

Mountain West Endoscopy Center

Patient Information Sheet – EGD

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| <input type="checkbox"/> Oscar A. Batista, M.D. | <input type="checkbox"/> Brett W. Doxey, M.D. | <input type="checkbox"/> D. Rayburn Moore, M.D. |
| <input type="checkbox"/> Mark E. Boschert, M.D. | <input type="checkbox"/> Peter C. Fenton, M.D. | <input type="checkbox"/> Randall J. Ryser, M.D. |
| <input type="checkbox"/> John H. Bowers, M.D. | <input type="checkbox"/> Edward J. Frech, M.D. | <input type="checkbox"/> Michael J. Sossenheimer, M.D. |
| <input type="checkbox"/> Gordon E. Harmston, M.D. | <input type="checkbox"/> Clarke A. Hilbig, M.D. | <input type="checkbox"/> I. Raymond Thomason, M.D. |
| <input type="checkbox"/> Christopher C. Canale, M.D. | <input type="checkbox"/> Robert G. Jones, M.D. | |

You have been scheduled for an examination of the upper gastrointestinal tract (esophagus, stomach, and a part of the small intestine). This is done by looking at the lining of the esophagus, stomach, and intestine with a lighted tube. The tube is thinner than most foods that you swallow. It is important not to eat any solid food twelve hours prior to your procedure (or clear liquids three hours prior). If you're also having a colonoscopy, stop clear liquids three hours prior to procedures.

The morning of the test you will have your blood pressure and pulse checked. Then you will be asked to lie down on the examination table. You will be given sedative medications through a vein to help you relax during the test. While you are in a comfortable position on your side, the endoscope is passed through the mouth and then in turn through the esophagus, stomach and duodenum. The endoscope does not interfere with your breathing during the test. Most patients fall asleep during the procedure and do not report discomfort. The examination takes 5-15 minutes. If abnormalities are seen, biopsies are then sent to the laboratory for examination by microscope. The endoscope is taken out after the exam is completed. Most patients are awake enough to leave within an hour. However, for safety reasons, you cannot drive or operate dangerous machinery, tools or appliances until the following day, as the full effect of the medicine wears off slowly. Before you leave, a check-out sheet will be given to you explaining the results of the test.

Endoscopy is generally very safe. Bleeding may occur from a biopsy site or where a polyp was removed. Bleeding is usually minimal and only very rarely requires blood transfusions or surgery. Complications such as a perforation (a tear that might require surgery for repair) are very uncommon. It is important for you to recognize early signs of any possible complication. If you begin to run a fever after the test, begin to have trouble swallowing, or have increasing throat, chest or abdominal pain, let your physician know about it promptly.

Any questions you have about this examination or its possible complications should be discussed with the doctor before the exam begins.

7 DAYS PRIOR TO YOUR EXAM: Stop taking **Aspirin, Ginkgo Biloba or Plavix.** Tylenol is okay to take. If you have a heart condition, had a recent heart attack or cardiac stent placement, then you should discuss this with your Cardiologist or Primary Care Physician prior to stopping any anti-clotting agents. If you are taking blood thinners such as Coumadin, then you should discuss with your Cardiologist or Primary Care Physician how to manage your blood thinners, and, **IF** you should stop it before your procedure. However, if you have had a mechanical heart valve, history of a deep clot in your leg, or a pulmonary embolism, then you may need Lovenox or Heparin up to the day of your procedure. If you have diabetes, please follow our attached guidelines. **STOP** eating high fiber foods, fiber supplements and discontinue any **iron** supplements 5 days prior to your examination.

3 DAYS PRIOR TO YOUR EXAM:

Stop taking all anti-inflammatory medicines such as Ibuprofen, Advil, Naproxen, or Aleve. You can take Tylenol for pain.

Do you have an artificial heart valve, artificial joint replacement or history of previous endocarditis (heart infection)? Yes ___ No ___

Patient Signature: _____

Date: _____

Please bring someone with you to drive you home, as you will be sedated for the exam. You may not drive for 12 hours. The doctor will talk to you after the exam and will give you recommendations for diet, medication, follow up care, etc. Wear comfortable clothing; bring your glasses, hearing aids, insurance card(s) and completed information form. For your safety, no jewelry should be worn **anywhere on your body** the day of your procedure. No valuables should be brought to the center. We are not responsible for patient valuables. We will expect payment of co-pays, coinsurance and deductibles at the time of service. If your insurance requires a referral, you should contact your primary care physician to arrange for us to receive the referral prior to the procedure. Additional information can be found at our website www.mwgi.com.

You may receive THREE separate bills for this procedure: 1-Physician, 2-Facility, 3-Pathology

Q u e s t i o n s – C a l l _____