



## Endoscopy Unit

# Having a Gastroscopy

This leaflet will explain what a Gastroscopy is and tell you what to expect when you come to the hospital.

### General Information

#### TELEPHONE NUMBERS FOR ENDOSCOPY DEPARTMENT

RECEPTION (general enquiries only):	01305 255225
APPOINTMENTS (appointment enquires only):	01305 255701
CLINICAL ADVICE (any medical enquiries):	01305 253152

If you call the Clinical Advice line and your call goes to answer phone, please leave a message with the following details:

- Your name and telephone number.
- The procedure you are having.
- Date and time of your appointment.
- Your reference number (hospital number) or our reference number (NHS number).
- Your query.

Someone will return your call as soon as possible to discuss your telephone message with you.

**If you are using hospital transport and your appointment is after 2pm please contact the appointments line to rearrange an earlier appointment.**

### We are privileged to be a training hospital

There may be a trainee Endoscopist observing or performing your procedure. If this is the case, there will also be a Consultant present, and you will be informed during your admission. You do have the right to decline their participation in your procedure; please let the admitting nurse know of your wishes.

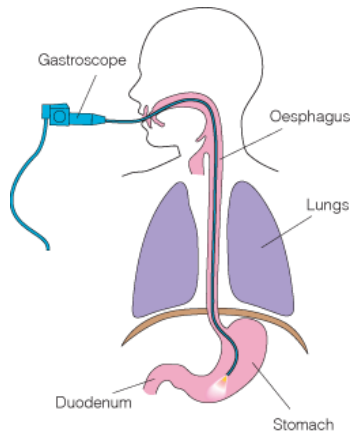
## Gastroscopy – Planning your Care

If you are taking any of the following medications or have any the medical conditions listed here, please contact the Clinical Advice line above to help us plan appropriate care and management of your condition during your visit with us:

<b>Do the Following Apply?</b>	<b>If YES:</b>
A steroid deficiency eg Addison's disease (Adrenal Hyperplasia)	Call the clinical advice line
Diabetes	Call appointments to ensure early appointment
Parkinson's	Call appointments to ensure late morning/early afternoon appointment
Aspirin therapy	No action
Recent heart attack	Call clinical advice line
Warfarin therapy (Barrett's patients please see below)	No action
Blood thinners, such as Clopidogrel, Prasugrel and Ticagrelor (Barrett's patients please see below)	No action
Blood thinners such as Dabigatran, Rivaroxaban and Apixaban (Barrett's patients please see below)	Omit morning dose on day of procedure
Barrett's Surveillance and taking Warfarin or blood thinners such as Clopidogrel, Prasugrel Ticagrelor, Dabigatran, Rivaroxaban and Apixaban	Call clinical advice line

## What is a Gastroscopy?

A Gastroscopy is a look at your gullet, (called "oesophagus"), stomach and first part of your small bowel (called "duodenum").



The instrument used to do the examination is called a Gastroscope. It is a flexible tube with a bright light and a tiny camera at the tip that transmits pictures of the inside of your stomach to a screen.

This is not a painful procedure; however, there can be some temporary discomfort.

The procedure is normally carried out using a local anaesthetic spray to the throat.

Sedation is available if required; however, this is dependent on medical fitness. Please discuss this with the Endoscopist at the time of your appointment.

**Please Note:** If you choose to have sedation, you must have someone come into the Endoscopy Unit to collect you, accompany you home and look after you for 24 hours.

## Why do I need Gastroscopy?

The purpose of a Gastroscopy is to see if there is any inflammation or abnormalities of the gullet, stomach and first part of the small bowel.

## How will it help me?

A Gastroscopy allows the lining of the gullet, stomach and duodenum to be seen very clearly. It is an excellent way to get a diagnosis of your complaint or to reassure you that all is well.

The gastroscopist has a hollow tube inside that can be used to take samples of tissue (called biopsies). These can be examined in the laboratory under a microscope.

## How safe is a Gastroscopy?

It is common to feel slightly “windy” immediately following the procedure but this settles very quickly. Complications following Gastroscopy are rare but, as with all medical procedures, there are some risks of which we must make you aware.

**Risk of inhaling stomach contents** - this is why we ask you not to eat or drink for six hours before your appointment (during the procedure any moisture in the mouth can be removed using a small suction tube, like at the dentist).

**Risks from sedation** - sedation medication can affect the breathing, but in order to minimise any risk, your dose is individually assessed and your oxygen level monitored throughout the procedure.

If you are asthmatic, or have any breathing difficulties, please inform the Nurse on your arrival and bring your inhalers with you.

It is rare, but an allergic reaction to medications can occur and will need medical treatment.

**Risk of damage to teeth or bridgework** - Please advise the Nurses before the procedure if you have any broken or loose teeth. Dentures are removed before the procedure.

**Risk of sore throat** - you may experience an unusual sensation in your throat for a day or two afterwards.

**Risk of bleeding** – a trace of bleeding noticed in saliva, or a black stool, is not unusual and should not cause alarm especially following biopsies.

If heavier bleeding occurs, it may require further treatment in hospital. Please contact your GP or attend the Emergency Department.

**Risk of perforation** - (a tear in the gut lining). This is a serious, but rare complication, which would involve you having to stay in hospital, and may need surgical treatment.

Following the procedure, if you have any severe chest pains, please contact your GP or attend the Emergency Department.

As with any test, there is a risk of minute abnormalities not being seen despite a thorough examination.

Discharge advice will be discussed with you following your procedure.

## **Is there an alternative to a Gastroscopy?**

Currently Gastroscopy is the only way to inspect the lining of the upper gut and take biopsies at the same time.

## **How do I prepare for my Gastroscopy?**

It is important that your stomach is empty for the procedure to be successfully performed. In order to do this, you **must not eat for 6 hours** prior to your appointment time. You may drink clear fluids up to 2 hours prior to your appointment time. No sweets or chewing gum. Any medication that needs to be taken can be taken with a sip of water four hours prior to the appointment.

Please refer to “**Planning Your Care**” at the beginning of this booklet.

## **What about my Medications?**

Please bring a list of all your medications with you.

Please inform the nurse on admission if you are taking antibiotics (It is important **not** to stop taking these).

**Remember if you are unsure about this examination please seek more information from the doctor who referred you.**

## **What happens when you get to the Endoscopy Unit?**

When you come to the Endoscopy Unit, please give your name to the receptionist.

A nurse will take you through to a private office where you will be asked some questions about the arrangements you have made to get home and about your health. The nurse will check your breathing, pulse and blood pressure. Please tell the nurse if you are allergic to any medicines.

You can ask any questions that you have or tell the nurse of any worries. It is not unusual to feel anxious about having a Gastroscopy. The nurses and doctors understand this and will do their best to reassure you.

There is no need to change into a hospital gown for this procedure, although wearing loose clothing will be more comfortable.

Once the nurse has finished taking your details, you will be asked to sit back in the waiting area where the Endoscopist will come and meet you and any remaining questions can be asked.

## **Signing the Consent Form**

The Endoscopist or Nurse will meet and talk to you about the procedure. It is important before signing the consent form that you understand what is likely to happen. You will be given time to ask any questions that you may feel necessary to make up your mind.

## **Your Gastroscopy Procedure:**

- You will be taken to a procedure room for the procedure.
- The team will complete a safety check list for your procedure.
- You will be asked to remove any dentures.
- If you are having throat spray, your throat will be sprayed with a local anaesthetic which will numb the back of your throat. (It tastes bitter and alters the sensation in your throat).
- If you are having sedation, the Endoscopist or Nurse will ask you to lie down on the trolley and a plastic tube called a cannula will be inserted into your arm or hand.
- You will be asked to lie on your left side on a trolley.

- A small device will be placed on your finger or ear to take your pulse and record your oxygen level. For sedated patients, a blood pressure cuff will be put on your arm.
- A small plastic mouth guard will be placed between your teeth.
- The Endoscopist will inject the sedation medication allowing time for it to work.
- The gastroscope will be gently guided over the back of your tongue and down your throat. This is the way your food goes down every day. The first few seconds may feel unusual, but this settles very quickly.
- A nurse will be supporting your head at all times to reassure you. They may use a small suction tube to remove any moisture from your mouth.
- There is nothing to stop you breathing normally.
- After the procedure you will then be taken to a recovery area.

Sometimes it is necessary to take tissue samples, called biopsies. This will be explained when the Endoscopist or Nurse discusses your consent. Photographs are taken to record abnormalities and areas in the upper gut.

The procedure can feel a little uncomfortable at times, but is not painful. It is not unusual to feel some discomfort when the gastroscope passes into the gullet. Your stomach will be inflated with a little air to get a clearer view. You will be monitored by a nurse during the whole procedure.

### **How do I get the results?**

When the procedure is over, the Endoscopist and Nurses will talk to you about any results. Biopsies need time to be processed and the results will be available to the referring Doctor/GP, along with a copy of the report. If biopsies are taken, you will be advised to visit or phone your GP after two to three weeks for the result, unless advised otherwise at the time of the procedure.

### **Are there any restrictions afterwards?**

A nurse will prepare your discharge information to take home with you. This information includes instructions on how you need to take care of yourself until the throat spray or sedation has worn off.

If needed, you will be given a leaflet that will explain any specific findings in more detail.

If you have had throat spray, it is important that you do not attempt to eat or drink anything for an hour after the throat spray. Instructions will be provided on discharge.

If you have had sedation, you will be given time to recover before being allowed home. It is helpful to have a responsible adult with you to listen to the discharge advice because the medication that you have had may make you temporarily forgetful.

## Going Home

### With Throat Spray

A nurse will give you some discharge advice. You will be advised not to eat or drink until the effects of the spray have worn off (about 1 hour). Start with some sips of cool water and, as long as you can swallow this normally, you can go on to eat and drink normally. There are no other restrictions to your lifestyle. You will be advised to visit your GP in 7-10 days to discuss the results of the Gastroscopy.

### Following Sedation

#### **PLEASE REMEMBER:**

If you have chosen the sedative injection, you **must** have a responsible adult come into the Endoscopy Unit to collect you, drive you home and look after you for 24 hours. We cannot administer sedation if these arrangements are not in place.

**Travelling on public transport (train or bus) is inappropriate. You can travel by taxi, but must have a responsible adult with you.**

For the 24 hours after the procedure you **must not**:

- drink any alcohol
- drive a car
- operate machinery
- sign any legally binding documents
- be responsible for young children or frail or elderly people
- lock the bathroom door.

You can go back to your normal eating and drinking but start with something light.

If you experience any problems related to your visit to Endoscopy, including the need to see your GP or attend hospital, please let the department know. A brief written summary would be helpful. We welcome all feedback to enable us to further improve the service offered. You can contact us on **01305 255225** (Reception).

**Please note: individuals are unable to donate blood for 4 to 6 months after flexible endoscopy and until they have informed the blood service of the diagnosis.**

## Patients' Property

You are advised not to bring expensive items of jewellery or clothing with you when you visit the Endoscopy Unit. You will be asked to keep your property with you at all times. The Endoscopy Unit and Dorset County Hospital NHS Foundation Trust cannot accept responsibility for the safeguarding of your property.

## Getting Here

**The car park is pay & display.** You will need to pay for the first 2 hours and a permit will be issued thereafter.

When you enter the hospital grounds, follow the signs for North Wing Entrance 1. The Endoscopy Unit will be signposted as you enter the main entrance.

## About this leaflet:

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If you have feedback regarding the accuracy of the information contained in this leaflet, or if you would like a list of references used to develop this leaflet, please email [pals@dchft.nhs.uk](mailto:pals@dchft.nhs.uk)



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