

Your Upper G.I. Endoscopy at Emory

Please visit our website at
www.emory.edu/digestive-health

This document contains the following:

- I. Information about how to prepare for an Upper GI Endoscopy.
- II. General information about an Upper GI Endoscopy.
- III. Directions to the Emory Clinic Building B
- IV. Registration and insurance information.
- IV. The informed consent process.

Important Points

Please review requirements for having an escort/driver after your procedure, in section I.

Please review the medication and diet information, on pages 2, 3 and 4.

YOUR PROCEDURE IS SCHEDULED WITH DOCTOR _____
PHONE 404-778-3184. YOUR APPOINTMENT IS _____ AT
_____ AM/PM. PLEASE ARRIVE AT _____ AM/PM. IF
YOU HAVE QUESTIONS ABOUT THESE INSTRUCTIONS PLEASE CALL
(404)778-3184 AND ASK TO BE CONNECTED WITH THE NURSE DURING
WORKING HOURS. (FOR URGENT PROBLEMS AFTER HOURS ASK TO SPEAK
WITH THE GI FELLOW ON CALL)

A similar document is available on line at our website listed above. It can be downloaded, printed, or viewed from the website 24 hours a day.

Last Update: May 26, 2004

Your Upper GI Endoscopy Instructions

Special Precautions:

Since medications will be given to make you sleepy, **you will not be able to drive or return to work.** If you are unable to bring someone with you, to drive you home, you will be unable to receive routine medications given for sedation.

Medication Precautions:

There are several medication precautions that must be followed when preparing for your procedure.

MAO Inhibitors:

If you are currently taking MAO inhibitor (See the corresponding **Medication Avoidance List**) please call your doctor.

Blood Thinner Medication:

Medications such as coumadin (warfarin) and heparin, will require that you get a blood test called a protime done the day before your procedure. Bring the result with you to your procedure. At some point before your procedure your doctor may change the dose or stop the medication. We will coordinate any changes necessary with your primary care physician.

Antibiotic Therapy before Your Procedure:

If you have significant heart disease, a heart murmur or if you have ever required antibiotics prior to procedures or before going to the dentist, please notify the GI Lab staff upon arrival.

Diabetics:

You may need to be scheduled with an early morning appointment. There may also need to be some medication changes prior to your procedure. Call your physician to discuss the need to change your insulin or oral medication.

Two Weeks Prior to your Upper Endoscopy:

Make arrangements to have someone take you home after the procedure.

AVOID all aspirin and "aspirin products" (See the corresponding [Medication Avoidance List](#)) **AVOID** all anti-inflammatory or arthritis medications such as Ibuprofen and Naprosyn (See the corresponding [Medication Avoidance List](#))

Night Before your Upper Endoscopy:

Do not eat or drink anything after midnight.

If you are scheduled for the afternoon, you may have clear liquids before 8am.

You may take your routine medications that are NOT on the avoidance list with a sip of water.

The Day of Your Upper Endoscopy:

Continue with nothing to eat or drink before your procedure.

Arrive at the **Endoscopy Center**, which is on the 1st floor, Emory Clinic Building B 1 hour prior to your appointment time.

Arrival to the Endoscopy Center:

When you arrive to the unit sign in with the receptionist. You will be taken to the holding area of the unit for preparation for your procedure, (i.e., you will be asked to change into a gown, obtain your vital signs, given an IV and placed on monitoring equipment). Your doctor will explain the procedure and its risks, answer any questions you might have and have you sign a consent form. You will be taken to another room where your procedure will be done.

PLEASE BE AWARE THAT MANY PATIENTS ARE BEING CARED FOR IN THE GI UNIT. YOUR DOCTOR MAY BE REQUIRED TO SPEND EXTRA TIME WITH PATIENTS WHO ARE VERY ILL AND HAVE SPECIAL NEEDS. THEREFORE YOUR PROCEDURE MAY NOT BEGIN AT THE SCHEDULED TIME. YOU MAY WISH TO BRING A BOOK OR OTHER ITEM TO KEEP YOU OCCUPIED WHILE WAITING FOR YOUR DOCTOR.

After the Procedure:

You will be taken to a recovery area where you will be monitored until you are awake. Your doctor will discuss the findings from the procedure with you and your family or significant other once some of the medications have worn off. The nurse will give you a discharge instruction sheet before you leave.

Medication Avoidance List

*** This may not be a complete product listing. Other products may also contain these drugs so you should review the contents of any medications that you take to see if they contain the any of the drugs listed above.***

IF YOU HAVE QUESTIONS ABOUT THESE INSTRUCTIONS PLEASE CALL (404)778-3184 AND ASK TO BE CONNECTED WITH A NURSE DURING WORKING HOURS. (FOR URGENT PROBLEMS AFTER HOURS ASK TO SPEAK WITH THE GI FELLOW ON CALL)

ASPRIN OR ASPRIN-LIKE COMPOUNDS

Nonprescription:

Alka-Seltzer Antacid Pain Reliever, Alka-Seltzer Plus Cold Preparations, Anacin Maximum Strength Tablets, Arthritis Pain Formula Tablets, Arthritis Strength Bufferin Tablets, Ascription A/D Caplets, Aspergum, Bayer Aspirin Caplets/Tablets, Bayer Plus Tablets, Maximum Bayer Caplets/Tablets, 8-Hour Bayer Extended-Release Tablets, BC Powder, BC Cold Powder, Buffaprin Caplets/Tablets, Bufferin Caplets/Tablets, Bufferin Arthritis Strength Caplets, Cama Arthritis Pain Reliever Tablets, Doan's Pills Caplets, Ecotrin Caplets/Tablets, Empirin, Excedrin Extra-Strength Caplets/Tablets, Midol Caplets, Mobigesic Analgesic Tablets, Norwich Tablets, P-A-C Analgesic Tablets, Pepto-Bismol Liquid/Tablets, Sine-Off Tablets Aspirin Formula, St. Joseph Adult Chewable Aspirin, Therapy Bayer Caplets, Trigesic, Ursinus Inlay-Tabs, Vanquish Analgesic Caplets,

Prescription: Darvon Compound-65, Disalcid Capsules/Tablets, Easprin Tablets, Emprin with Codeine Tablets, Equagesic Tablets, Fiorinal Capsules/Tablets, Fiorinal with Codeine Caplets/Tablets, Lortab ASA Tablets, Magsal Tablets, Mono-Gesic Tablets, Norgesic & Norgesic Forte Tablets, Percodan & Percodan-Demi Tablets, Robaxisal Tablets, Salflex Tablets, Soma Compound Tablets, Soma Compound with Codeine Tablets, Synalgos-DC Capsules, Ursinus Inlay-Tabs, Talwin.

IBUPROFEN or NAPROXEN SODIUM

Nonprescription:

Advil Caplets Tablets, Advil Cold/Sinus Caplets, Aleve Caplets/Tablets, Bayer Select Ibuprofen Pain Relief Formula Caplets, Children's Advil Suspension, Children's Motrin Suspension Dristan Sinus Caplets, Haltran Tablets, Ibuprohm Ibuprofen Caplets/Tablets, Midol IB Tablets, Motrin IB Caplets/Tablets, Nuprin Ibuprofen Caplets/Tablets, Sine-Aid IB,

Prescription:

Motrin IB Caplets/Tablets, Naprosyn Suspension Tablets, Anaprox/Anaprox DS Tablets

MAO - INHIBITORS:(MONOAMINE OXIDASE INHIBITORS)

(Marplan)-Isocarboxazid, (Nardil)-Phenelzine, Clorgyline, Moclobemide, Selegiline, Tranylcypromine

Your Upper GI Endoscopy at Emory

What is an Upper Endoscopy?

Upper endoscopy (also known as an upper GI endoscopy, esophagogastroduodenoscopy [EGD], or panendoscopy) is a procedure that enables your physician to examine the lining of the upper part of your gastrointestinal tract, i.e., the esophagus (swallowing tube), stomach, and duodenum (first portion of the small intestine) using a thin flexible tube with its own lens and light source.

Why is an Upper Endoscopy done?

Upper endoscopy is usually performed to evaluate symptoms of persistent upper abdominal pain, nausea, vomiting, or difficulty swallowing. It is also the best test for finding the cause of bleeding from the upper gastrointestinal tract.

Upper endoscopy is more accurate than x-ray films for detecting inflammation, ulcers, or tumors of the esophagus, stomach and duodenum. Upper endoscopy can detect early cancer and can distinguish between benign and malignant (cancerous) conditions when biopsies (small tissue samples) of suspicious areas are obtained. Biopsies are taken for many reasons and do not necessarily mean that cancer is suspected. A cytology test (introduction of a small brush to collect cells may also be performed.

Upper endoscopy is also used to treat conditions present in the upper gastrointestinal tract. A variety of instruments can be passed through the endoscope that allow many abnormalities to be treated directly with little or no discomfort, for example, stretching narrowed areas, removing polyps (usually benign growths) or swallowed objects, or treating upper gastrointestinal bleeding. Safe and effective endoscopic control of bleeding has reduced the need for transfusions and surgery in many patients.

What preparation is required?

For the best (and safest) examination the stomach must be completely empty. You should have nothing to eat or drink, including water, for approximately 6 hours before the examination. Your doctor will be more specific about the time to begin fasting, depending on the time of day that your test is scheduled.

It is best to inform your doctor of your current medications as well as any allergies the day of your examination. You should alert your doctor if you require antibiotics prior to undergoing dental procedures, since you may need antibiotics prior to upper endoscopy as well.

What can be expected during an Upper Endoscopy?

Your doctor will review with you why upper endoscopy is being performed, whether any alternative tests are available and possible complications from the procedure. Practices may vary among doctors, but you may have your throat sprayed with a local anesthetic before the test begins and may be given medication through a vein to help you relax during the test. While you are in a comfortable position on your side, the endoscope is passed through the mouth and then in turn through the esophagus, stomach and duodenum. The endoscope does not interfere with your breathing during the test. Most patients consider the test to be only slightly uncomfortable and many patients fall asleep during the procedure.

What happens after an EUS?

After the test, you will be monitored in the endoscopy area until most of the effects of the medication have worn off. Your throat may be a little sore for a while, and you may feel bloated right after the procedure because of the air introduced into your stomach during the test. You will be able to resume your diet after you leave the procedure area unless you are instructed otherwise.

In most circumstances, your doctor can inform you of your test results on the day of the procedure; however, the results of any biopsies or cytology samples taken will take several days.

What are the possible complications?

Endoscopy is generally safe. Complications can occur but are rare when the test is performed by physicians with specialized training and experience in this procedure. Bleeding may occur from a biopsy site or where a polyp was removed. It is usually minimal and rarely requires blood transfusions or surgery. Localized irritation of the vein where the medication was injected may rarely cause a tender lump lasting for several weeks, but this will go away eventually. Applying heat packs or hot moist towels may help relieve discomfort. Other potential risks include a reaction to the sedatives used and complications from heart or lung diseases. Major complications, e.g., perforation (a tear that might require surgery for repair) are very uncommon.

It is important for you to recognize early signs of any possible complication. If you begin to run a fever after the test, begin to have trouble swallowing, or have increasing throat, chest, or abdominal pain, let your doctor know about it promptly.

Directions to Emory Clinic Building B

Driving directions: From the north, take I-85 South to the Clairmont Road exit and turn left onto Clairmont Road. From the south, from the airport, take I-85 North to the Clairmont Road exit and turn right onto Clairmont Road.

Continue on Clairmont for approximately 3-4 miles until it intersects with North Decatur. Turn onto North Decatur. Continue on North Decatur until it intersects with Clifton Road. Turn right on Clifton Road. Follow the signs to the Visitor Parking Deck located at the Emory Clinic (approximately 2 blocks on the right at the intersection of Lowergate Drive and Clifton Road). Valet parking is also available at this location as well as at the hospital/ER entrance which is across the street from Emory Clinic on Clifton road

From the Airport: Once you arrive at Hartsfield International Airport, you can take the Airport Shuttle to the Emory Clinic, which is located across the street from the hospital. The shuttle leaves every 20-30 minutes from the West End Terminal; there is a customer service representative at the airport to assist you. For more information, call the Airport Shuttle at (404) 524-3400. If you wish to take a taxi, you can reserve one by calling the Emory Checker Cab Company at (404) 351-1111.

Health Insurance and Registration Information

PLEASE ARRIVE AT EMORY CLINIC, GI LAB, 1st FLOOR, B BUILDING ONE HOUR BEFORE YOUR PROCEDURE

Many insurance companies now require procedure Pre-Certification/Pre-Authorization before they will agree to pay for them. The Emory Clinic Gastroenterology Department will contact your health insurance company in order to provide the information necessary for pre-certification of your procedure. It is the patient's responsibility to call their health insurance carrier at least 48 hours prior to the scheduled appointment to verify that the procedure has been authorized. Many health insurance companies reduce the insurance benefits significantly if prior approval is not obtained. The patient is then responsible for a much larger portion of the bill. Please be aware that any charges not covered by the insurance company are the responsibility of the patient. Thank you for your cooperation in this matter. We sincerely hope that this information will prevent you from experiencing problems with your health insurance organization.

The Informed Consent Process

YOU WILL HAVE A CHANCE TO TALK TO YOUR PHYSICIAN AND HAVE QUESTIONS ABOUT THE CONSENT ANSWERED PRIOR TO YOUR PROCEDURE IN THE GI LAB.

Prior to each procedure, the risks and benefits of that procedure will be reviewed with the appropriate individuals to the best of our ability. It is your responsibility to make your healthcare provider aware of any questions or concerns that you may have about the procedure or risks involved.

Just before the procedure, the patient or the one who legally handles the patient's medical affairs will be asked to sign an informed consent document. This is done to verify that he/she understands the nature and purpose of the procedure, the risks involved and agrees to the items specified in the document.

The informed consent document mentions several risks, and by necessity even those, which are very rarely encountered. This is not meant to alarm the reader but to be as complete and informative as possible. The physician or assistant will be available to address any concerns or questions prior to signing the informed consent document.