

Computed Tomography (CT) Scan with Rectal Contrast

Adult (18 years and over) | Informed consent: patient information

A copy of this patient information sheet should be given to the patient or substitute decision-maker 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 substitute decision-maker is providing consent on behalf of the patient, in which case the word 'you' means the substitute decision-maker when used in the context of the person providing consent to the procedure.



1. What is a Computed Tomography (CT) scan with rectal contrast and how will it help me?

Computed Tomography (CT) scans produce cross sectional images of the body using x-ray radiation.

A CT scan with rectal contrast is a procedure that examines the rectum and some of the large bowel (also known as the colon). Iodinated contrast (also known as x-ray dye) is used to make your bowel show up more clearly on the CT images.

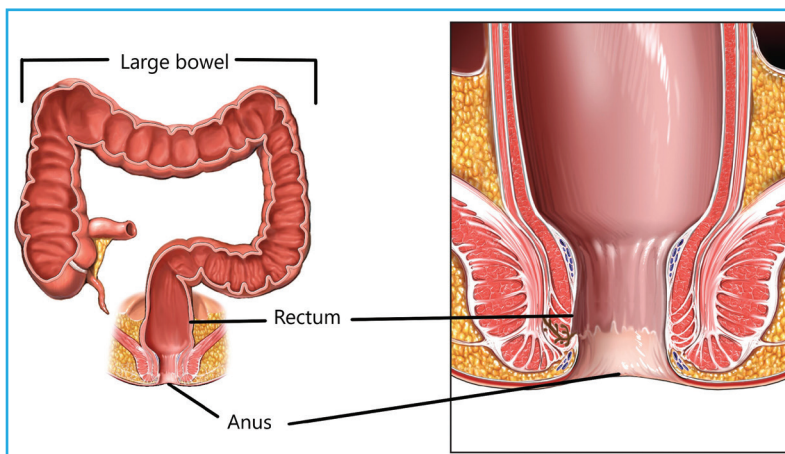


Image: Anatomy of the rectum and anus (adapted). Illustration Copyright © 2019 Nucleus Medical Media, All rights reserved. www.nucleusmedicalmedia.com

Preparing for the procedure

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

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

This procedure does not require sedation or an anaesthetic.

During the procedure

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

Once you are in the CT scanning room and positioned on your side, a small, lubricated tube is gently inserted a short way into the rectum. Contrast is slowly inserted into the rectum and bowel through the tube.

You may feel discomfort when the tube is inserted into your rectum and the balloon is inflated. Some mild abdominal cramping during the procedure is normal and you may get a feeling of fullness.

The radiographer will leave the room before the scan, but they will be able to see you, through a large glass window, and speak with you via an intercom.

During the scan, the table will move through the CT scanner and a whirring or humming sound may be heard.



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The procedure and CT scan takes about 30 minutes. It is important to remain still while the CT scanner is taking the images, as the slightest movement can blur the images. Supporting straps, foam pads and light weights may be used to help support you. The radiographer will let you know when it is important for you to keep still, this is usually for only a few minutes at a time.

Once the CT scan is complete, as much contrast as possible will be drained from your bowel through the tube. At the completion of the procedure, the tube will be removed.

After the procedure is completed, you will be directed to the closest bathroom.



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 of 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

- bleeding is more common if you have been taking blood thinning medicines, such as warfarin, aspirin, clopidogrel (Plavix, Iscover, Coplavix), prasugrel (Effient), dipyridamole (Persantin or Asasantin), ticagrelor (Brilinta), apixaban (Eliquis), dabigatran (Pradaxa), rivaroxaban (Xarelto) or complementary/alternative medicines, such as fish oil and turmeric
- bacteraemia (infection in the blood). This will require antibiotics
- allergic reaction to the contrast. Allergic reactions rarely occur, but when they do, they usually occur within the first hour, with most happening in the first five minutes. Late reactions have been known to occur up to 1 week after the injection. Note: Allergy to topical iodine and/or seafood does not imply an allergy to iodinated contrast. The reactions vary from:
 - mild: hives, sweating, sneezing, coughing, nausea
 - moderate: widespread hives, headache, facial swelling, vomiting, shortness of breath
 - severe: severe reactions are rare but include life-threatening heart palpitations, very low blood pressure, throat swelling, seizures and/or cardiac arrest.
- 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 CT scan with rectal contrast?

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 procedure options with your referring doctor/clinician.



4. What should I expect after the procedure?

Following the procedure, you will be able to visit the toilet. It is important to drink plenty of water, for a few days after the procedure, to avoid constipation and dehydration.

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

You will receive the results of the scan 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?

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

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 you.

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 First Nations People's culture must be considered in the patient's clinical care to ensure their holistic health and individual needs are met.



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 your 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