

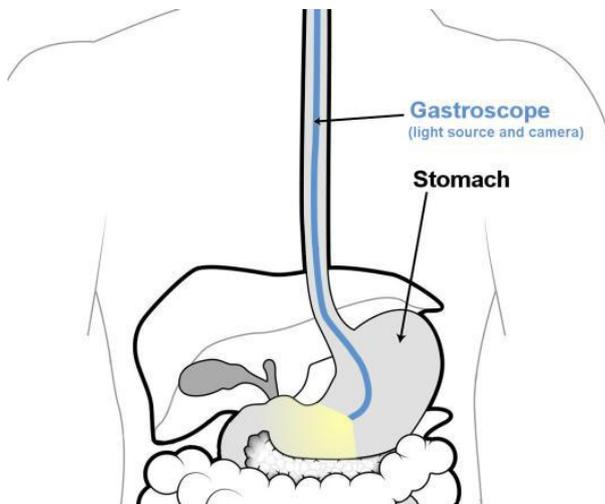


Patient information sheet

Upper Gastrointestinal Endoscopy (Gastroscopy)

What is it?

Upper gastrointestinal endoscopy (also known as gastroscopy or oesophagogastroduodenoscopy) is a procedure that enables your doctor to examine the oesophagus (swallowing tube), stomach and duodenum (first portion of the small intestine).



A bendable, lighted tube about the thickness of your little finger is placed through your mouth and into the stomach and duodenum.

This procedure enables clear views of these areas and biopsies (small samples of tissue) can be collected for further examination under a microscope. Other minor procedures can also be performed.

What kind of preparation is needed?

Your stomach should be completely empty. It is important for your stomach to be empty to allow your doctor to visualize the entire area and to decrease the possibility of food or fluid being vomited into the lungs while under sedation (called aspiration).

Important: DO NOT EAT ANY FOOD FOR 6 HOURS prior to the procedure

You can consume small amounts (less than 200 mLs per hour) of clear fluids (e.g. water) UP TO 3 HOURS prior to the procedure.

Example: If your procedure is at 1:00 pm (afternoon), you can eat a light early morning breakfast (e.g. a poached egg and glass of juice at 6am) but have no solids after 7am. You can have a small amount of water up until 10am. Thereafter, do not eat or drink anything.

If you have important daily medication to take, such as blood pressure tablets, you may do so with a sip of water in the morning or afternoon. Most medications can be continued as usual. Medication such as blood thinners e.g. warfarin or Plavix and diabetes medication e.g. insulin must be discussed with your doctor prior to the examination.

What can I expect to happen?

You will be admitted by a nurse who will ask you some questions and record your vital signs. Your anaesthetist will have a chat to you. An intravenous needle will be inserted in your hand or arm to give you some sedative medication to make the procedure more comfortable for you (you will be asleep). This medication is short acting and you will usually be awake 10-15 minutes after the procedure. It is not a general anaesthetic. Further details can be discussed with the anaesthetist on the day. In exceptional cases you may wish to have this test done with no sedation at all but it may be an uncomfortable experience.

Note: Sedatives may affect your judgement and reflexes for the rest of the day and you should not drive or operate machinery until the following day.

Important: You will need to have a friend or relative collect you after the procedure as you are NOT ALLOWED to drive or leave the hospital on your own.

The procedure itself is short and takes between 5 and 15 minutes to complete. It is a very safe procedure. Minor risks include a sore throat for a day. Major risks are bleeding and bowel perforation but these are very rare (risk is less than 1 in 1000). Please discuss any concerns with me before the day of the procedure.

What happens after the procedure?

You will be monitored in the endoscopy area for up to 1 to 2 hours until the effects of the sedatives have worn off. Your throat may be a little sore for a day or two. You will be able to resume your diet and take your routine medication unless otherwise instructed.

I will inform you of the test results on the day of the procedure. The results of biopsy samples will take up to a week to return and I will discuss how these results will be followed-up with you.

If you have questions about the exam or subsequent follow-up please do not hesitate to discuss them with me before or after the examination.