



OESPHAGO-GASTRO DUODENOSCOPY (OGD)

Information sheet

LivingCare works in partnership with Leeds Teaching Hospitals. This may mean that there are trainees involved in your care. All trainees have the appropriate level of training and will always supervised by a trainer. You will be informed of their involvement (if applicable) on arrival to the department where further information will be provided. You have the right to decline care from a trainee and this will also be discussed with you on arrival.

■ Introduction

You have been advised by your GP or hospital doctor to have an investigation known as a gastroscopy (OGD) .

This procedure requires your formal consent.

If you are unable to keep your appointment, please notify the booking office on 0113 249 4655 as soon as possible. This will enable the staff to give your appointment to someone else and they will be able to arrange another date and time for you.

This booklet has been written to enable you to make an informed decision in relation to agreeing to the investigation. The consent form is a legal document therefore please read it carefully. Once you have read and understood all the information, including the possibility of complications, and you agree to undergo the investigation.

The procedures you are having are called an oesophago-gastro- duodenoscopy (OGD) sometimes known more simply as a gastroscopy or endoscopy.

■ What is an OGD?

This is an examination of your oesophagus (gullet), stomach and the first part of your small bowel called the duodenum. The instrument used in this investigation is called a gastroscope. It is flexible and has a diameter less than that of a little finger. Each gastroscope has an illumination channel which enables light to be directed onto the lining of your upper digestive tract and another which relays pictures back to the endoscopist onto a television screen. During the investigation, the doctor may need to take some tissue samples (biopsies) from the lining of your upper digestive tract for analysis: this is painless. The samples will be retained. A video recording and/or photographs may be taken for your medical records.

The procedure will be performed by or under the supervision of a trained doctor or nurse endoscopist, and we will make the investigation as comfortable as possible for you. Some patients have sedation injected into a vein for this procedure, although others prefer to remain awake and have local anaesthetic throat spray.

■ Why do I need an OGD?

You may have been advised to undergo this investigation of your stomach to try and find the cause for your symptoms, help with treatment, and if necessary, to decide on further investigation.

■ Preparing for the investigation

It is necessary to have clear views and for this the stomach must be empty. Therefore, please do not eat anything to eat for at least 6 hours before the procedure. This includes chewing gum, sweets and mints. You must stop drinking all fluids except water for 6 hours before your procedure. Plain water can be drunk up to 2 hours before.

If your appointment is in the morning, please do not eat anything. If your appointment is in the afternoon, please ensure that you have a light breakfast (such as tea and toast) at least 6 hours before your procedure.

■ What about my medication?

Your routine medication should still be taken.

If you are taking any Anticoagulants or Antiplatelet medication: please ensure you have informed your doctor and us. You may need to temporarily stop taking this medication prior to your procedure. This will be discussed with you.

If you are Diabetic, you should receive a pre-assessment call. If you haven't received one please contact the booking team on 0113 249 4655.

■ How long will I be in the endoscopy department?

This largely depends on how quickly you recover from the procedure. If you have sedation then your recovery will take longer. You should expect to be in the department for up to 2 hours.

■ What happens when I arrive?

When you arrive in the department, you will be met by a qualified practitioner who will ensure you understand the procedure and discuss any outstanding concerns or questions you may have. You will also be able to ask further questions about the investigation. You will be offered a choice of sedation or local anaesthetic throat spray. If you have sedation you will not be permitted to drive home, so you must arrange for a family member or friend to attend the appointment and stay with you. (Please see below on further information about throat spray and sedation)

You will have a brief medical assessment by a qualified nurse and your blood pressure, heart rate and oxygen levels will be recorded. If you have not already done so, and are happy to proceed, you may be asked to sign your consent form at this point.

■ Anaesthetic throat spray

With this method the throat is numbed with a local anaesthetic spray. As the gastroscope is relatively slim, many patients are happy for the procedure to be carried out without sedation. After the procedure you should wait an hour before taking a drink to ensure the throat spray effect has worn off. When having your first drink it should be cold and be sipped to ensure you are able to swallow properly following the effects of the spray.

If you can feel the back of your throat, you may resume to eating and drinking as normal. The benefit of throat spray is you are able to go home unaccompanied and are permitted to drive after your procedure.

■ Intravenous sedation

The sedation may make you drowsy and relaxed but not unconscious. This means that, although you may be drowsy, you will still hear what is said to you and therefore will be able to follow simple instructions during the investigation. The sedative drugs will be administered into a cannula (tube) in your vein, usually in the back of your hand or arm.

Please note, if you have had sedation you must not drive, work, take alcohol, operate heavy machinery or sign any legally binding document for 24 hours following the procedure.

You must have a responsible adult to take you home and stay with you for 24 hours after your procedure. This applies to a person living alone, if this cannot be arranged you may wish to consider an alternative such as Throat Spray and/or Entonox. You are advised to not take public transport following sedation.

■ The OGD procedure

You will be escorted into the procedure room where you will have the opportunity to ask any final questions. Dentures will be removed at this point; any remaining teeth will be protected by a small plastic mouth guard. The sedation or local anaesthetic (throat spray) will be administered. You will then lie down on your left side. There will be a nurse supporting your head during the procedure who will remove any saliva or other secretions produced during the investigation using a small suction tube. The endoscopist will introduce the gastroscope into your mouth, down your gullet, into your stomach and then duodenum. Your windpipe is deliberately avoided and your breathing will be unhindered. During the procedure, biopsy samples may be taken for analysis in our laboratories. This will be retained. It is very important that correct positioning is maintained to ensure your safety and also assist in your procedure being completed fully. Gentle restriction of your movement will be maintained during the procedure. Your comfort will be assessed throughout and if you are uncomfortable, options will be discussed with you to determine if the procedure can continue and if further pain relief is needed.

■ After the procedure

You will be allowed to rest for as long as is necessary. Before you leave the department, the nurse or endoscopist will discuss the findings and any medication or further investigations required. They will also inform you if you require further appointments.

■ Risks of the procedure

Upper gastrointestinal endoscopy has the possibility of associated complications. These occur extremely infrequently. The risks can be associated with the procedure itself and with the administration of sedation.

The main risks:

- mechanical damage to teeth or bridgework

(Please see next page)

- perforation or tear of the lining of the stomach or oesophagus (risk approximately 1 in 1000 cases) which could entail you being admitted to hospital. Certain cases may be treated with antibiotics and intravenous fluids. Perforation may require surgery to repair the hole.
- Bleeding may occur at the site of biopsy, and usually always stops on its own.
- Missed pathology
- Sore throat

■ Sedation risks

Sedation can occasionally cause problems with breathing, heart rate and blood pressure. If any problems do occur, they are normally short lived, careful monitoring by a fully trained practitioner ensures that any potential problems can be identified and treated rapidly. Older patients and those who have significant health problems (for example, people with significant breathing difficulties due to a bad chest) may be assessed by a doctor before having the procedure.

■ General points to remember

It is our aim for you to be seen and investigated as soon as possible after your arrival. Please note, that your appointment time is the time you will be expected to be admitted onto the department, not the time of your test. On occasion, delays may occur, however we will aim to keep you informed on the progress of when you might be expected to be seen.

- The clinic cannot accept any responsibility for the loss or damage to personal property during your time on these premises and therefore advise you to refrain from bringing valuables with you on the day of your procedure due to limited secure storage facilities. You will be assigned a cubicle for your time within the building, however this has no lockable storage.
- If you are unable to keep your appointment please notify the us as soon as possible.
- If you are having sedation, please arrange for someone to collect you and stay with you for 24 hours.
- **If you have any problems with persistent abdominal pain or bleeding, please contact your GP immediately informing them that you have had an endoscopy.**
- Please remember to fast from food 6 hours before. You are permitted to drink only water up until 2 hours before the procedure.



The Mid Yorkshire Hospitals
NHS Trust



The Leeds Teaching Hospitals
NHS Trust



0113 249 4655 | www.livingcare.co.uk | email@livingcare.co.uk