

Endorectal and Endoanal Ultrasounds (ERUS)

What are Endorectal and Endoanal Ultrasounds?

Endorectal ultrasound is a medical test to find tumors in the rectum. If a cancerous tumor is found, the test will provide information on the size, location and how deeply the tumor is growing into the rectal wall. Lymph nodes close to the tumor will also be checked to see if the cancer has spread. This information will help your doctor determine the most effective therapy for you.

Endoanal ultrasound is a medical test to check the muscles of the anus (sphincters). This test can identify abnormalities such as tears, fistulas, and masses in the area.

How are endorectal and endoanal ultrasounds performed?

This test uses soundwaves to detect abnormalities. You will receive sedation medication before the test starts. We will direct you on how to position your body in order to allow for insertion of a lubricated ultrasound probe into the anus and rectum. Sometimes a small sample of tumor is taken out, and analyzed under the microscope (biopsy). The test, including preparation time, will take 30-60 minutes. After the test we will monitor you for a short time in the recovery area.

How will I prepare for endorectal and endoanal ultrasounds?

1. Insert one Fleets enema, per rectum, the evening before and morning of your procedure. Follow packaging instructions for administration. You may purchase Fleets enemas at most drug stores or pharmacies without a prescription.
2. Do not eat or drink for 6 hours before the procedure.
3. You must bring a driver, age 18 years or older, with you to your test. You will receive sedation for this test and will not be alert enough to safely drive yourself home.

4. **Please leave all jewelry and personal items at home.** If you bring jewelry to your appointment, we may have to ask you to remove it.
5. **Please do not wear contact lenses.**
6. **View the video describing risks and benefits of ERUS**
Visit: <http://michmed.org/QJLW9>

Will I need to stop or make changes to my medications?

1. Stop all medications which cause you to bleed more readily 5-7 days prior to the test. Some examples include aspirin, ibuprofen, Plavix®, and Coumadin®. Before stopping any medications, you must check with the doctor who prescribed it, to confirm that it is safe to do so. If the prescribing doctor says that you cannot safely stop the medication, please call us at (734) 615-7565.
2. **If you have diabetes you must call your doctor**
 - a. People with diabetes have special diet and medicine instructions. Call the doctor who ordered your procedure for your special diet and medicine instructions.
3. **If you take any other medications** (non-diabetic medications that do not interfere with bleeding) you can take them with sips of water, on the day of the test.

If you have any questions about the tests and preparation, please call our nurses at 734-615-7565.

→Turn the page to learn about the benefits, risks and alternatives for a ERUS

What are the Benefits, Risks and Alternatives for an Endoscopic Rectal Ultrasound (ERUS)?

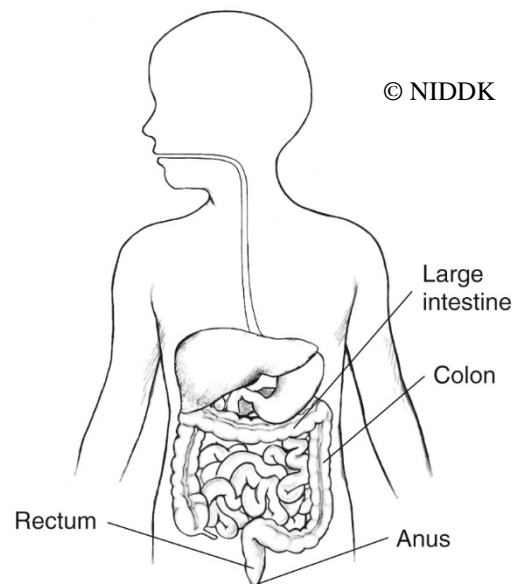
Before starting the procedure, a member of our team will ask you to sign an informed consent indicating that you understand the procedure, its benefits and risks, and the alternatives for an endoscopic rectal ultrasound (ERUS). Read this handout or view the video at: <http://michmed.org/QJLW9> to understand your informed consent.

What is the purpose of an endoscopic rectal ultrasound (ERUS)?

Endoscopic rectal ultrasound (ERUS) is a procedure where a doctor inserts an ultrasound probe into the patient's rectum. Ultrasound uses sound waves to create an image of the rectum and the surrounding tissue.

What are the benefits of Endoscopic rectal ultrasound (ERUS)?

The purpose of ERUS is to detect abnormalities in the wall of the lowest part of the colon, called the rectum. It is most often used to detect polyps and cancer in the rectum. Polyps are abnormal tissue growths that may turn into cancer with time. With ERUS doctors can detect cancer at an early stage and see if the cancer has spread. It also helps to evaluate how successful treatment has been for removing a cancer or polyp. One of the benefits of ERUS is that it does not use radiation.



What are the risks of an ERUS?

Possible risks include bleeding or puncturing the wall of the rectum.

What are the alternatives to ERUS?

Alternative medical tests include CAT scan and MRI, but neither gives the same accuracy when looking at how deep a polyp or cancer in the rectum has grown.

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