

Date:

AM/PM/EVE

Site:

Room:

Colonoscopist no:

Procedure number	Options	1	2	3	4	5	6	7
Patient age	In years							
Gender	M F							
IP/OP	IP OP							
Trainee (non-independent)	C A N							
Indication	D T Su Sc B							
Sedation	C N G P							
Sedation 1	F P M D A T + dose							
Sedation 2	F P M D A T + dose							
Entonox use	Y N							
Caecal intubation	Y YP N							
Confirmation of completion	TI ICV AT N							
Reason for incomplete test	P S B C							
Polyp seen	Y N							
Total no polyps	1 2 3 ... 8 9 ≥10							
No polyps removed	1 2 3 ... 8 9 ≥10							
No polyps retrieved	1 2 3 ... 8 9 ≥10							
Size of largest polyp	<1 1-2 >2							
Diagnosis	N P C I D O							
Bowel preparation	E A P							
Comfort score	1 2 3 4 5							
Complications	N B P A R U							
Outcome of complication	D W U R							

Nurse signature:

Endoscopist signature:

Patient age: in years at the time of procedure

Gender: Male (**M**) or Female (**F**)

IP/OP: Inpatient (**IP**) or Outpatient (**OP**)

Trainee (non-independent): Procedure completed without trainer assistance (**C**), completed with trainer assistance (**A**) or trainee not present (**N**)

Indication: Diagnostic (**D**), therapeutic (**T**), surveillance (**Su**), screening (**Sc**) or BCSP (**B**)

Sedation: Performed with conscious sedation (**C**), no sedation (**N**), general anaesthetic (**G**) or propofol sedation (**P**)

Sedation 1: *the drug given first*; Fentanyl (**F**), Pethidine (**P**), Midazolam (**M**), Diazepam (**D**), Alfentanil (**A**), Tramadol (**T**). Numerical total dosage. (e.g. fentanyl 50mcg = F50; midazolam 3mg = M3).

Sedation 2: *the drug given second*

Entonox use: Yes (**Y**) or No (**N**)

Caecal intubation: Yes (**Y**), Yes with photographic evidence (**YP**) or Not achieved (**N**)

Confirmation of completion: terminal ileum or neo-terminal ileum entered (**TI**), ICV seen (**ICV**), appendix or tri-radiate fold identified (**A**), completion not satisfactorily confirmed (**N**)

Reason for incomplete procedure: pain or uncontrolled loops (**P**), stricture or obstruction (**S**), poor bowel preparation (**B**), cardio-respiratory instability (**C**)

Polyp seen: Yes (**Y**) or No (**N**)

Number of polyps: the total number of polyps identified (1,2,3,4,5,6,7,8,9, ≥10)

Number of polyps removed: number of polyps treated by polypectomy? (1,2,3...9, ≥10)

Number of polyps retrieved: number of polyp subsequently retrieved? (1,2,3...9, ≥10)

Size of largest polyp: (as estimated by the endoscopist) Less than 1cm (<1), 1-2cm (1-2), >2cm (>2)

Diagnosis: primary endoscopic diagnosis. Normal (**N**), Polyps (**P**), Cancer (**C**), Inflammatory bowel disease (**I**), Diverticulosis (**D**) or Other (**O**)

Bowel preparation: Excellent (**E**), Adequate (**A**) or Poor (**P**)

Comfort score: (nurse assessed) Comfortable (**1**) Minimal (**2**), Mild (**3**), Moderate (**4**), Severe (**5**)

(Detailed definitions of Bowel Preparation and Comfort Scores are available to download on the Background page of the website)

Complications: immediate complications. None (**N**), Bleeding requiring haemostatic therapy (**B**), Perforation (**P**), abdominal pain (**A**), Use of reversal agents including naloxone and flumazenil (**R**), unsupervised trainee (**U**).

Consequence of complication: Discharge (**D**), Returned to ward with no unplanned care (**W**), Unplanned admission or unplanned care (**U**), Death (**R**)