

Patient Information Sheet for CT Colonography (CTC)

CT colonography uses CT scanning to obtain an interior view of the colon (the large intestine) that is otherwise only seen with a more invasive procedure where an endoscope is inserted into the rectum.

What does the equipment look like?

The CT scanner is typically a large, box like machine with a hole, or short tunnel, in the centre. You will lie on a narrow examination table that slides into and out of this tunnel. Rotating around you, the x-ray tube and electronic x-ray detectors are located opposite each other in a ring, called a gantry. The computer workstation that processes the imaging information is located in a separate room, where the technologist operates the scanner and monitors your examination.



During CT colonography, you will be asked to lie on your back and then on your stomach or side.

How should I prepare?

You should wear comfortable, loose-fitting clothing to your exam. You may be given gown to wear during the procedure.

It is very important to clean out your colon the night before your CT colonography examination so that the radiologist can clearly see any polyps that might be present. You will be asked to use a bowel cleaning regime (Pico prep) to remove bowel motion from the bowel.

At the same time you will be given a special drink that helps the radiologist better distinguish bowel motion from polyps by "tagging" the remaining bowel motion and fluid. On the day before your exam, you should limit your food intake to clear liquids such as broth, tea or juice.

You will be able to resume your usual diet immediately after the exam.

How is the procedure performed?

The technologist begins by positioning you on the CT examination table, usually lying flat on your back or possibly on your side or on your stomach. Straps and pillows may be used to help you maintain the correct position and to hold still during the exam.

A very small, flexible tube will be passed two inches into your rectum to allow CO₂ to be gently pumped into the colon using a hand-held squeeze bulb. The purpose of the gas is to distend the colon as much as possible to eliminate any folds or wrinkles that might obscure polyps from the physician's view.

Next, the table will move through the scanner. Patients are asked to hold their breath for about 15 seconds before turning over and lying on their back or side for a second pass is made through the scanner. Once the scan is done, the tube is removed.

The entire examination is usually completed within 15 minutes.