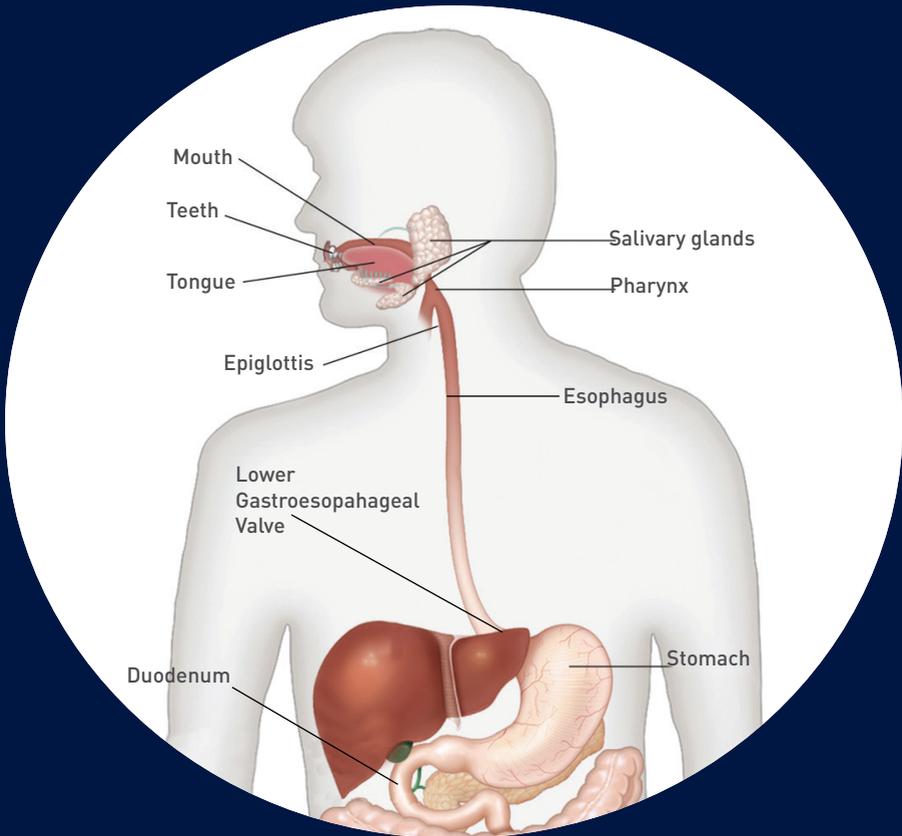


## Gastroenterology



## Having an upper GI Endoscopy

**Your procedure is scheduled for \_\_\_\_\_ am/pm**

**on \_\_\_\_ / \_\_\_\_ / 20\_\_\_\_ at the Endoscopy Unit**

**Please arrive at the Al Zahra Hospital at \_\_\_\_\_ am/pm**

Your procedure will usually be performed 30-60 minutes after your arrival at the Hospital, but due to variable duration of procedures there may be unforeseen delays. The procedure takes between 10-20 minutes and you will usually be discharged approximately 2 hours following the procedure.

**Please bring the following to the hospital:**

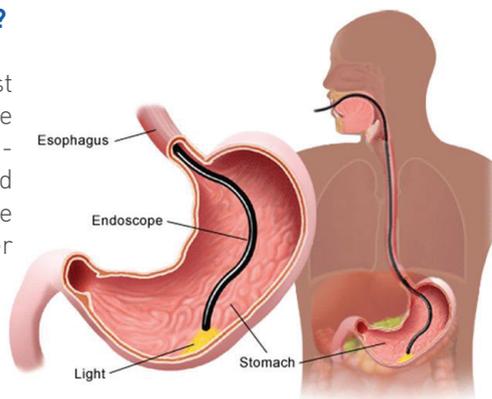
1. Your referral documents if not previously forwarded to the office
2. Your admission form if previously supplied
3. Your signed information consent booklet for the procedure
4. Your health insurance
5. Reading material
6. A list of all current medications and allergies

This booklet is designed to be practical and informative. Please read all of the information contained within and ask your doctor if you have any questions. If you don't read this booklet you will miss important instructions that may put you at risk.

For enquiries regarding your booking or the information in this booklet, please do not hesitate to call the endoscopy department on +971 4 378 6666 and a member of the nursing staff will be happy to help you.

## What is a gastro-intestinal endoscopy?

A gastro-intestinal endoscopy is a test which allows the doctor to look inside the upper part of your digestive system - your oesophagus (gullet), stomach and small intestine (bowel) - using a flexible tube that is thinner than an index finger (called an endoscope)



## Why am I having the procedure?

Your doctor has referred you for a gastro-intestinal endoscopy in order to investigate symptoms you have been having such as indigestion, heartburn, upper abdominal pains and difficulties in swallowing or to exclude other abnormalities.

This will benefit you by providing a clear diagnosis. If you prefer not to be investigated, we advise you to discuss the implications with your doctor.

## What preparation will I need?

Please do not have anything to eat or drink for 8 hours before your appointment time (You can drink water until 2 hours before your appointment time).

## What should I bring on the day?

Please bring a list of the medication you are taking.

**If you are diabetic**, please phone the unit for more information and please bring your tablets/insulin with you on the day of test.

## Should I take my medicines as normal?

If you take essential prescribed medication, for example- for epilepsy or a heart condition, you may take 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 to take you medication.

If you are taking anticoagulants such as **warfarin or clopidogrel** please contact the endoscopy department for advice. Some procedures may require your medication to be altered or stopped and this can be arranged before the procedure by the responsible doctor.

If you are taking anti-inflammatory tablets (such as Arcoxia, Brufen, Voltaren, Felden) please stop taking them 5 days before your test.

### **What will happen to me on the day of the test?**

On arrival at the hospital, report to the Endoscopy reception desk which is located on the 2nd floor. One of the reception staff will check your details and ask you to wait in the Endoscopy waiting area located on the 1st floor.

It is department policy that your family or friends do not accompany you to the Endoscopy area as it is a theatre environment. They will be called to the area when you are ready to leave.

We try to ensure that all patients have their tests soon after arriving in the unit, but occasionally emergencies take priority and you may need to wait. The endoscopy staff will keep you informed if this happens. One of the endoscopy nurses then asks you some questions about your medical history, means of transport home and prepares you for the procedure.

The nurse will show you into the Endoscopy Unit and the endoscopist who will be doing the procedure talks you through the consent form and the potential complications. It is important to think about these in advance so when you sign the form agreeing to the test you are comfortable with the procedure you are having. Remember you can change your mind at any time.

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 ensure you privacy at all times.

The doctor / nurse will put a small needle in the back of your hand this is to give you sedation if you have decided to have sedation for the test .The endoscopy is usually quick and often takes no more than 10-20 minutes to complete. It can be performed with a sedative injection administered through a cannula in your hand /arm. This will make you drowsy during the procedure and for up to 60 minutes afterwards. This is not a general anaesthetic.

If you are having sedation and going home the same day, you must arrange for a friend or relative to take you home and look after you until the next day. If you do not have anyone to accompany you we cannot give sedation.

Alternatively, a local anesthetic can be sprayed on the back of your throat to make it numb. You will be awake during the procedure but you will be able to leave the department as soon as the test is completed.

A plastic mouthpiece is placed between your teeth to keep your mouth slightly open. When the endoscopist gently passes the endoscope through your mouth you may gag slightly – this is quite normal and will not interfere with your breathing. The endoscope is thinner than an index finger.

During the procedure, air is put in to your stomach so that the endoscopist can have a clear view. This may make you burp a little. Some people find this uncomfortable. The air is removed at the end of the test. When the procedure is finished the endoscope is removed quickly and easily. Minimal restraint may be appropriate during the procedure. However if you find the procedure uncomfortable we will stop. During the test the endoscopist may take biopsies (tissue samples), photographs or video of your bowel even if it all looks normal. In addition it may be necessary to use thermal coagulation to remove small polyps or abnormal blood vessels which is painless. A nurse is present throughout the procedure to look after you.

### **What are the possible complications of gastro-intestinal endoscopy?**

Complications are rare, but it is important that you know all the risks before you decide to go ahead with the test.

#### **Minor complications**

Despite sedation and pain killers some patients can experience abdominal discomfort or pain.

#### **Major complications**

There is a very small risk of bleeding or of making a hole (perforation) in the intestine which on some occasions may require surgery. The risk of this happening is about 1 in 10,000. Other rare complications include aspiration pneumonia, damage to loose teeth or to dental bridgework.

Using sedation can cause breathing complications in up to 1 in 200 procedures, which are usually not serious. To reduce this risk we monitor your pulse and oxygen levels at all times throughout the test.

If you have severe pain, black tarry stools or persistent bleeding, you should contact our A&E department for further advice. The working hours of the Endoscopy Unit from 8.00 am till 5.00 pm. Outside these times you can ring the main switchboard on 04 378 6666 and ask for the on call medical RMO.

### **What happens after the test?**

If you choose to have sedation you will be transferred into the recovery area where nursing staff will monitor your condition for 1-2 hours. If you have received local anaesthetic to your throat you can leave the department after meeting the endoscopist and recording your blood pressure. You will have to wait approximately one hour before having anything to eat or drink.

You may experience a sore throat and feel bloated due to air in your stomach this is normal and can last a few days.

If you have sedation do not drink alcohol, operate machinery, drive, make important decisions and care for children or relatives for 24 hours after your procedure as sedatives can impair your judgment. When you get home it is important to rest for the remainder of the day with someone to look after you. You can resume normal activities and work the following day.

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

The endoscopist or senior nurse will be able to tell you the results after the procedure. If you had sedation, it is a good idea to have someone with you when this occurs because the sedation can make you forget what is discussed. If biopsies were taken results can take a few weeks to come through.

You will be told the final diagnosis by the team who requested the gastro-intestinal endoscopy either in the clinic or by letter to you. Copies of your gastro-intestinal endoscopy report will be sent to your doctor.

### **Alternative investigations**

If the upper gastro-intestinal procedure is unsuccessful the endoscopist may recommend other methods of examining the stomach such as a barium meal, or a CT scan. Although gastro-intestinal endoscopy is less pleasant than a barium meal it does allow biopsies and photographs to be taken and overall has increased accuracy in establishing a definite diagnosis. Please discuss with your doctor which is the best test for you.

## **Research**

None of these investigations are experimental or used for research in any way.

## **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.

You will find a consent form included with this booklet. We ask you to sign this form and bring it with you to the endoscopy unit on the day of your test. However, before you sign the form you should be clear as to what you are consenting for.

If you are unclear and have any questions, then do not sign the form until they have been explained. The endoscopy staff will be happy to answer any questions you might have.

## **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 doctor.

## **Any other questions?**

Feel free to write down any other questions you may have. No question is ever too minor or too silly to ask feel free to ask any member of the team caring for you if there is anything you wish to know.

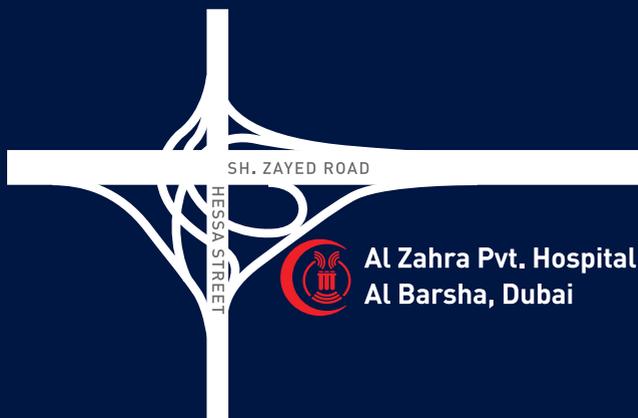
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## Gastroenterology / Endoscopy



Dr. Filippos Georgopoulos  
Specialist - Internal Medicine (Gastroenterology)  
MD (Greece)  
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## Location Map



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