

PREOPERATIVE DIAGNOSIS: , Blood loss anemia.,POSTOPERATIVE DIAGNOSES:,1. Diverticulosis coli.,2. Internal hemorrhoids.,3. Poor prep.,PROCEDURE PERFORMED:, Colonoscopy with photos.,ANESTHESIA: , Conscious sedation per Anesthesia.,SPECIMENS:, None.,HISTORY:, The patient is an 85-year-old female who was admitted to the hospital with a markedly decreased hemoglobin and blood loss anemia. She underwent an EGD and attempted colonoscopy; however, due to a very poor prep, only a flexible sigmoidoscopy was performed at that time. A coloscopy is now being performed for completion.,PROCEDURE:, After proper informed consent was obtained, the patient was brought to the Endoscopy Suite. She was placed in the left lateral position and was given sedation by the Anesthesia Department. A digital rectal exam was performed and there was no evidence of mass. The colonoscope was then inserted into the rectum. There was some solid stool encountered. The scope was maneuvered around this. There was relatively poor prep as the scope was advanced through the sigmoid colon and portions of the descending colon. The scope was then passed through the transverse colon and ascending colon to the cecum. No masses or polyps were noted. Visualization of the portions of the colon was however somewhat limited. There were scattered diverticuli noted in the sigmoid.,The scope was slowly withdrawn carefully examining all walls. Once in the rectum, the scope was retroflexed and nonsurgical internal hemorrhoids were noted. The scope was then completely

withdrawn. The patient tolerated the procedure well and was transferred to recovery room in stable condition. She will be placed on a high-fiber diet and Colace and we will continue to monitor her hemoglobin.