



# QUEENSLAND GASTROENTEROLOGY

Associates in Practice  
Specialising in Gastrointestinal and Liver Diseases

## Upper Gastrointestinal Endoscopy Information and Consent Booklet

Please arrive at \_\_\_\_\_ on \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ at \_\_\_\_\_  
\_\_\_\_\_ for your hospital procedure  
with Dr \_\_\_\_\_

Please present to GE Unit or Minor Procedures Admissions at  
the hospital at your admission time above. You are required to be nil  
by mouth from \_\_\_\_\_

☐ **This is day surgery**

☐ **This procedure requires a - \_\_\_\_\_ night stay**

**As you will receive sedation for the procedure and will not be able to drive any type of vehicle for 24 hours following the procedure, you must arrange for a friend or relative to take you home after the procedure and be with you the rest of the day and overnight following the procedure. If you are travelling home by DVA, Taxi or Uber you will need a friend or family member to accompany you in the car home.**

### **What is upper gastrointestinal endoscopy?**

An upper gastrointestinal endoscopy lets your doctor examine the lining of the upper part of your gastrointestinal tract, which includes the oesophagus, stomach and duodenum (first part of the small intestine). Your doctor will use a thin, flexible tube called an endoscope and will view the images on a video monitor. If your doctor has recommended an upper gastrointestinal endoscopy, this leaflet provides you with information about the endoscopy - how it is performed, how it can help, and what side effects you might experience.

**Please ask your doctor about anything you don't understand.  
IF YOU ARE HAVING A COLONOSCOPY AT THE SAME TIME - PLEASE  
FOLLOW ALL COLONOSCOPY INSTRUCTIONS ONLY**

*For enquiries regarding your booking or questions about your procedure please ring our rooms on 07 3324 1500 or email [info@qgastro.com.au](mailto:info@qgastro.com.au)*

## **Why is an upper gastrointestinal endoscopy done?**

An upper gastrointestinal endoscopy helps your doctor evaluate symptoms including persistent upper abdominal pain, nausea, vomiting or difficulty swallowing. It is also used for finding the cause of bleeding from the upper gastrointestinal tract. Your doctor may use upper endoscopy to obtain a biopsy (small tissue samples). Biopsies are taken for many reasons, and your doctor may take a biopsy, even if they do not suspect cancer.

An upper gastrointestinal endoscopy is also used to treat conditions of the upper gastrointestinal tract. Your doctor can pass instruments through the endoscope to directly treat many abnormalities. For example, your doctor may stretch a narrowed area (dilatation), remove polyps (polypectomy of usually benign growths) or treat bleeding.

## **How should I prepare for the procedure?**

An empty stomach allows for the best and safest examination, so you should have nothing to eat or drink, including water, for approximately six hours before the examination. Your doctor/nurse will tell you when to start fasting.

## **Can I take my usual medications?**

It is imperative that you alert our office at least seven days prior to your procedure, if you are a diabetic or on blood thinners as your usual medication may need to be adjusted for the procedure. Blood thinners include but not limited to Warfarin, Persantin, Clopidogrel (Plavix or Iscover), Asasantin, Eliquis, Xarelto, Brilinta or Pradaxa. Please also alert our office if you have any allergies or medical conditions such as heart or lung disease. If you are pregnant, this should be discussed with your doctor prior to your procedure.

## **What can I expect during upper endoscopy?**

Your doctor may start by spraying your throat with a local anaesthetic. You will be given sedation to keep you comfortable during your procedure. You will then lie on your left side, and your doctor will pass the endoscope through your mouth and into the oesophagus, stomach and duodenum. The endoscope does not interfere with your breathing. Most patients consider the test only slightly uncomfortable, and the majority of patients sleep during the procedure.

## **What happens after upper endoscopy?**

You will be monitored for up to a few hours until most of the effects of the medication have worn off. Your throat might be a little sore, and you might feel bloated because of the air introduced into your stomach during the test. You will be able to eat after you leave unless your doctor instructs you otherwise. Your Gastroenterologist or GP will explain the results of the examination to you or arrange a follow up appointment to discuss the results, including any results of biopsies that have been performed.

Even if you feel alert after the procedure, your judgment and reflexes may be impaired until the next day. It is illegal to drive under the influence of sedatives. **You should not drive any type of vehicle, sign legal documents, play sport, operate machinery or make important decisions until 24 hours after your procedure.**

### **What are the possible complications of upper endoscopy?**

Upper endoscopy is a commonly performed and generally safe procedure. However, possible complications include:

**Dental:** Damage to teeth is rare. Please inform the doctor if you have dentures, crowns or any unstable teeth.

**Aspiration Pneumonia** (lung infection): This is an uncommon complication that may occur with inhalation of any remaining stomach contents during the procedure.

### **Eye Injury**

### **Jaw and Neck Discomfort**

**Haemorrhage** (bleeding): This can occur at a biopsy site or at the site where a polyp has been removed, but it is usually minimal and can usually be controlled through the endoscope. Rarely is surgery required to stop bleeding.

**Perforation** (a tear through the wall of the oesophagus, stomach or duodenum): This is an uncommon complication that may require surgery. All perforations carry a risk of infection (septicaemia).

**Anaesthetic:** Some patients may have a reaction to the sedatives, antibiotics or complications from heart or lung disease.

**Seek medical attention if;**

Although complications after upper endoscopy are uncommon, it is important to recognise early signs of possible complications. Complications are best assessed at the hospital and not over the telephone. Go to the hospital emergency department if you experience severe abdominal pain, fever, bleeding and chills.

Any plans for travel after your procedure should be discussed with your Doctor well before the day of your procedure.

**What are my safety issues?**

Sedation will affect your judgment for a period of 24 hours. During this 24 hour period after your sedation, for your safety and legally; Do NOT drive any type of vehicle and you must be accompanied home by a friend or relative, Do NOT operate machinery including cooking implements, Do NOT drink alcohol or take mind-altering substances.

**YOU MUST HAVE A FRIEND OR RELATIVE ACCOMPANY YOU HOME AND STAY WITH YOU OVERNIGHT AFTER THE UPPER ENDOSCOPY**

**CONSENT STATEMENT:**

I have read and understood the preceding information and agree to undergo an upper endoscopy, biopsy and/or polypectomy if required. I have had an opportunity to ask questions and they were answered to my satisfaction. I have been informed of the possible complications. I understand I have the right to change my mind at any time, including after I have signed this form. I understand that images or video footage may be recorded during my procedure to assist the doctor to provide appropriate treatment.

I have special concerns - they are

Patients  
Signature \_\_\_\_\_  
Printed  
Name \_\_\_\_\_  
DOB \_\_\_\_\_  
Date \_\_\_\_\_

I have confirmed the consent given above  
Doctors  
Signature \_\_\_\_\_  
Printed  
Name \_\_\_\_\_  
Date \_\_\_\_\_