You are scheduled for CT Virtual Colonoscopy on _______________ at ______________.

Please report to TC100 in Mitchell Hospital 20 minutes before your appointment time to register for the test.

What is a CT Virtual Colonoscopy
CT Virtual Colonoscopy is a CT scan done in a special way that allows a radiologist to look at the large bowel (colon) to detect polyps and tumors. Polyps are small growths in the colon. They are usually benign (non-cancerous), but could become cancerous if not removed. Virtual Colonoscopy is a technique that uses a CT sander and computer software to look inside the body without having to insert a long tube into the colon (Conventional Colonoscopy) or without having to fill the colon with barium (Barium Enema).

Why is it Important?
Colorectal cancer (CRC) is a leading cause of cancer-related death in the United States. In 2012 there were an estimated 103,170 new cases of colon cancer diagnosed in the United States and an estimated 51,690 patients died of the disease. Colorectal cancer is the second most common cancer affecting men and women. It is the most common cause of cancer death in non-smokers. Research suggests that the incidence is declining due to increase screening and polyp removal, which prevents the progression of polyps into invasive cancers. Colon cancer can be prevented if polyps are discovered and removed early.

Risk Factors
A personal family history of colorectal cancer or polyps, and inflammatory bowel disease have been associated with increased colorectal cancer risk. Other possible risk factors include physical inactivity, high-fat and/or low-fiber diet, as well as inadequate intake of fruits and vegetables. Recent studies have suggested that estrogen replacement therapy and non-steroidal anti-inflammatory drugs (aspirin) may reduce colorectal cancer risk. The risk for colon cancer increases with age and screening is recommended for anyone 50 years or older.

Why Screen with Virtual Colonoscopy?
Virtual Colonoscopy is considered safe, non-invasive and a good screening test. It is well accepted by patients. Patients like the fact that the test takes 15 minutes and the computer does the rest. Sedation is not needed, so patients can drive immediately after the test.

Radiation Exposure
The Department of Pediatric Radiology at the University of Chicago Medical Center follows guidelines set forth by the Joint Task Force on Adult Radiation Protection to produce the highest quality images while using the lowest radiation dose possible. The Joint Task Force collaborated with the American Association of Physicists in Medicine and the American Society of Radiologic Technologists to create the Image Wisely campaign. For more information please visit the Image Wisely™ website at imagewisely.org.

Will My Insurance Pay for Virtual Colonoscopy?
Virtual Colonoscopy for screening is not currently reimbursed by most insurance companies. As a result, patients pay for the procedure themselves. Medicare may pay for virtual colonoscopy when performed after a failed conventional colonoscopy.

**How is a Virtual Colonoscopy Done?**
Virtual Colonoscopy uses a standard CT scan of the abdomen that allows the radiologist to create pictures on the computer that look like those seen by conventional colonoscopy. Patients need a cleansing preparation of their bowel before the test.

**Materials Needed for Preparation**

**Halflytely® Bowel and Bisacodyl Tablet Bowel Prep Kit:**
Purchase this kit from your local pharmacy. The kit contains a powder called halflytely and a bisacodyl tablet. Both of the products are types of laxatives. You do not need to take the bisacodyl tablet as part of the preparation for your virtual colonoscopy.

**Omnipaque™**
We will mail you an oral contrast agent called Omnipaque™. This contrast agent will allow us to visualize structures in your colon.

**Preparation**
If you are on fluid restrictions, check with your doctor before beginning this preparation.

If you have kidney disease, heart disease or a several year history of high blood pressure or diabetes, call your doctor for an alternate preparation.

**Two days before the exam:**
**Breakfast:** Begin a low fiber diet. Avoid foods like beans, nuts, seeds and whole grains.

6:00pm: Take two teaspoons of Omnipaque mixed with water or juice.

**One day before the exam:**
**Breakfast:** Eat a low fiber breakfast. Avoid foods like beans, nuts, seeds, and whole grains.

**Lunch:** Start a clear liquid diet (water, clear broths, juices without pulp, clear beverages, Jell-O®).

1:00pm Add lukewarm drinking water to the line at the top of the Halflytley bottle. Cap the bottle and shake it to dissolve the powder. The solution will be clear and colorless. Place the solution in the refrigerator to chill.

3:00pm Begin to drink the solution. Drink one (8 oz) glass about every 10 minutes. Drink each glass quickly instead of drinking small amounts continuously. Be sure to drink all of the solution.

9:00pm Take two (2) teaspoons of Omnipaque mixed with 22 ounces of juice or water.

10:00pm Take four (4) teaspoons of Omnipaque mixed with 22 ounces of juice or water.

**Morning of the exam:**
4 hours before your scheduled exam time, take four (4) teaspoons on Omnipaque mixed with 22 ounces of juice or water.

You may have a clear liquid breakfast but do not eat or drink anything else until after the exam.

You may take your routine medications unless they require solid food to accompany them. If you are taking insulin the dosage may need to be adjusted the day prior and the morning of the test. Contact your physician for instructions regarding dosage. If you take blood pressure medication, heart medication or Prednisone or other steroids, take it before 7:00am with a sip of water.
If you are passing **formed** stool do not come to Radiology. Call us at 773-702-9101 for further instructions.

**How is the test performed?**
Please leave any loose or hanging jewelry, such as necklaces at home. It is not usually necessary to remove rings or watches.

The technologist will help you lie down and get comfortable on the scanning table. A small tube will be inserted into your rectum. You will be moved smoothly inside the scanner on a motorized tabletop. Carbon dioxide will be infused into your colon through the tube and a series of images will be taken. The gas may cause temporary abdominal cramping. If the cramping does not subside quickly, you may be given a drug called glucagon to reverse the feeling. An audio system makes it possible for you to talk to the technologist or radiologist during the exam. The technologist can see and hear you at all times.

During the exam it is important that you lay perfectly still since even slight movement can make the images blurry.

**After the Test**
You may resume your normal activities and diet after the test.