

# Gastroscopy

## A guide to the test

Endoscopy Department  
Central Operations Department

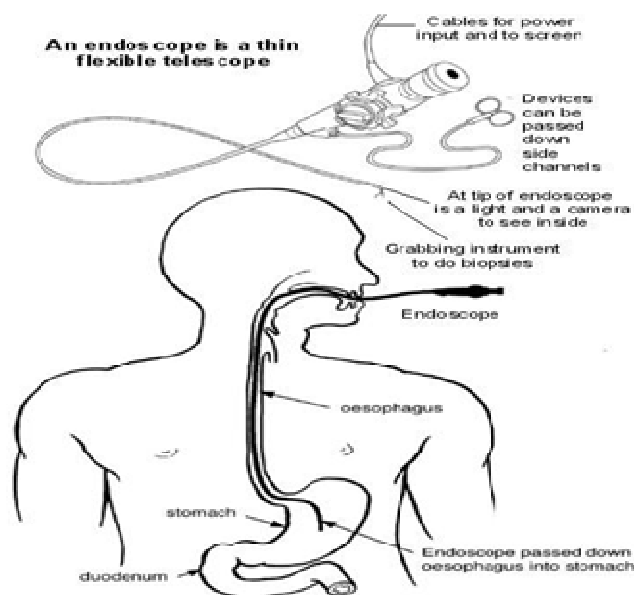
**This leaflet has been designed to give you important information about your condition/procedure, and to answer some common queries that you may have.**

## What is a Gastroscopy?

A gastroscopy or upper G.I. endoscopy is a test which allows the doctor to look directly at the lining of the oesophagus (the gullet), the **stomach** and around the first bend of the small intestine – the **duodenum**.

During the procedure a thin flexible tube (endoscope) with a small video camera at the end is passed through the mouth into the stomach. The end of the endoscope contains a light and conveys images to a TV monitor allowing the doctor a clear internal view of the lining of the oesophagus, stomach and duodenum. The doctor can see abnormalities, such as ulcers, through the endoscope which are not easily detected on x-rays. As well as viewing the lining, tissue samples (biopsies) can be taken for analysis. The tissue is removed painlessly by forceps passed down the endoscope.

The test is usually carried out to investigate swallowing difficulties, nausea, vomiting, reflux, bleeding, indigestion, abdominal pain or chest pain.



## What do I need to know before admission?

You will be asked to attend the Endoscopy Unit. You can expect to be in the unit between 2-4 hours.

A gastroscopy can be carried out either with or without sedation, please arrange for a friend or relative to accompany you to and from the unit if you intend to have sedation. Please try and keep to the time stated on your letter, thank you.

Also please be aware that your procedure may be delayed or have to be cancelled at short notice. In these cases we offer apologies for any inconvenience and aim to reschedule your appointment as soon as possible.

If you are taking prescribed medication please contact the Endoscopy unit. You can then be advised what medication you can take on the day of your gastroscopy. Please bring a list of medication you are taking with you. We would appreciate it if you could leave all jewellery (except wedding band) and valuables at home as we do not have facilities to secure these items.

You must not have anything to eat or drink for at least six hours before the procedure; it is essential that your stomach is empty at the time of the procedure. If your stomach is not empty there is a risk of aspiration (vomit inhaled into the lungs). This can be a very serious complication. Furthermore having your stomach empty allows a clear view during the procedure.

Please wear comfortable clothes.

## Important information:

**Please contact the endoscopy unit if any of the following apply to you:**

- **If you are diabetic**
- **Taking Warfarin or aspirin**
- **Allergic to latex**

## What happens on admission?

On the day of admission a nurse will complete an admission document with all your personal details. The nurse will check your medical history and any current medication with you.

They will explain the procedure to you, inform you of the potential risks and complications of gastroscopy, they will discuss with you whether you want a local anaesthetic (throat spray) or a sedative for the procedure and also answer any questions that you may have. The nurse will then ask you to sign the consent form for the procedure once you have read it carefully and understood it in full.

You will not be asked to change into a hospital gown but if you want to you can. Dentures, spectacles and contact lenses can be removed later on; the nurses will tell you when.

## What happens during the Gastroscopy?

You will be taken to an examination room for the procedure. Once sat on the trolley the nurse or doctor will spray your throat with a local anaesthetic. This makes your throat go numb quite quickly and you may start to feel as if you can't swallow, don't panic you can swallow but just may not feel it.

The nurses will ask you to lie down in the correct position resting on your left side with your knees slightly bent. A nurse will stay with you throughout the test.

To keep your mouth slightly open, a plastic mouthpiece will also be placed between your teeth.

If you have chosen not to have sedation the procedure will then start, a nurse will talk you through what is happening and tell you if you need to do anything e.g. when to swallow.

If you are having the sedation the doctor or the nurse will insert a cannula (thin plastic tube) into a vein in your hand or arm.

This provides a route for the drugs to be given before the procedure. A sedative drug will be injected via the cannula into your arm. This is not a full anaesthetic but it will make you very relaxed and sleepy. A small fine soft tube will be placed into your nostrils to give you a little extra oxygen to breathe and a small device will be attached to your finger or thumb to monitor your pulse rate and oxygen levels during the test.

Once you are sedated the procedure will be carried out.

1. Firstly, the endoscope is gently passed through your mouth into your stomach. This will not cause you any pain nor will it interfere with your breathing
2. The lining of the gullet, stomach and duodenum will then be examined closely. Air may be passed through the scope to distend the stomach to give a clear view of the lining. This air is sucked out at the end of the test
3. If the doctor finds any change in tissue a tiny piece may be removed (biopsy) using instruments passed through the scope. Any samples of tissues removed

are sent to the laboratory for specialist examination

4. If any bleeding is discovered, the doctor will use a special needle to inject certain medications through the scope to stop the bleeding

When the procedure is complete, the tube is removed quickly and easily. The procedure lasts from 5-10minutes.

### What happens after the Gastroscopy?

If you have not had sedation, you will be able to walk back to the waiting area.

If you have had sedation you will rest for a while in the recovery area on the unit. The nursing staff will check your pulse, and oxygen levels regularly and generally assess how you have recovered from the test. If you feel unwell at all please let the staff know.

You may feel a little bloated and experience wind pains, due to the air passed into the stomach during the test, although these usually settle quite quickly. If you are in pain, please inform the staff as soon as possible.

You will be given something to eat and drink when you feel ready. However if you had a local anaesthetic spray on the back of your throat (throat spray) you will have to wait until your swallow reflex is back to normal (this can take up to 1 hour from when the throat has been sprayed). After this you can eat and drink normally. Your throat may however, be sore for the rest of the day.

The nurse will speak to you about your gastroscopy, discuss the findings, and will issue you with a copy of your discharge letter and post procedure advice sheet.

Most patients are well enough to go home the same day as having the gastroscopy, but occasionally patients may be required to stay in hospital longer for observation or further treatment.

### Discharge advice

If you have had sedation it is essential that an adult comes to collect you after the procedure and stays with you for the rest of the day. Once home, it is important to rest quietly for the remainder of the day. Sedation lasts longer than you think.

You may have a sore throat, which should not last longer than 24-48 hours.

Furthermore if you have had sedation you should avoid the following activities for at least 24 hours after the procedure:

- Going to work
- Driving
- Operating machinery
- Drinking alcohol
- Signing any legally binding documents
- Carrying out any activities involving heights
- Caring for young children ( sole responsibility)

If you start to feel unwell or develop severe abdominal pain, you must contact the unit, your G.P. or the Out of Hours G.P. as soon as possible.

## What are the risks and complications of Gastroscopy?

It is very important that you are aware of the potential risks and complications of Gastroscopy before giving your consent to the procedure. These include:

- **Internal bleeding (haemorrhage)** – this may occur at the site of a biopsy. The bleeding is usually resolved without any treatment but in a minority of cases may be serious
- **Perforation** – damage to the lining of the oesophagus or stomach (perforation) may result in admission to hospital and further tests. This can be a potentially serious complication, and may need to be surgically repaired
- **Reaction to sedative**
- **Damage to teeth, crowned teeth or dental bridgework**
- **Aspiration pneumonia**

The risk of any serious complication occurring in a diagnostic gastroscopy is less than 1:10,000.

**N.B.** There is no evidence that the complication rates after gastroscopy at the Northern Lincolnshire and Goole Hospitals NHS Foundation Trust are different from the averages quoted.

Every effort is made to reduce the risk of these complications occurring.

If you are concerned about any of these risks and complications, please discuss this with the consultant or member of their staff before the procedure.

## Are there any alternatives?

In some cases there are, but it will depend on individual factors such as; the symptoms present and the condition being investigated.

There may be alternatives to having a gastroscopy, such as a Barium meal, but this x-ray based test tends to provide less information than a gastroscopy, and samples of tissue cannot be taken to aid diagnosis and treatment.

## Do you need further information?

If you have any questions or concerns, please contact:

### The Endoscopy Unit at Diana Princess of Wales

#### Normal Hours:

**Endoscopy Pre-assessment Nurse:**  
**(01472) 874111 Ext: 7341.**

Telephone the Unit direct on **(01472) 875236** between the hours of 8am until 6pm, Monday until Friday

Or

Telephone Diana, Princess of Wales Hospital, Grimsby on: **(01472) 874111** and ask for the Endoscopy Unit.

#### Out of Hours:

**After 6pm contact Ward C2** via the main switchboard on: **(01472) 874111** (Out of hours 6pm to 8am).

### The Endoscopy Suite at Scunthorpe General Hospital

#### Normal Hours:

Telephone the Unit direct on **(01724) 282282 Ext 2186** between the hours of 8am until 6pm, Monday until Friday

Or

Telephone Scunthorpe General Hospital  
(01724) 282282 and ask for the Endoscopy  
Unit.

### Out of Hours:

After 6pm contact your G.P. or phone the  
G.P. emergency Centre (01724) 290444

### Sources of further information/support

#### Digestive Disorders Foundation

3 St Andrews Place,  
London.

NW1 4RL

Tel: 020 7486 0341

Fax: 020 7224 2012

[www.digestiveorders.org.uk](http://www.digestiveorders.org.uk)

#### Coeliac Society

P.O. Box 220.

High Wycombe, Bucks.

HP11 2HY

(Please enclose a stamped addressed  
envelope with your enquiry)

### References used in the compilation of the leaflet

Medical-Legal (1999) Upper GI Endoscopy  
or Gastroscopy:

[www.medical-legal.co.uk/patient-  
info/investigate.htm](http://www.medical-legal.co.uk/patient-info/investigate.htm)

National Digestive Disease Information  
Clearinghouse (1998) Upper Endoscopy.

[www.niddl.nih.gov](http://www.niddl.nih.gov)

### Concerns and Queries

If you have any concerns / queries about any  
of the services offered by the Trust, in the

first instance, please speak to the person  
providing your care.

### For Diana, Princess of Wales Hospital

Alternatively you can contact the Patient  
Advice and Liaison Service (PALS) on  
(01472) 875403 or at the PALS office which  
is situated near the main entrance.

### For Scunthorpe General Hospital

Alternatively you can contact the Patient  
Advice and Liaison Service (PALS) on  
(01724) 290132 or at the PALS office which  
is situated on C Floor.

Alternatively you can email:

[nlg-tr.PALS@nhs.net](mailto:nlg-tr.PALS@nhs.net)

### Confidentiality

Information on NHS patients is collected in a  
variety of ways and for a variety of reasons  
(e.g. providing care and treatment, managing  
and planning the NHS, training and  
educating staff, research etc.).

Everyone working for the NHS has a legal  
duty to keep information about you  
confidential. Information will only ever be  
shared with people who have a genuine  
need for it (e.g. your GP or other  
professionals from whom you have been  
receiving care) or if the law requires it, for  
example, to notify a birth.

Please be assured however that anyone who  
receives information from us is also under a  
legal duty to keep it confidential.

### Moving & Handling

The Trust operates a Minimal Lifting Policy,  
which in essence means patients are only  
ever lifted by nursing staff in an emergency  
situation.

Patients are always encouraged to help themselves as much as possible when mobilising, and if unable to do so, equipment may be used to assist in their safe transfer.

If you have any questions regarding moving and handling of patients within the Trust, you may speak to any member of the nursing staff, the designated keyworker within the department or the Trust Moving & Handling Coordinator.

### **Zero Tolerance - Violent, Threatening and Abusive Behavior**

The Trust and its staff are committed to providing high quality care to patients within the department. However, we wish to advise all patients / visitors that the following inappropriate behavior will not be tolerated:

- Swearing
- Threatening / abusive behaviour
- Verbal / physical abuse

The Trust reserves the right to withdraw from treating patients whom are threatening / abusive / violent and ensuring the removal of those persons from the premises.

All acts of criminal violence and aggression will be notified to the Police immediately.

### **Risk Management Strategy**

The Trust welcomes comments and suggestions from patients and visitors that could help to reduce risk.

Perhaps you have experienced something whilst in hospital, whilst attending as an outpatient or as a visitor and you felt at risk. Please tell a member of staff on the ward or in the department you are attending / visiting.

**Northern Lincolnshire and Goole Hospitals NHS Foundation Trust**

**Diana Princess of Wales Hospital  
Scartho Road  
Grimsby  
01472 874111**

**Scunthorpe General Hospital  
Cliff Gardens  
Scunthorpe  
01724 282282**

**Goole & District Hospital  
Woodland Avenue  
Goole  
01405 720720**

[www.nlg.nhs.uk](http://www.nlg.nhs.uk)

**Date of issue: December 2011**

**Review Period: December 2014**

**Author: Endoscopy Unit DPOW**

**IFP-390 v4**

**© NLGHFT 2011**