room to support the patient.

Other children are not allowed into the procedure room, and they must be supervised at all times by another parent/adult.



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During the procedure

You may be required to change into a hospital gown and remove some of your jewellery.

A small, lubricated tube is gently inserted a short way into the back passage (anus).

A tiny balloon on the end of the tube may be inflated to help hold it in place and help prevent contrast from leaking out.

Contrast is slowly inserted into the bowel through the tube. Sometimes air is added to the bowel through the tube. X-ray images are taken.

Once all the x-ray images have been taken, as much contrast as possible will be drained from the bowel through the tube. The tube will then be removed from your back passage.

You may feel discomfort when the tube is inserted into your back passage and the balloon is inflated. Some mild abdominal cramping during the procedure is normal and you may get a feeling of fullness. Sometimes a muscle relaxing medicine may be given to ease the discomfort of the cramping.



2. What are the risks?

In recommending the procedure, the doctor/clinician believes that the benefits to you from having the procedure exceed the risks involved. There are risks and possible complications associated with the procedure which can occur with all patients – these are set out below. There may also be additional risks and possible complications specific to your condition and circumstances which the doctor/clinician will discuss with you. If you have any further concerns, please ensure that you raise them with the doctor/clinician.

Common risks and complications

- constipation may occur, drinking extra fluids and taking laxatives can help with this
- diarrhoea may occur, which can cause dehydration. Drinking extra fluids can help with this.

Uncommon risks and complications

- the procedure may not be possible due to medical and/or technical reasons.

Rare risks and complications

- perforation (hole) in the bowel. This may require antibiotics and/or surgery
- bleeding from the bowel. This may require other procedures and/or corrective surgery
 - if you experience bleeding from the bowel, there are some diseases and medicines, including complementary medicines, that have the ability to affect blood clotting
- bacteraemia (infection in the blood). This will need antibiotics
- allergic reaction to the contrast. This could result in a rash, hives, itching, nausea, fainting or shortness of breath. Medication may be given to relieve this
- death because of this procedure is very rare.

Risks of radiation

The risks of radiation exposure from this procedure need to be compared to the risks of your condition not being treated. Exposure to radiation may cause a slight increase in the risk of cancer to you over your lifetime. However, the potential risk is small compared to the expected benefit of this procedure¹.

What are the risks of not having a contrast enema?

There may be adverse consequences for your health if you choose not to have the proposed procedure. Please discuss these with the referring doctor/clinician.



3. Are there alternatives?

Making the decision to have a procedure requires you to understand the options available. Please discuss any alternative treatment options with your doctor/clinician.



4. What should I expect after the procedure?

Following the procedure, you will be able to visit the toilet. Your stool may appear white for a few days – this is normal. It is important to drink plenty of water for a few days after the procedure to avoid constipation and dehydration.

You will be able to return to your normal activities after the procedure.

If you feel unwell, or develop any symptoms outlined in the common, uncommon or rare risks and complications, please contact your GP or Emergency department.

The radiologist (doctor) will review the final images after the procedure and send the report to your treating team.

You will receive the results of the examination from your treating team at your next follow-up appointment. Please make an appointment if you do not already have one.



5. Who will be performing the procedure?

Doctors, radiographers, nurses, nuclear medicine technologists, sonographers and medical imaging assistants make up the medical imaging team. All or some of these professionals may be involved in your journey.

A doctor/clinician other than the consultant/specialist may assist with/conduct the clinically appropriate procedure. This could include a doctor/clinician undergoing further training, however all trainees are supervised according to relevant professional guidelines.

If you have any concerns about which doctor/clinician will be performing the procedure, please discuss this with the doctor/clinician.

For the purpose of undertaking professional training in this teaching hospital, a clinical student(s) may observe medical examination(s) or procedure(s) and may also, subject to your consent, assist with/conduct an examination or procedure on a patient.

You are under no obligation to consent to an examination(s) or a procedure(s) being undertaken by a clinical student(s) for training purposes. If you choose not to consent, it will not adversely affect your access, outcome or rights to medical treatment in any way.

For more information on student care, please visit www.health.qld.gov.au/consent/students.



6. Where can I find support or more information?

Hospital care: before, during and after is available on the Queensland Health website www.qld.gov.au/health/services/hospital-care/before-after where you can read about your healthcare rights.

You can also see a list of blood thinning medications at www.health.qld.gov.au/consent/bloodthinner.

Further information about informed consent can be found on the Informed Consent website www.health.qld.gov.au/consent. Additional statewide consent forms and patient information sheets are also available here.

Staff are available to support patients' cultural and spiritual needs. If you would like cultural or spiritual support, please discuss this with your doctor/clinician.

Queensland Health recognises that Aboriginal and Torres Strait Islander patients will experience the best clinical care when their culture is included during shared decision-making.



7. Questions

Please ask the doctor/clinician if you do not understand any aspect of this patient information sheet or if you have any questions about proposed procedure.

If you have further questions prior to your appointment, please contact the Medical Imaging department via the main switchboard of the facility where your procedure is booked.



8. Contact us

In an emergency, call Triple Zero (000).

If it is not an emergency, but you have concerns, contact 13 HEALTH (13 43 25 84), 24 hours a day, 7 days a week.

References:

1. Australian Radiation Protection and Nuclear Safety Agency (ARPANSA). Ionising radiation in our everyday environment, 2021. Available from www.arpansa.gov.au
- * Formal arrangements, such as parenting/custody orders, adoption, or other formally recognised carer/guardianship arrangements. Refer to the Queensland Health 'Guide to Informed Decision-making in Health Care' and local policy and procedures.