

Upper Endoscopy - EGD

INSTRUCTIONS FOR PATIENTS ABOUT TO UNDERGO AN ESOPHAGOGASTRODUODENOSCOPY

THE PROCEDURE

Your doctor wishes you to have an examination of your esophagus, stomach, and duodenum. The examination is conducted with you lying on your left side. After you have been sedated and are asleep, a long thin tube (called an endoscope) is then placed in your mouth and passed into the esophagus. The doctor will then begin to examine your esophagus, stomach, and duodenum. A mouth guard will be placed between your teeth to protect you from biting down on the scope or injuring your teeth. A suction device may be used to remove saliva from your mouth, if needed. During the exam, biopsies of tissue may be obtained using biopsy forceps to look for infection or causes of inflammation or pain. You should not feel this and it should not cause pain. When performed by a specially trained physician, this is a safe and accurate way to determine the condition of your esophagus, stomach, and duodenum.

PREPARATION

- **If you have a cold or sinus infection, this can make it difficult to do the sedation safely. Please call your doctor's office if you have concerns.**
- **Do Not Eat or Drink ANYTHING the day of the test, except morning medicines with a small sip of water up to 4 hours before the test. DO NOT CHEW GUM, HARD CANDY, or SMOKE.** This also includes **ALL inhalers.**
- **You must have a ride home** as the sedation will make it unsafe to drive the day of the test. Your driver must be prepared to stay at the Center until you are discharged.
- If you are/might be pregnant, please inform the physician.
- Please bring an insurance card and/or referral slip (if needed). Depending on your insurance coverage, you may be required to pay a co-payment with a check, cash or credit card.
- Let your doctor or nurse know if you are allergic to soybeans, eggs, or sulfites as this may cause problems with some of the sedation used.
- Bring a list of all your current medications and allergies with you.

IT IS ESSENTIAL THAT YOU HAVE SOMEONE ACCOMPANY YOU HOME AFTER THE PROCEDURE. IF YOU ARE NOT ACCOMPANIED BY SOMEONE, YOUR PROCEDURE WILL BE RE-SCHEDULED.

THE ALTERNATIVES

An Upper GI X-ray can be done to evaluate the esophagus or stomach. A CAT scan can look at the stomach or esophagus but may not see the inside as well. You may ask the doctor if these would be right for you.

Things to let us know before starting the test:

- If you are ALLERGIC to SULFITES, EGGS, or SOYBEANS. This can affect the type of sedation used.
- If you are allergic to Latex.
- If you are/might be pregnant, please inform the physician.
- If you have any bleeding or clotting problems.

THE RISKS

Potential Risks

Upper Endoscopies are very safe but, as with all procedures, there are some risks of which you should be aware. **These risks include but are not limited to** the risk of having a **perforation**. This means that in one out of every 3000 Upper Endoscopies, a hole can be made in your intestine. If this occurs, you will be hospitalized and may need surgery to repair this hole and to prevent any serious infection.

- **Bleeding** may occur after a polyp has been removed, but rarely after a simple biopsy. Bleeding can also occur after dilation. You may see blood in the stool or black stool up to two weeks later. If this occurs, please call us immediately. Most of the time, the minimal bleeding will stop by itself but in some cases it may require another colonoscopy, blood transfusion, or in rare cases surgery to stop the bleeding.
- **Medication Phlebitis** is where the medications used for sedation may irritate the vein in which they are injected. This may cause a red, painful swelling of the vein and surrounding tissue and the area could become infected. Discomfort in the area may persist for several weeks to several months.
- **Rarely other complications can include** post polypectomy burn syndrome, infection from the procedure, Drug reactions and complications from other diseases you may already have. Instrument failure and death are extremely rare but remain remote possibilities.
- **It is important for you to inform the doctor at the time of your consultation if you have any type of bleeding disorder.** Again, avoid any aspirin type medications for 7 days prior to the procedure and non-steroidal/anti-inflammatory drugs 5 days prior to the procedure as this will increase your risk of bleeding after the procedure, **unless you are told by the Doctor to continue.**

The medicine we give you to make you comfortable will make you sleepy and can slow your breathing. All patients are placed on a heart monitor so the doctor and nurses can observe your heartbeats and be aware of any problems or EKG changes which may occur. A pulse oximeter is used to monitor your breathing during sedation. If we feel there is problem which puts the patient in danger, the procedure will be stopped immediately.

If after reading this you have any questions please, contact your physician.

WHAT WILL HAPPEN BEFORE THE TEST?

- You will sign a consent form for the test and the anesthesia.
- The anesthesiologist will ask you medical questions to ensure it is safe to give the anesthesia.
- You will be asked to change into a hospital gown.
- An intravenous (IV) line will be started in your arm.

- You will be asked to remove your glasses, contact lenses, dentures, and jewelry. We ask you to leave your jewelry at home.
- You will be asked to leave your cell phone with your driver.
- The back of your throat may be numbed with a spray.

WHAT WILL HAPPEN AFTER THE TEST?

- The Doctor or Nurse will go over the test results and you will be given a report of the results.
- Eat a light meal within the first hours after the test as the medicine can cause some mild nausea.
- After several hours, you may resume your normal diet.
- Your throat maybe a little sore for the day, this is to be expected.
- Do not drive a car or operate machinery for at least 24 hours as it is unsafe.

Biopsy results are usually available in 2-3 weeks and will be given to you by phone, mail, or at your next follow up appointment. A report will also be sent to you Doctor. If you do not get your results within two to three weeks, don't hesitate to call your physician.

While every caution is taken to prevent any problems, complications can occur and sometimes these may not become evident for several hours. If in the next 24 hours you experience any of the following: prolonged or severe abdominal discomfort, fever, tenderness, or significant bleeding, you must contact your doctor. If for any reason you are unable to reach the doctor (within 15 minutes for serious problems), go to the nearest Emergency Room.