Queensland Government	l

# Capsule Endoscopy

Facility:

A. Interpreter / cultural needs	
An Interpreter Service is required?	Yes No
If Yes, is a qualified Interpreter present?	Yes No
A Cultural Support Person is required?	Yes No
If Yes, is a Cultural Support Person present?	Yes No
P Condition and treatment	

# Condition and treatment

The doctor has explained that you have the following condition: (Doctor to document in patient's own words)

his condition requires the following procedure.	
Doctor to document - include site and/or side when	'n
elevant to the procedure)	

The following will be performed:

A capsule endoscopy is where a pill sized video capsule, is swallowed. The capsule slowly travels through your digestive system, the same as food would normally travel. This capsule is disposable and usually passed within 24 to 48hours.

The capsule has its own built-in light and camera to take pictures of the inside of your small bowel. 2 - 4 images are taken per second for up to 8 hours. The images are transmitted to a radio recorder (a walkman like device) that is worn around your waist. You should not remove the belt at any time during the procedure.

This procedure is safe, easy to do, non-invasive and permits examination of the entire small bowel that is not easily reached by other imaging methods.

It does not require sedation as the procedure is painless.

The capsule procedure does have some limitations in that it can only view what the problems may be. It does not allow any treatment such as removing a polyp. A further endoscopy procedure or surgery will be required for this.

# C. Risks of a Capsule Endoscopy

There are risks and complications with this procedure. They include but are not limited to the following.

#### Common risks and complications include:

About 1 person in every 100 will have difficulty passing the capsule. This can be due to a narrowing (stricture) due to a tumour, inflammation or scarring from previous surgery. This is not usually serious in the short term, but surgery may be needed to remove it.

(Affix identifica	tion label here)
URN:	
Family name:	
Given name(s):	
Address:	
Date of birth:	Sex: M F I

# Uncommon risks and complications include:

- Missed polyps, growths or bowel disease.
- Incomplete study of the small bowel due to slow bowel function.

### Rare risks and complications include:

Death as a result of this procedure is extremely rare.

	Significant risks and procedure option
	ctor to document in space provided. Continue i dical Record if necessary.)
Ε.	Risks of not having this procedure
	ctor to document in space provided. Continue i dical Record if necessary.)
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PROCEDURAL CONSENT FORM

Queensla Governme	nd
Governme	nt

# **Capsule Endoscopy**

	(Affix identification lab	bel here)	
URN:			
Family name:			
Given name(s):			
Address:			
Date of birth:		Sex: M F II	

### F. Patient consent

Facility:

I acknowledge that the doctor has explained;

- my medical condition and the proposed procedure, including additional treatment if the doctor finds something unexpected. I understand the risks, including the risks that are specific to
- other relevant procedure/treatment options and their associated risks.
- my prognosis and the risks of not having the procedure.
- that no guarantee has been made that the procedure will improve my condition even though it has been carried out with due professional care.
- the procedure may include a blood transfusion.
- if immediate life-threatening events happen during the procedure, they will be treated based on my discussions with the doctor or my Acute Resuscitation Plan.
- a doctor other than the Consultant may conduct the procedure. I understand this could be a doctor undergoing further training.

# I have been given the following Patient Information Sheet/s:

### Capsule Endoscopy

- I was able to ask questions and raise concerns with the doctor about my condition, the proposed procedure and its risks, and my treatment options. My questions and concerns have been discussed and answered to my satisfaction.
- I understand I have the right to change my mind at any time, including after I have signed this form but, preferably following a discussion with my doctor.
- I understand that image/s or video footage may be recorded as part of and during my procedure and that these image/s or video/s will assist the doctor to provide appropriate treatment.

On the basis of the above statements,

	I request to have the procedure		
Name of Patient:			
	Signature:		
	Date:		
	Consent	s who lack capacity to provide consent must be obtained from a substitute decision	
		n the order below. patient have an Advance Health Directive	
	☐ Yes ►	Location of the original or certified copy of the AHD:	
	□ No ▶	Name of Substitute Decision Maker/s:	
		Signature:	
		Relationship to patient:	
		Date: PH No:	
		Source of decision making authority (tick one):	
		☐ Tribunal-appointed Guardian	
		Attorney/s for health matters under Enduring Power of Attorney or AHD	
		Statutory Health Attorney	
		If none of these, the Adult Guardian has provided	

# G. Doctor/delegate statement

I have explained to the patient all the above points under the Patient Consent section (G) and I am of the opinion that the patient/substitute decision-maker has understood the information.

Name of Doctor/delegate:	
Designation:	
Signature:	
Date:	

### H. Interpreter's statement

I have given a sight translation in

(state the patient's language here) of the consent form and assisted in the provision of any verbal and written information given to the patient/parent or guardian/substitute decision-maker by the doctor.

Name of Interpreter:
Signature:

Date:



# Consent Information - Patient Copy Capsule Endoscopy

# 1. What is a Capsule Endoscopy?

A capsule endoscopy is where a pill sized video capsule is swallowed. The capsule slowly travels through your digestive system, the same as food would normally travel. This capsule is disposable and usually passed within 24 to 48hours.

The capsule has its own built-in light and camera to take pictures of the inside of your small bowel. 2 - 4 images are taken per second for up to 8 hours. The images are transmitted to a radio recorder (a walkman like device) that is worn around your waist. You should not remove the belt at any time during the procedure.

This procedure is safe, easy to do, non-invasive and permits examination of the entire small bowel that is not easily reached by other imaging methods.

It does not require sedation as the procedure is painless.

The capsule procedure does have some limitations in that it can only view what the problems may be. It does not allow any treatment such as removing a polyp. A further endoscopy procedure or surgery will be required for this.

# 2. Will there be any discomfort? Is any anaesthetic needed?

No. The capsule is approximately the size of a large antibiotic capsule, so this is similar to swallowing a mouthful of food.

# 3. What are the risks of this specific procedure?

There are risks and complications with this procedure. They include but are not limited to the following.

#### Common risks and complications include:

 About 1 person in every 100 will have difficulty passing the capsule. This can be due to a narrowing (stricture) due to a tumour, inflammation or scarring from previous surgery. This is not usually serious in the short term, but surgery may be needed to remove it.

#### Uncommon risks and complications include:

- Missed polyps, growths or bowel disease.
- Incomplete study of the small bowel due to slow bowel function.

#### Rare risks and complications include:

 Death as a result of this procedure is extremely rare.

### 4. Preparation for the procedure

Iron tablets need to be stopped at least 7 days before your procedure.

It is vital that your stomach is empty during the procedure to ensure a clear view.

No food for 10 hours and no fluids are to be taken at least 4 hours before you swallow the capsule.

No food for a further 4 hours after swallowing the capsule.

### 5. What if the doctor finds something wrong?

Your doctor will discuss with you any findings after the images from the capsule are downloaded and looked at on a computer.

# 6. What if I don't have the procedure?

Your symptoms may become worse and the doctor will not be able to give you the correct treatment without knowing the cause of your problems.

#### 7. Are there other tests I can have instead?

There are other tests that can be done, such as x-rays, scans or small bowel endoscopy. Capsule endoscopy generally provides an accurate view of the entire small bowel not always possible with these other tests. Your doctor will discuss options with you.

# 8. What can I expect after a capsule endoscopy?

The capsule passes naturally with your bowel movement. You should not feel any pain or discomfort.

# 9. What are the safety issues?

You should not have an MRI scan whilst the capsule is inside you. Normally the capsule passes in 24 – 48hours.

Notify the hospital Emergency Department straight away if you have;

- · any abdominal pain.
- nausea and vomiting.
- black tarry motions or bleeding from the back passage (more than ½ cup of blood).
- a fever.

Notes to talk to my doctor about: