

3755, CÔTE STE-CATHERINE, MONTREAL, QC H3T 1E2

GASTROSCOPYINFORMATION AND CONSENT

any cancellation at least 24 hours in advance.	the Jewish General Hospital. Please notify us of	laboratory located in room G-304 (third floor) of	at in the endoscopy	on
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Background information

A gastroscopy is a test in which a gastroscope (a long flexible tube) is passed through the mouth and back of the throat in order to examine the lining of the upper digestive tract (esophagus, stomach and first portion of the small intestine). A gastroscopy is usually performed to investigate symptoms or control bleeding. During the test, the doctor may take a small piece of tissue (biopsy) to be analyzed in the laboratory. The procedure also allows for stretching of narrowed areas (dilatation), injection of medications to stop bleeding or cauterization (burning) of bleeding zones or dilated blood vessels.

The throat is usually sprayed with a local anesthetic. Your doctor may also give you medication through a vein to make you relaxed and comfortable. If you receive a sedative, you may fall asleep during or after the procedure. You may be given extra oxygen through the nose. The tube does not interfere with your breathing.

After the gastroscopy, if you have received medications, you will remain in the endoscopy area until the effects of the medications have sufficiently worn off. Your throat may be sore for a few hours, and you may feel bloated for a few minutes. You will be able to resume your usual diet approximately 45 minutes following the procedure. If you receive a sedative, you will not be allowed to drive for 8 hours following the procedure.

Instructions

Your gastroscopy will take place

For the best possible examination, your stomach must be COM-PLETELY EMPTY. It is important to follow these steps:

- 1. If your gastroscopy is in the MORNING: FAST FROM MIDNIGHT (NO LIQUIDS OR SOLIDS)
- If your gastroscopy is in the AFTERNOON:
 YOU ARE ALLOWED TO HAVE CLEAR FLUIDS FOR BREAKFAST, BEFORE 9:00 AM (COFFEE, TEA, JUICE, SOFT DRINKS, JELL-0)

Please **remove all jewelry** before the procedure, in case electrical current is used, the jewelry can attract the current and cause local tissue damage. It is advisable to leave it at home, in order to avoid theft of loss. **Come accompanied** or arrange for alternate means of transportation. If you are driving, you will not be given a sedative.

PLEASE INFORM THE DOCTOR IF YOU HAVE ANY OF THE FOLLOWING MEDICAL CONDITIONS:

- a. If you are taking Plavix, you must discuss with your treating physician to see if it can be stopped safely before the test
- b. If you are taking Coumadin, and are already followed in the Anticoagulatiaon Clinic of this hospital, you will need to return to the clinic for instructions on how long to hold the medication prior to the procedure, and whether you will need heparin injections to compensate. If you are followed elsewhere, you will be referred to the Thrombosis clinic of this hospital for assessment and plan.
- c. If you have diabetes: Do not take your diabetic pills on the morning of the procedure. You must discuss with your treating physician how to adjust your diabetic pills the day before your gastroscopy. If you are on insulin, you must also consult with your diabetic doctor with regards to dose adjustments prior to the procedure.
- $\ensuremath{\text{d}}.$ If you are allergic to any medications, soy or eggs, notify the nurse and doctor.

Complications

Gastroscopy is associated with very low risk of complications when performed by specialized physicians. One possible complication is a minuscule perforation (a tear in the wall of your esophagus, stomach or small bowel) that can occur in less than 0.01% of cases. If that were to occur, it can be managed simply with bowel rest and suctioning of fluids until the tear seals or it may require surgery. Bleeding may occur from the site of biopsy or polyp removal. It is usually minor and stops on its own, or can be controlled by cauterization (application of electrical current), or injection medication into the bleeding site, using a needle through the gastroscope. It is extremely rare to require transfusion, or need surgery to stop the bleeding. Another rare

complication of gastroscopy is aspiration, a phenomenon by which residual stomach fluid enters the lungs are excessive gagging, causing a local irritation or pneumonia.

Localized irritation of the vein or even a small bruise may occur at the site of injection of medication. This will resolve in a few days, or rarely after a few weeks. We rarely see reactions of the medication administered during the procedure. These reactions usually resolve by themselves rapidly. Other extremely rare complications can occur in predisposed patients, including heart attack or a stroke. As for any other medical intervention, cases of death have been reported, but this extremely rare.

Informed Consent

Doctor's signature	Date	Witness	Patient signature .
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