



POLYPECTOMY (SIMPLE AND ADVANCED POLYPECTOMY) CHECK LIST

SIMPLE POLYPECTOMY (LEVEL 1 AND SOME LEVEL 2 POLYPS)

→ Cold biopsy

→ Cold snare

→ Cold EMR

→ Hot snare

PRIOR TO THE PROCEDURE

- Polypectomy indication small polyps do they need removal?
- · Logistics endoscopy suite/theatre
- Sedation-unsedated/Entonox/propofol
- Team huddle/team brief
- Appropriate staffing level experienced nurses
- Consent risks, complications discussed, appropriateness of procedure discussed
- Anticoagulants / Antiplatelet agents discontinued as per BSG guidelines
- Endoscopy Non-technical skills and WHO check list
- Check for pacemaker, loop devices, nerve stimulators, joint replacements etc
- Correct patient selected for images and endoscopy reporting on PC

PROCEDURE DOCUMENTATION

- Images are taken and labelled correctly
- Histology request
- Urgency of histology processing time- routine vs urgent
- Documentation of anticoagulants and antiplatelets – duration to be withheld
- Histology sample checked and signed
- Appropriate number of endoscopy reports printed/electronically signed off and sent to referrer and GP
- Appropriate follow up organised virtual/face to face/telephone clinic/MDM referrals if indicated

ENDOSCOPY ACCESSORIES

- Appropriate scope Gastroscope, paediatric scope, adult colonoscope or Balloon scope
- Functioning scope/washer pump/scope guide/scope pilot
- Functioning diathermy machine/Pads/pedals/connectors
- Disposable distal attachments Endocuff/cap/endorings
- Lifting solutions ready
- Appropriate snares
 a.Cold snare Exacto/Captivator/Pentax/Coin tip snare
 b.Hotsnare- Snaremaster/Captivator/Pentaxsnare/
 Monofilament/ Braided snares
 - c.Size of cold and hot snare d.Markers to mark the snare
- Clips Viper/Resolution 360/Sure clips/Instinct
- Size of clips 11/13/16mm
- Polyp trap
- Polyp retrieval net Rothnet
- · Haemostatic forceps/coagraspers
- Haemostatic powder/Nexus/Haemospray/Purastat
- Histology pots

POST PROCEDURE & DISCHARGE

- Histology sample verified and sent for analysis
- Clinical review prior to discharge if indicated/ nurse led discharge
- Copies of report given, and findings explained
- Discharge paperwork
- Clearinstructions when to restart antiplatelets
- In hours/ Out of hours contact details in case of procedure related complications or symptoms
 - Copies sent to relevant clinical team