

UOA MS

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Patient Name:

Special Instructions:

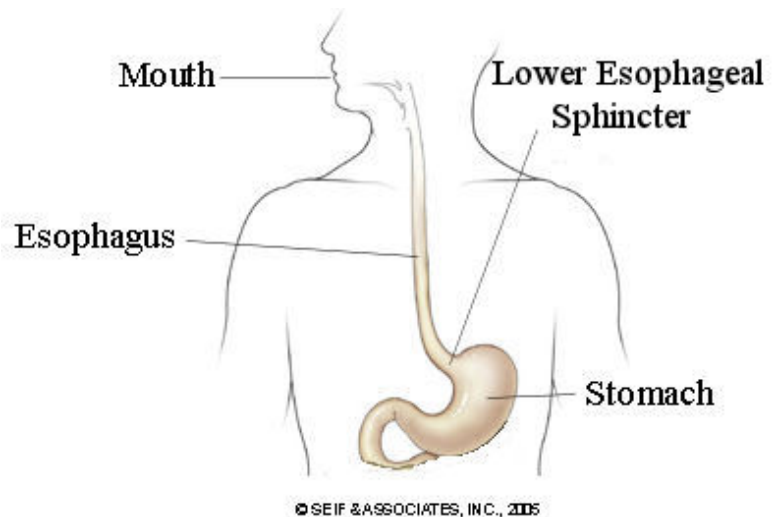
Follow Up:

Gastroscopy

Gastroscopy is a procedure that allows your caregiver to look at your upper gastrointestinal tract directly and give more immediate diagnoses for a number of different problems.

Some of the problems that can be evaluated or treated are as follows:

- Esophageal problems (the tube that carries food to the stomach).
- Gastric and peptic ulcers (gastric ulcer - in stomach; peptic ulcer - just past the stomach).
- Swallowing difficulties.
- Suspicion of cancer.
- To take tissue samples (biopsies).
- To control bleeding.



LET YOUR CAREGIVER KNOW ABOUT:

- Allergies.
- Medications taken including herbs, eye drops, over-the-counter medications, and creams.
- Use of steroids (by mouth or creams).
- Previous problems with anesthetics or novocaine.
- Possibility of pregnancy, if this applies.
- History of blood clots (*thrombophlebitis*).
- History of bleeding or blood problems.
- Previous surgery.
- Other health problems.

BEFORE THE PROCEDURE

- Fast for several hours prior to the procedure or as your caregiver has instructed you.

- You should be present 60 minutes prior to your procedure or as directed.

PROCEDURE

This test produces relatively little discomfort. During this procedure a long tube called a gastroscope is inserted through your mouth and down through your upper gastrointestinal tract. The procedural steps and instructions may vary slightly but are essentially as follows:

- Before inserting the gastroscope in your mouth, steps will be taken to make you comfortable.
- The tip of the gastroscope has a camera on the end, and the image is viewed by your caregiver on a video monitor. The gastroscope allows an examination of the esophagus, stomach, and small bowel (*intestine*) leading out of the stomach. Your caregiver may take pictures of areas of interest or abnormality. Following the examination, the gastroscope is removed.

DURING THE PROCEDURE:

- Relax and follow instructions as much as possible.
- Let your caregiver know if you are uncomfortable, anxious or in pain.

Before inserting the gastroscope in your mouth, steps will be taken to make you comfortable:

- Your throat may be sprayed with a numbing agent (*anesthetic*) to dull your gag reflex.
- You may be given an intravenous medication to calm and sedate you prior to or during the procedure.
- Sometimes you may feel a mild discomfort when the tube is inserted. You do not need to worry. The tube is not going down your airway. You will be able to breathe just fine.

AFTER THE PROCEDURE

After your procedure, if given a medication for sedation, you may be taken to the recovery area. There, a nurse will watch and check your progress. Once you're awake, stable, and taking fluids well, barring other problems you will be allowed to go home. You may have a sore throat after your gastroscopy.

HOME CARE INSTRUCTIONS

- It is not unusual to pass moderate amounts of gas and experience a feeling of fullness following the procedure.
- You may resume all normal meals and activities as directed by your caregiver.
- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.
- Follow instructions for the use of throat lozenges or gargles.
- **Do not** drive a car or operate any dangerous equipment for at least 24 hours after being sedated.

SEEK IMMEDIATE MEDICAL CARE IF:

- You vomit bright red blood or material that looks like coffee grounds.
- You have blood in your stools or the stools look black and tarry.
- You have shortness of breath.
- You have a fever.
- You have difficulty recovering from your sedation.
- You develop abdominal pain that keeps getting worse and cannot be relieved with medicine.
- You have severe throat pain.

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Adult Health Advisor

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