

**UPPER GASTROINTESTINAL ENDOSCOPY/
GASTROSCOPY**
Procedure Information Sheet

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How are you to prepare?

You are to consume NO FOOD from midnight the day of your procedure. If your appointment is later in the day you may have **CLEAR FLUIDS ONLY** (eg. Water, lemonade, apple juice, black tea and coffee, etc.) **until four hours prior to your procedure.**

As a duty of care to our patients and to meet Medicare requirements we must have a current referral from your referring GP or specialist on file prior to your procedure.

This can be faxed or emailed to us at reception3@ddq.net.au

(Reminder: GP referrals only stay current for 12 months from their first use and specialist referrals are only current for 3 months from their first use. Medicare requires that you have a current referral on file for each appointment.)

Medications

Continue taking all medications as usual unless otherwise instructed. If your procedure is early in the morning you can:

- Take medications as usual prior to your nil by mouth time
- After your nil by mouth time take medications with a small sip of water (i.e. approx. 20ml)
- Bring the medication with you to hospital to have after your procedure (unless you take heart or blood pressure medication, in which case you should take this as normal with a small sip of water)

Please inform our rooms if you take:

- **Blood thinning medications (eg. Warfarin, Xarelto, Plavix, etc.)**
- **Any diabetic medications – particularly Insulin, Forxiga, Xigduo, Qtern, Jardiance, Jardiamet & Glyxambi**

After your procedure – Important post-procedure care instructions

You will remain in the endoscopy unit until the main effects of the sedation wear off and you have had something to eat/drink. You may feel slightly bloated due to the air that has been introduced through the endoscope. This will quickly pass. You should avoid alcohol for at least 12 hours after your procedure.

The doctor will talk to you after your procedure to let you know of the results. You will also receive a copy of the typed report as you may still be drowsy at the time the doctor talks to you. The whole process generally takes approximately 4 hours from the time you arrive to discharge time.

For legal reasons you MUST NOT drive a vehicle or operate machinery for the remainder of the day following intravenous sedation. Failure to do so carries the same implications as drink driving.

You MUST have a responsible adult escort you home and stay with you for overnight after the procedure. (i.e. You should not go to work).

You should not care for dependent persons without responsible help for at least 12 hours after your procedure.

IF THESE REQUIREMENTS ARE NOT MET YOUR PROCEDURE MAY BE CANCELLED.

These are compulsory requirements for all hospitals and anaesthetists.

You are also advised to be very careful in simple household tasks in the 12 hours after receiving sedation. Your coordination may be impaired for some time and it is important, therefore, not to use sharp knives, risk kitchen burns etc.

-Air Travel - If you intend to travel within 24 hours of your endoscopy please contact us to discuss.

If you develop any pain, fever, vomiting or blood loss after the procedure, you should contact your doctor immediately or the hospital where your procedure took place. Alternately, after hours, you can contact our after hours service on 3261 9570.

Special Considerations

If you are diabetic, take any blood thinning medication, are over 160kg or have any major health concerns please inform our practice nurse as soon as possible. Please inform us if you have had any previous endoscopic examination or any adverse reactions to sedatives or other medications.

What is an Upper GI Endoscopy?

Endoscopy involves the use of a flexible video instrument (endoscope) to examine the upper intestinal tract including the oesophagus, stomach and duodenum. The procedure is commonly undertaken if your doctor suspects that you have inflammation, ulceration or other abnormality of the oesophagus, stomach or duodenum. The endoscope is passed over the back of your tongue into the upper gastrointestinal tract. In addition to visualizing the inner lining of the oesophagus, stomach and duodenum, a number of interventions can be performed. These include taking biopsies (small tissue samples) for subsequent microscopic examination, dilatation (stretching) or narrowing's of the upper gut (usually the oesophagus), removal of swallowed objects or treatment of bleeding vessels or ulcers.

What will happen?

After checking into the hospital and completing your admission you will be seen by a pre-admissions nurse for a brief health check. You will need to remove your dentures. Please inform the staff if you have any loose teeth or crowns. The anaesthetist and procedural doctor will talk to you prior to the procedure.

At the beginning of the procedure you will be asked to lie on your left side and a guard will be placed in your mouth to protect your teeth. You will be given a sedative by injection in a vein before the procedure begins and usually you will not remember anything about the actual examination. The procedure will take between 10 and 20 minutes and you will be sleepy for about half an hour afterwards.

Safety and Risks

Most surveys report complications in less than 1 in 1000 examinations. A number of rare side effects can occur with any medical procedure. If you wish to have full details of RARE complications, you should discuss further with your doctor/practice nurse before the procedure.

Gastrointestinal endoscopy is usually simple and safe. Damage to the oesophagus at the time of examination is extremely rare unless there is pre-existing oesophageal disease. Other potential complications include bleeding, infection and perforation (hole/tear) in the wall of the upper gut. The risk is greater if a therapeutic intervention is performed eg dilatation of a narrowing or control of a bleeding vessel or ulcer.

Rarely patients may have a reaction to the sedation. Complications of sedation are uncommon. Rarely, serious adverse events can occur. Eg. Heart or lung complications or aspiration (fluid coming from the stomach into the lungs).

In the unlikely event a complication occurs, your doctor will take all due care to ensure your safety. This may include consultation with other specialists (e.g. surgeon) and additional testing (radiology & blood tests) for which there *may* be additional fees.

Results

A copy of the results will be sent to your referring doctor and you will receive a copy of the typed report. You may receive this on the day of your procedure. Otherwise, **if you have provided us with an email address, this will be emailed within 1-2 days (or posted)**. Your treating specialist will contact you if they have any serious concerns or if you require a further appointment. Should you have any questions or concerns contact our practice nurse at Digestive Diseases Queensland.