

SLOVENIAN NATIONAL COLORECTAL CANCER SCREENING PROGRAMME

Date:

Colonoscopy preparation questionnaire

Please answer all questions carefully with your personal physician and encircle the answer that applies to you.

The endoscopy specialist who will do your colonoscopy will find the answers very helpful to determine the best treatment method and to carry out the examination safely and without unneeded delays.

1.	A first-degree relative (father, mother, brother, sister, stepbrother,			
	stepsister, son, daughter) got colorectal cancer before the age of 60.	don't know	yes	no
2.	A first-degree relative (father, mother, brother, sister, stepbrother,			
	stepsister, son, daughter) got colorectal cancer after the age of 60.	don't know	yes	no
3.	Two or more blood-relatives got colorectal cancer.	don't know	yes	no
4.	I already underwent colonoscopy.		yes	no
	Last colonoscopy date:			
	Diagnosis:			
5.	I am being treated for chronic inflammatory bowel diseases.			
	Crohn's d	isease	yes	no
	Ulcerative	e colitis	yes	no

¹ Patient being treated for Crohn's disease or ulcerative colitis must be examined by his/her gastroenterologist, who will determine the colonoscopy indication before the screening colonoscopy.

Fill out with your personal physician.
I am being treated with antiaggregatory² or anticoagulant medications (against blood clotting).

a) No.
b) Yes. List your medication(s):
After consulting personal physician or other medical specialist who introduced the medication, I will interrupt the therapy:
days before the procedure.

Last homoeostasis test(s) (type and value):
Result date:
I am taking iron preparations.

a) No.
b) Yes. Therapy should be interrupted 7-10 days before the procedure.

I am taking diabetes medications (pills, insulin).

a) No.
b) Yes. Before the procedure, therapy should be adapted under the direction of personal physician or diabetologist.

9. According to physician's instructions, I should take the following medication(s) before, during and/or after colonoscopy. List your medication(s):

0.	Other medical condition issues that could influence colonoscopy (i.e. Dialysis, chronic obstructive
	pulmonary disease, liver disease):

Clinical status of the patient (for the physician)

Please mark	Grade	Medical condition description
	ASA I	without organic, physiologic, psychiatric disorders
	ASA II	patient with well-regulated chronic disease without distinct systemic signs
	ASA III	patient with chronic disease with distinct systemic signs and occasional deteriorations
	ASA IV	patient with poorly regulated chronic disease and frequent, life- threatening deteriorations - colonoscopy will be performed after stabilizing patient's medical condition

² Endoscopy specialist can still go with a 5- to 7-day interruption of acetylsalicylic acid treatment before the scheduled colonoscopy, taking the risk of thrombembolism because of treatment interruption and the risk of bleeding because of acetylsalicylic acid treatment resumption into account.