

GASTROSCOPY

You have been advised by your doctor to have this test.

This information pamphlet will help you understand this procedure and the preparation required.

A partnership with Southern Cross Hospitals

Gastroscopy is a visual examination of the lining of the upper gastro-intestinal tract (oesophagus, stomach and duodenum) with intravenous sedation. An endoscope (a thin flexible tube) is passed through your mouth, down your oesophagus and into your stomach and duodenum. Images of the lining of your gastro-intestinal tract are viewed on a video screen by the doctor. If necessary biopsies (small tissue samples) can be painlessly taken through the endoscope using tiny foreceps. These specimens are sent to the laboratory for analysis.

Please inform us of any of the following;

If you have had an allergy or previous bad reaction to medicines or anaesthetics.

If you are taking medications to thin your blood, Including Warfarin, Clopidogrel (Plavix), Dabigatran (Pradaxa), Apixaban, Brilinta or arthritis medication. You may need to stop these medications or be given an alternative dose.

If you suffer from prolonged bleeding/clotting disorders.

If you have **diabetes** - You must discuss this with your doctor or nurse before undertaking any period of fasting.

If you have heart & lung problems, including artificial heart valves and pacemakers.

If you have artificial hip or knee joints.

If you have sleep apnoea / or are using a CPAP machine.

If you are pregnant or breast feeding.



It is important that your stomach is empty. In order to see the lining clearly, you should not eat or drink anything (including water) for 6 hours before the test. Though you may take medications with a sip of water.

You will not be able to return to work after the procedure due to the effects of the sedation and you will need someone available to drive you home.

It is important for Waitemata Endoscopy to know your medical history and in particular any previous endoscopies. Please bring a list of your current medication with you, together with any relevant x-rays, barium studies and CT scans. Also please advise us of any health problems you may have as these may interfere with your gastroscopy, sedation or recovery.



2 THE PROCEDURE

You will be given an appointment time which is when your initial assessment will be done with one of the nursing staff. After your medical history has been recorded, you will be given the opportunity to view an information DVD. You will be requested to sign a consent form indicating that you understand the risks involved with the procedure. Occasionally there is a delay between procedures on the list which is why we ask you to please allow 2-3 hours for your total appointment time.



Please wear comfortable clothes, you do not need to change. Your throat may be sprayed with local anaesthetic to make it numb and to prevent gagging. Prior to the procedure, sedation is given intravenously to make you sleepy and relaxed. A few people request little or no medication and if that is your wish please let us know. However it may be necessary to have sedation once the procedure has begun. Your heart rate, blood pressure and oxygen levels will be monitored throughout. Your dentures may need to be removed. The endoscope is passed through a mouth guard to protect your teeth. Swallowing the tube may feel uncomfortable but after this you will feel little or no discomfort for the rest of the examination. The endoscope does not restrict your breathing. The examination takes between 10 and



You will be kept under observation until the initial effects of the medication has worn off. Light refreshments are offered. The doctor or nurse will discuss the procedure with you and will give you written discharge information. The report and any biopsy results will be sent to your specialist and/or family doctor who referred you for the test.

If you have been given sedation, you must arrange for a friend or relative to take you home – even if you feel wide awake. You cannot drive a car, drink alcoholic beverages, travel on public transport alone, operate machinery, sign any legal documents or make any important decisions for 12 hours; as you will still be under the influence of the sedation.



RISKS

Complications following a simple endoscopic examination are very rare but can occur after therapeutic intervention i.e. removal of polyps or dilatation of the oesophagus. A tear or perforation may require hospitalisation, antibiotics and sometimes surgery (risk factor 1 in 3000 normal procedures).

Internal bleeding may come from a biopsy site or when the oesophagus has been dilated. This is usually minor and stops naturally.

Reaction to the sedation is rare.

There is a possibility that defects or disease may be missed or obscured. If symptoms persist other investigations may be indicated and you are advised to revisit your doctor.

If you would like further information about these rare complications, or if you have any other questions or concerns, please discuss them with your doctor or nurse before the procedure.



The Waitemata Endoscopy Suite is based at Southern Cross Hospital, North Harbour and Lincoln Road, Henderson.

The team welcomes referrals to the group or to an individual specialist, and can also offer:

- // early appointments for urgent cases
- // inpatient endoscopy
- // anaesthetist assistance if required

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