

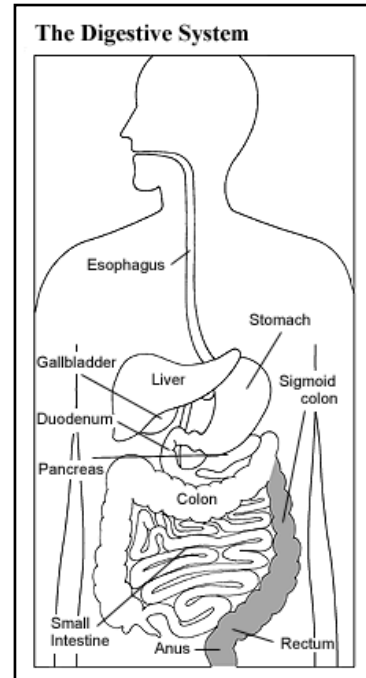
Supplemental Writing Practice

Directions: Use the information in the outline below to write a procedure essay.

Flexible Sigmoidoscopy

I. Introduction

- A. Definition
 - 1. non-surgical procedure
 - 2. examination of rectum & lower sigmoid colon
- B. Background information
 - 1. purpose — diagnose problems, e.g.
 - a. cancer of rectum or colon
 - b. cause of rectal bleeding
 - c. benign diseases of lower intestine
 - 2. instrument used = sigmoidoscope
 - a. fiber-optic tube
 - i. long
 - ii. flexible
 - b. light source attached
 - c. camera attached
- C. Statistics
 - 1. successful procedure
 - 2. successfully diagnoses > 50% of precancerous / cancerous growths in colorectal area
- D. Thesis statement



II. Preparation

- A. Empty lower bowel
 - 1. purpose
 - a. give clear view
 - b. allow thorough examination of lower intestinal walls
 - 2. method
 - a. day before test—drink clear liquids only
 - b. evening before test—oral laxative
 - i. name = phospho-soda
 - ii. fluid preparation
 - iii. very effective
 - c. morning of test—2 enemas: clear all blockage in bowels
- B. Precaution with medication
 - 1. do not take 1 week before procedure
 - a. aspirin
 - b. ibuprofen
 - c. iron
 - 2. tell doctor about other medication

- C. Arranges for someone to drive him home (patient sedated)

III. Procedure (painless & 10-20 mins.)

- A. Light sedative—IV line in arm
 - 1. relax patient
 - 2. keep patient conscious
- B. Local anesthesia around anus
- C. Lie on left side on examination table
- D. Doctor inserts sigmoidoscope
- E. Sigmoidoscope guided into rectum & colon
- F. Tube & lens give image of lower large intestine
- G. Air blown into organs from sigmoidoscope (inflate organs & give physician better view)
- H. Tissue sample taken out
- I. Specimen sent to pathology lab. for tests

IV. Post-Procedure

- A. Recovery room—2-3 hours
 - 1. check for complications, e.g.
 - a. bleeding
 - b. perforation of colon
 - 3. drink plenty fluids
 - 4. discuss results w/ doctor
- B. Friend drive patient home
- C. At home
 - 1. rest first day
 - 2. start work next day
 - 3. contact doctor if
 - a. heavy rectal bleeding
 - b. severe abdominal pain
 - c. fever

V. Conclusion

- A. Restatement of thesis
 - 1. non-surgical diagnostic procedure
 - 2. 3 stages
- B. Main ideas
 - 1. preparation—empty lower bowels
 - 2. procedure—insertion of sigmoidoscope with fiber-optic camera
 - a. help see organ lining
 - b. help find abnormalities
 - 3. post-procedure care
 - a. rest
 - b. discuss result with physician