

Having an Upper Gastrointestinal Endoscopy

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Introduction

This booklet is designed to be practical and informative. Please read **all** of the information contained within it. Not doing so may mean that you miss important instructions and that will put you at risk. Therefore the doctor may decide to defer your investigation.

If you have any questions regarding the information or instructions in this booklet, please do not hesitate to call the department on the number below and a member of the nursing staff will be only too pleased to help you.

The number to call is:

01225 824070

or

01225 824069

When an appointment is made for your endoscopy, you will receive a copy of this information leaflet with the appointment time and date. Please telephone us on the number above as soon as possible if you are unable to accept the appointment.

What is an Upper GI endoscopy?

An Upper Gastrointestinal (GI) Endoscopy is a test, which allows the doctor to look directly at the gullet (oesophagus), the stomach and around the first bend of the small intestine (duodenum). A slim flexible tube with a bright light at the end (called an endoscope) is passed from your mouth and into your stomach.

Why has my doctor chosen an endoscopy?

An Upper GI endoscopy is the only test that allows the doctor to view the lining of the gastrointestinal tract directly to assess what may be the cause of the symptoms that you have been experiencing. Only during this test can the doctor take a small sample of tissue- a "biopsy" for analysis. The tissue is removed painlessly through the endoscope using tiny forceps.

Are there any risks to the test?

There is a 1 in 3,000 risk of bleeding or tearing of the gut, following which admission to hospital will be necessary and may require surgery. Other complications may be as a result of the sedative drugs used and there is a slight risk of damage to crowned teeth or dental bridgework.

Are there any alternatives to this test?

A barium swallow can look for any blockages in the gullet and a barium meal can detect large ulcers, but an endoscopy is the only test that can look at the lining directly.

Prior to admission

If you are suffering from a cold, sore throat or chest infection, you should contact your GP or us because it may be necessary to postpone your test.

It is important that you do not have **anything** to eat or drink for **6 hours** before your appointment.

You do not need to bring pyjamas or nightwear.

Do not bring valuables or large quantities of money into hospital, as we cannot accept responsibility for them.

Do not drive yourself

Please arrange to be accompanied by family or friends when you come into hospital, then they will know where to collect you when it is time to leave.

You must have a responsible adult to accompany you home from the department.

Do not attempt to drive yourself.

Where are we?

The endoscopy unit is situated in the Grace Penwarden Gastroenterology and surgical unit on the 2nd Floor of the Central zone of the Royal United Hospital.

Parking

If you intend to be driven to the hospital, parking may be quite difficult when you arrive. Please be prepared to wait at least half an hour for a space and allow for this when setting out for your appointment.

Should I take my medicines as normal?

If you take essential prescribed medication, for example- for epilepsy or a heart condition, you may take these with a **little** water.

If you are a diabetic, we advise that you telephone the department and inform them of what medicine you take and a trained nurse will be able to advise you on how best to take your medication.

What should I expect?

- On arrival at the unit, report to the reception desk. One of the reception staff will check your details and ask you to take a seat in the waiting room.
- A nurse will collect you from the waiting room and take you to the ward area. Here she will check your details and discharge arrangements with you.
- It is department policy that your family or friends do not accompany you to the ward area as it is a theatre environment. They will be called to the area when you are ready to leave.
- A nurse will discuss the procedure with you. If you have any questions, please ask. We want you to be as relaxed as possible
- It is necessary to remove any false teeth. This can be done in the examination room, immediately before the procedure. They will be kept safe until you are fully awake.
- The ward is a mixed sex area; however, the staff are committed to ensuring your privacy at all times.

Is the procedure painful?

The procedure should not be painful. However, you may experience discomfort as the tube touches the back of your throat. Your stomach may feel slightly distended at times during the examination but you should not feel unduly uncomfortable.

There are 2 ways that the test can be made as comfortable as possible for you:

- Local anaesthetic spray to the back of the throat, numbs the area and makes it easier to pass the tube
- A mild sedative injection into a vein makes you feel a little sleepy and relaxed.

Your choice will be discussed with you prior to the procedure.

Sedation (going to sleep)

A small needle will be placed in the back of your hand and the sedation will be injected through it.

Sedation may make you drowsy and you may not remember the procedure taking place, however, it is not a general anaesthetic.

You may wake up fairly quickly or more slowly each person reacts differently.

Your thinking processes and movements will be slower than usual.

During the test

- A nurse will escort you to the examination room. Here you will meet the doctor and 2 nurses who will remain with you throughout the test.
- It is necessary to lie on your left side. When you are comfortable, local anaesthetic may be sprayed onto your throat or if you wish a sedative injection can be given.
- When the doctor passes the endoscope, it is important to remain calm. It should not cause you any pain, nor will it interfere with your breathing.
- To keep your mouth slightly open, a plastic mouthpiece will be placed gently between your teeth.
- It may take up to 10 minutes to examine the stomach carefully. During this time some air will be passed down the tube to distend the stomach and allow the doctor a clear view. The air is sucked out at the end of the test.
- If you get a lot of saliva in your mouth, the nurse will clear it using a slim suction tube.
- When the examination is finished the tube is removed quickly and easily. You will be taken back to the ward on the trolley to recover where a nurse is always present.

When can I go home?

If you choose to have the sedative injection you will stay in the department for approximately 1 hour following the procedure. We prefer that you remain with us until you are fully awake to ensure that the effects of the sedation have worn off.

If your throat has been sprayed with local anaesthetic, you will have to wait until the effects of the spray has worn off before you have anything to eat or drink, normally about half an hour. Otherwise you can leave the department straight away.

The department closes at 5.00p.m.

How will I feel after the test?

We advise that you do not go to work on the day of the test.

- If you have been sedated, the effects will have worn off by the next day. You will then be able to resume normal activities.
- Your throat may feel a bit sore for the rest of the day. It will settle without treatment
- You may also feel a little bloated. This is due to air remaining in your stomach following the test. It will soon settle and does not require any treatment or medication.

When you get home it is important to rest quietly for the remainder for the day, with someone to look after you for 12 hours afterwards if you have been sedated

What should I do when I get home?

If you have sedation, then for the next **24 hours** you must not:

- Drive any motor vehicle. This is a legal requirement not advice. Our advice is that you should not actually drive for **48 hours**.
- Operate machinery
- Drink any alcohol
- Sign legally binding agreements
- Care for children or relatives.

When will I know the results?

If you have **not** been sedated, the doctor will tell you what he has seen and done straight after the test.

If you have been sedated, the nurse on the ward will relay the information to you when you are fully awake. We like to do this with a family member present, as the sedative drug used can make you forget what you have been told. If you object to having your results with a family member please let the nursing staff know.

A report will be sent to your GP. Further details of the test, results of any biopsies and any necessary treatments or medications should be discussed with your GP. The nurse will tell you before you leave if you require an outpatient appointment with the consultant.

The consent form

The consent form gives the doctor and the hospital a formal indication that you are agreeing to undergo the treatment being offered as stated in the form. It is valuable to you as it offers a written check on what you are agreeing to by signing.

When an appointment is made for your endoscopy you will be sent a copy of this information booklet containing a consent form for you to sign.

Training doctors is essential to improving the quality of care. Your treatment may provide an opportunity for such training under the supervision of a senior doctor. You may decline to be involved in this training without adversely affecting your care and treatment.

What if I change my mind?

You are quite within your rights to change your mind. If having read this leaflet you have decided not to go ahead with the test, please telephone the department and discuss your decision with your GP.

Please complete the following health questionnaire

Do you consider yourself fit and well? _____

Has there been any recent change in your health? _____

Do you have or have you ever had any of the following problems. Please give details.

• Heart problems NO YES _____

• Breathing Problems NO YES _____

• Diabetes NO YES _____

• Seizures NO YES _____

• High Blood Pressure NO YES _____

• Stroke NO YES _____

• Glaucoma NO YES _____

• Arthritis NO YES _____

Are you taking any regular medication?
Please give details. _____

Who is collecting you? _____

Please give a contact telephone number. _____

Who is at home with you for 12 hours after the test? _____

This leaflet is produced by the Gastroenterology and Surgical Unit at the Royal United Hospital, Bath.

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