

Community Endoscopy Service

Gastroscopy Instruction Notes

Our aim is to make your visit to the Community Endoscopy Service as safe, easy and as relaxed as possible.

To help us achieve this, please read this booklet and follow the instructions as stated.

A gastroscopy has been booked for you. Please see enclosed letter.

If you are unable to attend this appointment, please telephone the number detailed on your letter.

The centre is open Monday to Friday and whilst it is not always possible for calls to be answered personally, an answer phone service is available and your call will be returned as promptly as possible.

Patient Data

All patient records are handled ensuring patient confidentiality is maintained at all times. Information from your diagnostic test will contribute to the Diagnostic Imaging Dataset.

Nothing will ever be reported that identifies you.

The Diagnostic Imaging Dataset (DID) is a database that holds information on the imaging tests and scans carried out on NHS patients. This will allow the Health and Social Care Information Centre to see how different tests are used across the country.

The following information is collected:

- information about the diagnostic tests that you have
- your NHS number
- your date of birth
- postcode

All information is stored securely. It is only made available to appropriate staff, and is kept strictly confidential.

The dataset will be most effective when it has information from as many patients as possible.

However, if you do not want your information to be stored in the DID, **please tell the people who are treating you**. They will make sure your information is not copied into the DID. You may, at a later date, still decide to opt out. Please contact the Health and Social Care Information Centre directly, their contact details are: • Telephone: 0845 300 6016 • Email: enquiries@ic.nhs.uk • Website: www.ic.nhs.uk

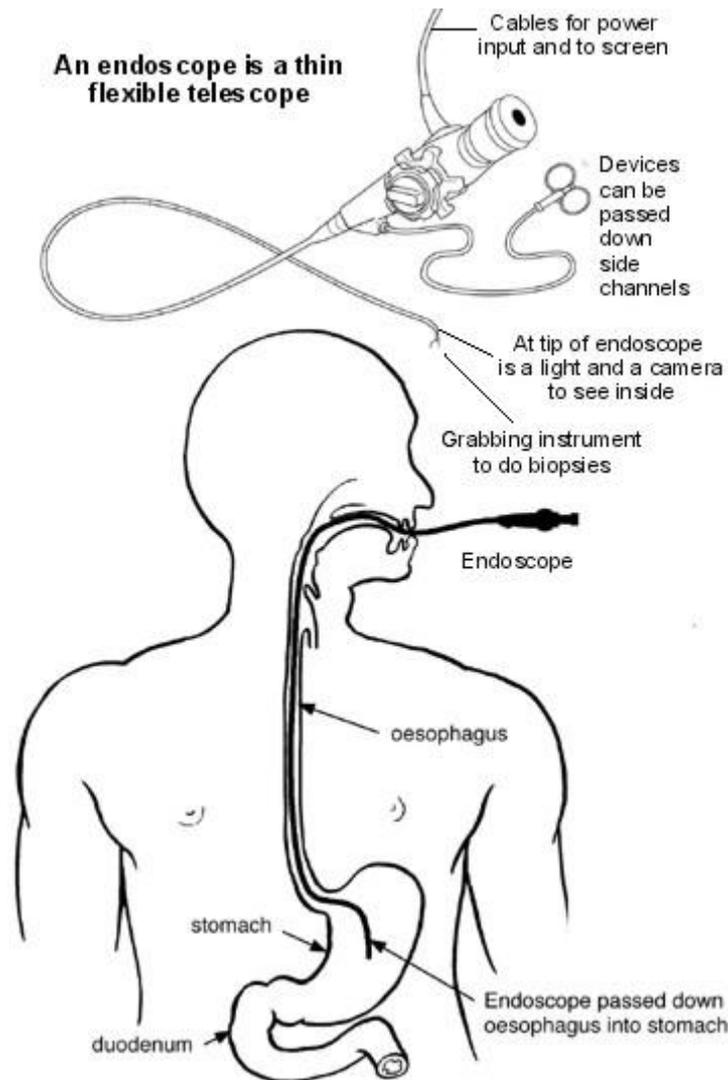
Check List of items to bring with you	
Consent form	
Health Questionnaire	
List of medication	
Contact number of transport home if you are having sedation	
Please leave all valuables at home, the clinic cannot take responsibility for the loss or damage to personal property during your time on the premises.	

Instructions for all patients

- It is very important that **YOU DO NOT EAT OR DRINK FOR 6 HOURS** before your procedure to ensure your stomach is entirely empty.
- If you are diabetic and take insulin or tablets please make sure you read page 5 and 6.
- If you are taking Warfarin, Aspirin or other tablets to thin the blood please make sure you read page 6.
- Any regular medication may be taken on the morning of the procedure with a small amount of water.
- Please bring with you a list of all current medication and inhalers.
- Please try **not** to smoke for 2 days prior to this procedure.

What is a Gastroscopy?

This is a test that allows the endoscopist to look into your oesophagus (gullet), stomach and duodenum (small bowel), using a small flexible tube (endoscope). This contains a camera so that the endoscopist can see the lining of the stomach to check for problems which might be causing your symptoms.



This diagram depicts endoscopy via the mouth.

Sometimes the endoscopist takes a biopsy – a sample of the lining - for examination in the laboratory. A small piece of tissue is removed painlessly through the endoscope using tiny forceps. There are now very advanced endoscopes which are slimmer and make the test much more comfortable.

The endoscope is generally passed through the nose and into the gullet, however, if your nose is narrow or has been damaged it may not be possible to pass the nasal endoscope. If this is the case we will pass the endoscope through the mouth.

Before completing the test we make the inside of the nose/throat numb using anaesthetic spray so there is virtually no discomfort when the tube is passed. Once the nose/throat is numb we proceed with the gastroscopy. During the procedure you will be able to breathe normally and if having a nasal endoscopy you will also be able to talk.

The procedure itself takes between 5 – 15 minutes; however you should expect to be at the clinic for 2-3 hours. This does vary from clinic to clinic and is dependent on whether you have sedation. The admitting nurse will be able to give you an estimated time on the day.

Patients undergoing their first Gastroscopy

It is also important to stop the following prescribed acid reduction tablets 2 weeks before the procedure as these drugs can reduce the value of the procedure by masking some symptoms:

OMEPRAZOLE (LOSEC) LANSOPRAZOLE (ZOTON)
ESOMEPRAZOLE (NEXIUM) PANTOPRAZOLE (PARIET)

Patients undergoing a repeat procedure

Continue with your normal acid reduction medication.

What will happen after the Gastroscopy?

Once the test is finished the endoscopist will explain what they have found and give advice on how to improve your symptoms. You will then rest for a few minutes. Once the nurse has again explained the findings and given you an information leaflet, you can leave the clinic and continue your day as normal.

If biopsies have been taken the results will take approximately 2-3 weeks. Please make an appointment with your GP to discuss them after this time. Do not telephone the clinic for results, as they will not be available.

How should I look after myself afterwards?

After one hour has passed do drink plenty of fluids. You can resume your normal diet.

Are there any complications?

As with every medical procedure the risk must be compared to the benefit of having the procedure carried out. Your doctor who has requested the test will have considered this very carefully.

Gastroscopy is what is known as an invasive procedure and, therefore, carries risks/complication.

The major risks/complications include:

- Loose teeth, crowns and bridgework can occasionally be dislodged.
- If you have a narrowing of the gullet there is a risk of making a small hole [perforation]. This happens very rarely unless it is a cancerous narrowing (stricture) when the chance increases to about 1 in 10
- Pneumonia from stomach juices getting into the lungs can occur in very frail patients.
- Bleeding from the biopsy site. This usually settles on its own.
- Disturbance of your heart rate and breathing.
- A sore throat or abdominal tenderness. Incomplete gastroscopy occurs if the test is abandoned due to technical difficulty or because it was causing you distress. A further test such as a barium swallow/meal may be recommended in the future.

Sedation

Some patients require sedation in order to undergo the procedure; this is identified on your appointment letter.

Specific instructions for patients receiving sedation are as follows;

- You will not be able to drive a car, travel by public transport, operate machinery or sign any legal documents until 24 hours after your procedure as your judgement may be impaired.
- You must arrange for someone to take you home, this could be up to three hours after your appointment time.
- You will need a responsible adult at home to stay with you until twelve hours post procedure.
- You are advised not to drink alcohol or smoke.

Complications

- Possible complications from sedation are rare but may include nausea, vomiting, (chest infection following regurgitation of vomit.), low blood pressure, low blood oxygen levels
- In extreme cases patients may experience chest -pain, irregular heartbeat, stroke or heart attack.

Consent

A nurse will explain the procedure to you and check that you have a full understanding of your test and all that it means before verifying your consent for the procedure.

If you are diabetic on insulin follow the instructions below:

For a morning appointment:-

- The night before your test - Take half your normal dose of insulin and a bedtime snack.
- On the morning of the test - Do NOT take your morning dose of insulin, but bring your insulin with you to the clinic.
- Do check your blood sugar before leaving home - If it is low take a small amount of sweet drink.
- After the test - Administer your usual morning dose of insulin and then eat as normal.

For an afternoon appointment:-

- On the morning of the test - Take half your normal dose of insulin and a light breakfast at least 6 hours before the test is due.
- After the test - Have a light snack, take your normal evening dose of insulin and normal evening meal but check your blood sugar levels more often, taking sweet drinks if the level is low.

If you are diabetic on tablets follow the instructions below:

For a morning appointment:-

- The night before your test - Take half your normal tablets and a snack.
- On the morning of the test - Do NOT take your tablets but bring them with you to the clinic.
- After the test - Take your tablets and eat a sandwich.

For an afternoon appointment

- The night before your test - Take half your normal tablets and a snack.
- On the morning of your test - Have a light breakfast at least 6 hours before the appointment. Check your blood sugar; if it is low take a small amount of a sweet drink.
- After the test - Have a light snack, and take your normal tablets in the evening with your evening meal.

If you are taking tablets to thin your blood such as Warfarin please read the following instructions carefully:

- Make an appointment to have your INR checked no more than one week before the day of your procedure and bring the results with you.
- If it is in the therapeutic range (the range individually specified for you by your doctor) then continue with the same dose of Warfarin.
- If the INR is above your therapeutic range, then you will need to reduce the dose of Warfarin to bring the INR back to within the therapeutic range.
- You do not need to stop taking the Warfarin tablets.

If you are taking anti-platelet tablets (drugs which thin the blood and reduce clots) for example Dipyridamole (Persantin) or Clopidogrel (Plavix)

- You do not need to take any action and should continue with your medication at the same dose.

If you are unsure with regard to the above instructions, please consult your GP or practice nurse taking this information with you.

Discharge instructions

After your test you will be taken out into our recovery area. Your blood pressure and pulse will be taken until you are awake and alert. Before you go home you will be offered refreshments. The endoscopist will give you the preliminary results of your test. When the nurse feels you have recovered enough she will discharge you from the unit

You may experience some abdominal discomfort and wind, do not hold it in, allow it to pass out naturally.

In the unlikely event of any severe pain or bleeding, this should be reported at once to your GP. Out of hours you should attend your nearest Emergency Department.

Further resources

<http://www.bupa.co.uk/individuals/health->

[information/directory/g/gastrointestinal#textBlock208521](http://www.bupa.co.uk/individuals/health-information/directory/g/gastrointestinal#textBlock208521)

<http://www.nhs.uk/Conditions/therapeuticendoscopyofthestomach/Pages/Whatisitpage.aspx>

If you wish to comment or complain about any aspect of the service provided, including these notes, please address your comments to:

National Operations Manager

Community Endoscopy Service,

Beechwood Hall

Kingsmead Road

High Wycombe

Buckinghamshire

HP11 1JL

Please state clearly within your letter which Endoscopy Unit you attended.

Community Endoscopy Service

Patient, please fill in before attending
NHS No:
Surname:
First name:
DOB:
Address:
Tel No:

Consent Form for Gastroscopy

(Endoscopic examination of the gullet, stomach and duodenum.)

This is a special test to enable us to look at the lining of your gullet, (oesophagus) stomach and first part of the small bowel (duodenum). It lasts about 10 minutes and involves passing a long, thin flexible tube with a tiny camera on the end of it, down your gullet and into your stomach.

During the procedure it may be necessary to remove small pieces of tissue (perform a biopsy) for further testing in the laboratory. A photograph of any abnormalities seen may be taken and it will be kept on your medical record and shown to doctors looking at your biopsy.

Possible Side Effects

Many people who have the procedure will experience mild discomfort in the tummy and wind.

Complications - these are very rare;

- Loose teeth, crowns and bridgework can rarely be dislodged.
- If you have a narrowing of the gullet there is a risk of making a small hole (perforation). This happens very rarely unless it is a cancerous narrowing (stricture) when the chance increases to about 1 in 10.
- Pneumonia from stomach juices getting into the lungs can occur in very frail patients.

The test takes 2-5 minutes to complete for most people, and is undertaken with local anaesthetic to numb the nasal passages and the back of the throat by means of a spray.

Sedated Patients

On occasions it is necessary to provide sedation by injection to help with the anxiety that some patients associate with this test. Please be aware however that whilst the sedation will make you calmer, you will remain conscious throughout the test. If you do have sedation we insist that you are collected from the clinic by a friend or relative, and that you do not work for the rest of the day.

Sedation can occasionally cause problems with breathing, heart rate and blood pressure. If any of these problems do occur, they are normally short lived. In all cases, sedated or not, we undertake careful monitoring by a fully trained endoscopy nurse to ensure that any potential problems are identified and treated rapidly.

Those who have significant health problems (for example, people with significant breathing difficulties due to a bad chest) may be assessed by the doctor doing the test, before having the procedure.

Before the procedure starts you will be given sedation, which will be administered through a vein in your hand or arm. This will make you lightly drowsy and relaxed, but not unconscious. You will still be able to breathe normally and follow simple instructions during the investigation. Due to the effects of the sedation you will not remember much of the examination after recovery.

Local anaesthetic to numb the nasal passages and the back of the throat by means of a spray will be used to make the procedure more comfortable for you.

Sedation Risks

Sedation can occasionally cause problems with breathing, heart rate and blood pressure. If any of these problems do occur, they are normally short lived. Careful monitoring by a fully trained endoscopy nurse ensures that any potential problems can be identified and treated rapidly.

If you have any questions please make a note of them here and we will answer them when you come in for your test.

Unless you have any reservations, please sign this consent form and bring it with you when you come for your appointment.

Statement of Patient [or person with parental responsibility for the patient]
I agree to the procedure as described.

I understand that you cannot give me a guarantee that a particular person will perform the procedure. The person will however, have appropriate experience.

I understand the possible complications and that any procedure in addition to the gastroscopy will only be carried out if it is necessary and in my best interests and can be justified for medical reasons.

Signature

.....Date.....

Name

[PRINT].....

...

A witness should sign below if the patient is unable to sign but has indicated his or her consent.

Signed

.....Date.....

.

Name [PRINT]Relationship to patient.....

Confirmation of Consent [to be completed by a health professional when the patient is admitted for the procedure, if the patient has signed the form in advance]

I have discussed with the patient the options for sedation and agreed with them that they

Will receive local anaesthetic (Nasal Spray) for this procedure

Will receive local anaesthetic (Throat Spray) for this procedure

Will receive sedation for this procedure for this procedure

I have confirmed with the patient that he/she has no further questions and wishes to go ahead.

Signed.....Date.....

Name [PRINT].....

Job Title.....

Statement of Health Professional

[To be filled in by health professional with appropriate knowledge of the proposed procedure, as specified in consent policy where the patient is unable to sign.]

I have explained the procedure to the patient / parent including benefits, and serious or frequently occurring risks.

I have discussed what the procedure is likely to involve, the benefits and risks of any available alternative treatments (including no treatment) and any particular concerns of those involved.

SignedDate.....

Name [PRINT].....

Job Title.....

Statement of Interpreter [where appropriate]

I have interpreted the information to the patient / parent to the best of my ability and in a way that I believe s/he/they can understand.

Signed.....Date.....

Name [PRINT].....

Top copy to be placed in patient records

2nd copy to be given to patient

Copy accepted by patient

YES / NO [please ring]

Community Endoscopy Service
Health Questionnaire

NAME.....

To help us minimise the risk of the procedure we would like you to answer the following questions:

1. How would you rate your general health? (Please circle) GOOD FAIR POOR

2. Has there been a recent change in your health? YES / NO

 If yes – please describe

.....
.....

3. Are you pregnant? YES / NO

4. Have you had any surgery on heart, lungs, stomach or bowels in the past? YES / NO

5. Do you live on your own? YES / NO

6. Please circle any of the following which you have or may have had in the past:

 Heart attack or Heart failure YES / NO

 Pacemaker YES / NO

 Stroke YES / NO

 Lung Problems (eg asthma, COPD, emphysema) YES / NO

 High blood pressure YES / NO

 Diabetes YES / NO

 If YES controlled by (please circle) DIET / TABLETS / INJECTION / NONE

 Bleeding problems YES / NO

 Seizures or epilepsy YES / NO

 Rheumatic Fever/Infections YES / NO

 Recent chemotherapy or radiotherapy YES / NO

7. Have you ever been advised that you are at risk of CJD or vCJD YES / NO

8. Are you allergic or sensitive to anything eg; other hospital tests, medicines or adhesive tape? YES / NO

If 'Yes', please list and describe what happened

.....

.....

9. Please list any medicines you are taking (including all prescription drugs, even non-prescription Aspirin and 'The Pill')

Name of Medicine	Dosage (amount)	How many times per day?