



Upper Endoscopy (EGD)

Your physician has ordered a procedure called upper endoscopy or EGD (esophagogastroduodenoscopy.) The purpose of this exam is to view the inside of the esophagus, stomach and duodenum (first part of the small intestine.)

WHEN YOU RECEIVE YOUR INSTRUCTIONS:

- Call your physician IMMEDIATELY if you take blood-thinning medicine.
- If you have diabetes, please read the attached special instruction sheet.
- Check your blood sugar prior to exam check-in time.
- Bring your glucometer to your appointment.

The day **BEFORE** your exam:

- Eat and drink normally.
- Take your medicine as usual.

Please, no hard candy or gum day of procedure.

PREPARING FOR THE EXAM

If your exam is to be done BEFORE 12 Noon

- **DO NOT** eat or drink anything after midnight.
- Take your usual medicine with a **SMALL** amount of water (**AT LEAST 2 HOURS PRIOR TO PROCEDURE TIME**) unless otherwise ordered by your physician.

If your exam is to be done AFTER 12 Noon

- **DO NOT** eat any solid food after midnight.
- You may drink clear liquids up until 6 hours prior to check-in for your exam. Clear liquids include: soda, water, gelatin (no orange, red or purple), clear broth, black coffee, apple, white grape or cranberry juices.

FAILURE TO FOLLOW THESE INSTRUCTIONS MAY RESULT IN A REPEAT EXAM OR CANCELLATION OF YOUR EXAM AND/OR CANCELLATION OF YOUR ANESTHESIA SEDATION.

THE EXAM

You will receive medication through your vein. This is called intravenous (IV) sedation. The purpose of this medicine is to sedate you and give you a short deep sleep.

For your safety, it is necessary to adhere to these guidelines:

1. Arrange for someone to accompany you to and from your exam. The exam WILL NOT be completed unless you have this person to drive you home.
2. Ask a responsible adult to stay with you for the remainder of the day.
3. Do not drive motorized vehicles or equipment for 24 hours.
4. Do not drink alcohol for 24 hours.
5. Rest for the remainder of the day.
6. Do not return to work.
7. Do not assume responsibility for young children or anyone dependent on your care.
8. Avoid making important decisions or signing legal document.

DAY OF THE EXAM

You will be asked to change into a gown. Your health history will be reviewed and your IV will be started. Then you will be taken to an exam room. During your exam, a physician, a nurse anesthetist or anesthesiologist and a licensed nurse will be with you. Your vital signs will be watched closely during the exam.

Before the exam, you will be given a medication that will put you into a short deep sleep.

During the exam, the physician will put a thin flexible tube into your mouth. Air is inserted through the tube which may cause you to belch post procedure. It may be necessary to gently stretch (dilate) the esophagus with a tube to help with the passage of the scope. The tube does not interfere with breathing. Excessive saliva will be removed from your mouth by suction.

The scope is equipped with a small camera that sends pictures to a screen. The endoscope allows the physician to look closely for ulcers, inflammation and tumors. There also is an open channel in the endoscope through which the physician may pass instruments to:

- Sample tissue (biopsy)
- Remove foreign objects or polyps
- Stop upper intestinal bleeding
- Stretch narrowed areas (dilatation)
- Inject solutions

The exam usually takes between 5 and 20 minutes. When your exam is finished, you will be taken to the recovery area where you will stay for 30 to 60 minutes.

Your physician will give you the results of your exam by follow-up appointment, phone call or letter.

RISKS ASSOCIATED WITH UPPER ENDOSCOPY

Serious problems with this exam are uncommon. Possible problems include perforation (tear through the wall of the esophagus), bleeding, infection, drug reaction, or inhalation of any contents of your stomach into your lungs which could cause pneumonia. You may discuss all possible problems with your physician.

AFTER YOUR EXAM

Discomfort – It is normal to feel bloated. This will last until the air is expelled. Usually this will be complete by the day after your exam.

You may have a mild sore throat. Throat lozenges, gargling with warm salt water and/or a non-aspirin pain reliever may help.

You may notice blood-tinged saliva for a short time after your exam.

Medications

You may resume taking your medicines unless instructed otherwise.

Activity

Rest for the remainder of the day.

Diet

Resume your usual diet if no other tests are ordered.

If you had dilatation, start with soft foods and add solid foods when you are able to eat them. Do not eat cold food or drink cold liquids for the rest of the day as this could counteract the dilation.

WHEN TO SEEK MEDICAL HELP

If you experience any of the following symptoms, please contact your physician or contact your nearest Emergency Department:

- Vomit blood
- Pass black or very dark stools
- Neck or chest pain
- Constant abdominal pain that is not relieved by expelling air.
- Temperature of 100.4°F (38° C) or greater

If you have any questions about preparing for your colonoscopy or the exam itself, do not hesitate to speak with your physician.

**UPPER ENDOSCOPY
SPECIAL DIRECTIONS FOR PATIENTS WITH DIABETES**

For patients taking insulin:

- Check your blood sugar. **DO NOT** take morning insulin
- After the exam, if you are eating, take one-half dose of your NPH®, or Lente® insulin. **DO NOT** take any regular insulin
- Take normal dose of ORAL MEDICATIONS in the evening if you are eating

If you take Ultalente® insulin or use an insulin pump, contact your physician or diabetes educator.

If you check your blood sugar daily, check it more often the day before and the day after your exam.

If you have a low blood sugar during the prep, you may take fruit juice, regular soda, glucose tablets or gel.

Please bring your insulin, insulin syringes, and glucose monitor with you on the day of the exam.