

# Gastroscopy

## Patient Information – Gastrointestinal Endoscopy Unit

### Understanding Gastroscopy

Your doctor has determined that further examination of your gastrointestinal tract is necessary to help them evaluate or treat your condition.

This information sheet has been prepared to help you understand the procedure. Please read it carefully. If you have additional questions, please feel free to discuss them with the endoscopy nurse or doctor before the examination begins.

### What is a Gastroscopy?

A gastroscopy is a procedure that enables your doctor to look at the lining of the oesophagus (gullet), stomach and part of the duodenum (small bowel) using an endoscope (a thin flexible tube).

### What preparation is required?

For this procedure to be successful, your stomach needs to be empty.

**Do not** have anything to eat or drink **6 hours** before the procedure.

### What about my current medications?

Please contact us as soon as possible on **0800 555 400** for further instructions if you are:

- Taking an anticoagulant medication such as Warfarin, Dabigatran (Pradaxa), Rivaroxaban (Xarelto) OR anti-platelet therapy such as Clopidogrel, Dipyridamole or Ticagrelor.
- Please let us know if you have a pacemaker OR internal cardiac defibrillator

All other essential medications such as heart medications, psychiatric medications, steroids and epilepsy medications, can be taken as usual with a small mouthful of water. If you are taking aspirin, please continue this as normal.

Please bring all your medications to the appointment, especially any nitrolingual sprays (GTN), asthma inhalers or diabetic medications.

#### **Diabetic medications**

- If you are taking Empagliflozin (Jardiance or Jardiamet) or Dapagliflozin (Forxiga), please **do not** take this on the morning of your procedure.
- If you are taking Duraglutide (Trulicity) or Liraglutide (Saxenda or Victoza) or Semaglutide (Ozempic) please have a liquid only diet (no food) for 24hours prior to

your appointment time. Then you will need to be nil by mouth for 6 hours before your procedure.

- If you are having a general anaesthetic for your procedure, please contact us directly for further instructions.

If you need advice on how to manage your diabetes before the procedure, please contact your GP. Information is also available on [www.healthinfo.co.nz](http://www.healthinfo.co.nz)

## Where can I park?

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Parking at Christchurch Hospital is limited. Please allow at least 30mins to find a car park.

Information about parking is available at:

<http://www.cdhb.health.nz/patients-visitors/pages/parking.aspx>

## On arrival

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Please report to:     Gastrointestinal Endoscopy Unit  
                              2nd floor  
                              Riverside building  
                              Christchurch Hospital.

The receptionist will check your details and a member of the nursing team will undertake a nursing assessment with you prior to the procedure.

## Consent

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Before the procedure can begin you will need to sign a consent form to agree to proceed.

A nurse will discuss the procedure with you and explain the possible complications and side effects before asking you to sign the consent form to proceed.

If you later change your mind, you are entitled to withdraw your consent at any stage of the procedure, even **after** signing the consent form.

## What can be expected during the procedure?

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You can choose to have your procedure carried out by either:

**(a)** Numbing your throat with a local anesthetic spray (bitter taste)

OR

**(b)** Administering a mild sedative to help you relax.

If you chose to have a sedative, this will be administered to you at regular intervals through a small needle placed into the back of your hand or arm. This will keep you relaxed and comfortable. It has a mild amnesia-like effect, so you may not remember having the procedure at all.

You will also receive oxygen throughout the procedure via a nasal cannula that sits in your nose. You will have a small peg-like device clipped on to your finger or ear. This device will

monitor your heart rate and oxygen levels.

A small mouth-guard will be placed between your teeth. If you have loose dentures these will be removed for safe-keeping during the procedure. The endoscopist will then gently insert the endoscope through the mouth-guard, down your oesophagus, into your stomach and then the duodenum (part of your small bowel).

Air will be used to inflate the stomach and duodenum so the endoscopist can clearly see all the surfaces. This may be uncomfortable and cause a little bloating, but it is not painful. Air will be removed at the end of the procedure. There is plenty of room around the endoscope to allow you to breathe normally. A nurse may also use a small suction tube to clear the saliva from your mouth.

A biopsy (small tissue sample) may be taken during the procedure to be sent to the laboratory. You will not feel this being done.

## **After the procedure**

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You will be taken to the recovery area and your blood pressure, heart rate, breathing rate and oxygen levels will be monitored until you are awake.

A nurse will explain the findings of the procedure to you and give you a copy of the endoscopy report to take home. A copy will also be sent to your referring doctor.

## **How long will it take?**

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Please allow at least **2 hours** for your appointment, delays may occur due to acute endoscopy procedures. We would advise you to bring a book, magazine or iPad with you to help pass the time.

The test itself takes 5-10 minutes, and if you do not have sedation you will be able to go home immediately after the procedure. If you had a sedative, you will need at least one hour to recover in the unit.

## **After leaving the Gastrointestinal Endoscopy Unit**

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If you have sedation, please make arrangements for someone to collect you from the unit and care for you for **24 hours** after the procedure. This is for your own safety and protection.

The sedation makes you forgetful and can impair your judgement and reflexes.

Even if you feel alert after the procedure you must not do any of the following for 24 hours:

- *Drive a car.*
- *Operate machinery.*
- *Drink alcohol*
- *Sign any legal documents or*
- *Ride on public transport alone*

## Possible complications

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Most endoscopies are safe and uncomplicated when undertaken by experienced endoscopists, but as with any procedure there is a small risk of side effects or complications.

Possible complications/risks of a **GASTROSCOPY PROCEDURE**:

- Sedation / medication risks,
- Perforation or bleeding less than 1 in 3000,
- Missed abnormalities,
- Incomplete examination may require further imaging.
- You may suffer from a sore throat or feel some wind in your stomach.

## Confirm your appointment.

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Please telephone to confirm your appointment:  
**Phone: 0800 555 400**

If you do not have a relative or support person who can care for you 24 hours after the procedure, please talk to our staff about your 'after procedure' care options when you phone to confirm your appointment.

## Interpreter service

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If you require the interpreter service, please ask an English-speaking person to call us as soon as possible so we can arrange this for you. This service is free.

Please do not ask family or friends to act as an interpreter for you at this appointment.

## For more information about:

- hospital and specialist services, go to [www.cdhb.health.nz](http://www.cdhb.health.nz)
- your health and medication, go to [www.healthinfo.org.nz](http://www.healthinfo.org.nz)