

Oesophago-gastro duodenoscopy (OGD)

Appointment Details and Postal information to Consent

Please bring this booklet with you

Your Appointment is at:

Parkway House

Palatine Road

Northenden

Manchester M22 4DB

Please note the entrance and parking is located at the rear of the building.

If the appointment date given is not convenient or you would like to discuss any aspect of the procedure please call   
0161 445 7451

**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 us 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. Please bring this booklet with you when you attend.

This booklet has been written to enable you to make an informed decision in relation to agreeing to the investigation. At the front of the booklet is the consent form.

**Please note we have a telephone interpreter service available (but not face to face) if required.**

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, please sign and date the consent form. You will notice that the consent form is duplicated, allowing you to keep a copy for your records.

If however there is anything you do not understand or wish to discuss further do not sign the form but bring it with you and sign it after you have spoken to a health care professional.

The procedure you will be having is called an oesophago-gastro- duodenoscopy (OGD) sometimes known more simply as a gastroscopy or endoscopy. 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.

Photographs may be taken for your medical records.

The procedure will be performed by a Consultant 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 to have 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.
* A barium meal x-ray examination is an alternative investigation. It is not as informative as an endoscopy and has the added disadvantage that tissue samples cannot be taken.

**Preparing for the investigation**

**Eating and Drinking**

It is necessary to have clear views and for this the stomach must be empty.

If your appointment is in the **morning** have nothing to eat after midnight.

If your appointment is in the **afternoon** you may have a light breakfast no later than 6am on the day.

If your appointment is in the **evening** you may have a light breakfast no later than 11am on the day.

If necessary you may have **little sips** of water (the amount that can fit in an egg cup) up to 2 hours before the appointment. Please note excessive consumption of water could lead to your appointment being cancelled.

**What about my medication?**

**Anticoagulants**

If you are taking \*Clopidogrel \* Prasugrel \* Ticagrelor please continue to take these unless your GP has told you otherwise. If you are taking \*Dabigastran \* Rivaroxaban \* Apixiban \* Edoxaban please do not take these on the day of your endoscopy. You can take them when you return home following your procedure.

**Digestive Medication**

If you are presently taking tablets to reduce the acid in your stomach (e.g. Lansoperazole, Omeprazole, Losec, Nexium) please discontinue them 7 days before your investigation if you can tolerate it. If you experience any problems with this please consult with your GP.

**Diabetics**

If you are a diabetic taking controlled medication, please ensure the Endoscopy booking team are made aware so that the appointment can be made as close to the beginning of the list as possible. Additional guidelines are printed at the back of this booklet.

**How long will I be in the endoscopy unit?**

Your appointment time is your booking in time, **not your appointment time**. You should expect to be in the department for approximately 1-3 hours.

**What happens when I arrive?**

When you arrive in the unit, you will be clerked in by our receptionist and then taken into the admission room where a qualified member of staff will ask you a few questions, one of which concerns your arrangements for getting home. You will also be able to ask further questions about the investigation.

The nurse will ensure you understand the procedure and discuss any outstanding concerns or questions you may have.

**If you have sedation you will not be permitted to drive or use public transport and you must arrange for a family member or friend to collect you.**

You will have a brief medical assessment when a qualified nurse will ask you some questions regarding your medical condition and any surgery or illnesses you have had to confirm that you are fit to undergo the investigation.

Your blood pressure and heart rate will be recorded and if you are diabetic, your blood glucose level will also be recorded. Should you suffer from breathing problems a recording of your oxygen levels will be taken. If you have not already done so, and you are happy to proceed, you will be asked to sign your consent form at this point.

**Intravenous sedation**

The sedation will be administered into a vein in your hand or arm that will make you drowsy and relaxed but not unconscious. You will be in a state called co-operative sedation. This means that, although drowsy, you will still hear what is said to you and therefore will be able to follow simple instructions during the investigation. Sedation makes it unlikely that you will remember anything about the examination.

Whilst you are sedated, we will monitor your breathing and heart rate so changes will be noted and dealt with accordingly. For this reason you will be connected by a finger probe to a pulse oximeter which measures your oxygen levels and heart rate during the procedure. Your blood pressure may also be recorded.

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 and you will need someone to accompany you home.

**Anaesthetic throat spray**

With this method, sedation is not used, but 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.

The benefit of throat spray is that you can go home unaccompanied after the procedure once the numbness from the throat spray has worn off. When having your first drink after the procedure, it should be a cold drink and should be sipped to ensure you are able to swallow properly following the numbing effect of the throat spray. You are permitted to drive following a procedure with throat spray.

**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. The sedative drugs, if requested, will be administered into a cannula (tube) in your vein, usually in the back of your hand. You will then lie down on your left side.

Any saliva or other secretions produced during the investigation will be removed 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. These 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.

**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.

**Risks of the endoscopic procedure**

* The main risks are of mechanical damage to teeth or bridgework; perforation or tear of the lining of the stomach or oesophagus (risk approximately 1 in 2000 cases) and bleeding 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 nearly always stops on its own.

**Risks of Sedation**

Sedation can occasionally cause problems with breathing, heart rate and blood pressure. If any problems do occur, they are normally short lived. Careful monitoring 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.

**After the procedure**

You will be escorted to the recovery room where your blood pressure and heart rate will be recorded and if you are diabetic, your blood glucose will be monitored. Should you have underlying breathing difficulties or if the oxygen levels were low during the procedure, we will continue to monitor your breathing. If you have had sedation you will need to recover from its initial effects (which normally lasts approx. 30 minutes), before you will be able to go home. 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.

Sedation may temporarily affect your memory but a copy of the procedure report will be given to you and also sent to your GP.

If you have had sedation, the drug remains in your blood system for about 24 hours and you may feel drowsy later on, with intermittent lapses of memory. If you live alone, try and arrange for someone to stay with you or, if possible, arrange to stay with your family or a friend for at least 4 hours.

If you have not had sedation you will be able to go home as soon as you feel able.

**General points to remember**

* **It is our aim for you to be seen and investigated as soon as possible after your arrival, however, please note that some people may be nervous about the procedure or recover slower than others and this may cause delays.**
* Unfortunately, we cannot accept any responsibility for the loss or damage to personal property during your time on the premises and therefore advise you to refrain from bringing valuables with you on the day of your procedure due to limited secure storage facilities.
* If you are having sedation, please arrange for someone to collect you.
* If you have any problems with persistent abdominal pain or bleeding post procedure please contact your GP immediately informing them that you have had an endoscopy.
* If you are unable to contact or speak to your doctor, you must go immediately to an Accident and emergency Department
* Please be aware that it is preferable that you do not bring children to your appointment, if this is unavoidable it is essential that they remain with a supervising adult at all times.
* Relatives/carers may wait for you while you undergo your procedure but as the clinics are busy, they may prefer to come back after a short while.

**Specific instructions for diabetic patient preparation**

**Treatment by diet alone**

If you control your diabetes with diet alone, you simply need to follow the instructions given to you to prepare for your gastroscopy.

**Treatment with medication**

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| **Morning Appointment** | **Afternoon Appointment** |
| Tablets- Do not take but bring with you | Tablets- Take as usual |

If you have any questions you want to ask, you can use the space provided below to remind you.

Document control information

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**Date created:** December 2016 **Version:** 1.1  
**Updated:** March 2024