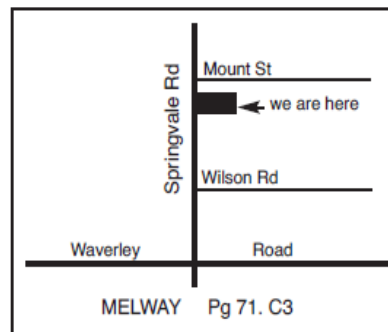


## Patient GASTROSCOPY Preparation Instruction Booklet

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**Examination requested:**  Gastroscopy

**For appointments:** 9545 0569



### APPOINTMENT DETAILS

Date \_\_\_\_\_ Time \_\_\_\_\_

### PATIENT DETAILS

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Address \_\_\_\_\_ Post Code \_\_\_\_\_

Indications \_\_\_\_\_

### REFERRING DOCTOR DETAILS

Dr \_\_\_\_\_ Provider Number \_\_\_\_\_

Address \_\_\_\_\_ Post Code \_\_\_\_\_

Tel No \_\_\_\_\_ Fax No \_\_\_\_\_ Date of referral \_\_\_\_\_

### REFERRING DOCTORS: PRE-ADMISSION ASSESSMENT

1. Pre-admission assessment form must be filled out and reviewed by our medical staff at least 1-2 weeks before the procedure. The form can be completed at our centre or can be downloaded from our website and sent back to us by email or fax.
2. Some patient may want an appointment before the procedure or separately after the procedure if he/she wishes for more lengthy discussions about the procedure or findings.
3. Our staff can assist with inquiries from you or your patient.

#### **Pre-admission consultation is recommended for the following (a guide):**

- Combinations of cardiovascular, respiratory, metabolic or endocrine conditions predisposing to coronary heart disease or significant cardiac or respiratory compromise
- Age 80yo and above
- Age 75yo and above plus cardiovascular/respiratory/obstructive sleep apnoea (OSA) symptoms/metabolic/endocrine conditions
- BMI 40 and above; Weight > 120kg regardless of BMI (due to occupational health & safety)
- BMI 35 and above with cardiovascular, respiratory, OSA symptoms, metabolic or endocrine conditions (150cm, >80kg) (160cm, >90kg) (170cm, >100kg) (180cm, >115kg)
- Heart disease including stents, pacemakers, defibrillators, artificial valves, coronary artery disease, arrhythmias, stroke, congestive cardiac failure
- Chronic obstructive airway disease, Obstructive sleep apnoea
- Diabetes requiring insulin or SGLT-2 inhibitors / Kidney or liver disease / Bleeding or clotting conditions

#### **Blood thinning agents: Antiplatelet drugs:**

- Dipyridamole (Persantin, Persantin SR)
- Aspirin-Dipyridamole (Asasantin SR)

- Prasugrel (Effient), Ticagrelor (Brilinta)
- Clopidogrel (Iscover, Plavix, Pidogrel, Plavacor, APO-Clopidogrel)
- Aspirin-Clopidogrel (APO-Clopidogrel, Clopidogrel/Aspirin, CoPlavix, DuoCover, DuoPlidogrel, Piax Plus)
- Ticlopidine (Ticlid, Tilodene)

#### **Oral Anticoagulant drugs:**

- Warfarin (Coumadin, Marevan) Dabigatran (Pradaxa), Rivaroxaban (Xarelto), Apixaban (Eliquis), Phenindione (Dindevan)
- Heparin anticoagulants: Heparin (Calciparine, heparin Sodium, Heparinsed Saline), Enoxaparin (Clexane, Lovenox, Xaparin) Dalteparin (Fragmin), Fondaparinux (Arixtra)

#### **Insulin or SGLT-2 Inhibitors for Diabetes:**

- Insulin
- Forxiga (Dapagliflozin), Invokana (Canagliflozin), Jardiance (Empagliflozin), Steglatro (Ertugliflozin), Xigduo XR, Jardiamet, Segluromet, Qtern, Glyxambi, Steglujan
- If you are taking any other diabetes medication, please contact our centre for advice.

#### **Deferring procedure:**

- A patient may need to defer his/her procedure if there is possibility of pregnancy, acute viral/bacterial illness, recent falls, recent exacerbations of health conditions etc.
- Other medical/surgical conditions may need to be sorted out first and information provided to us especially cardiovascular, respiratory or endocrine conditions.

### **ANAESTHESIA INSTRUCTIONS (ALL PATIENTS) – IMPORTANT!**

- Intravenous medications (anaesthetic) will be given via a peripheral vein, usually in your hand or forearm.
- Sometimes anaesthetic throat spray (gastroscopy) is used and you will have some mouth & throat numbness for a few hours - after your procedure, be careful about drinking/eating fluids/foods that are too hot or too cold.
- Anaesthesia affects your judgement & coordination. **For safety, within 24 hours of your anaesthetic:**
  - **Do NOT drive any vehicle or operate machinery including cooking implements.**
  - **Do NOT make important decisions or sign legal documents.**
  - **Do NOT drink alcohol/smoke/take mind-altering substances as they may react with the anaesthetic.**
  - **Do NOT care for others without other adult help especially young children.**
- ESCORT: You must have a responsible adult take you home in a suitable vehicle. Train/tram/bus/walking are not allowed.
- COMPANION: **You must have a responsible adult stay with you at home for the rest of the day and overnight.**
- REST: You should rest at home and catch up with oral fluids/food.

### **PATIENT RESPONSIBILITIES FOR SAFETY AND QUALITY OF TEST**

- **Please read and follow our instructions carefully.** Please contact our staff or your doctor if you need further explanations.
- When making your appointment, **please inform staff of your medical conditions, medications, height & weight and if you are breastfeeding or may be pregnant.**
- **You may require a preadmission assessment** at least one week before the procedure day if you have certain health conditions or if you are taking certain medications. Your referring doctor and our staff can advise you.
- Please familiarise yourself with risk and safety of your procedure(s) on page 4. The examinations are usually safe though they carry some **risks** of complications. If you wish to discuss the procedure(s) and their risks with our endoscopist and/or anaesthetist earlier and in greater detail, please make an appointment at least one week before the procedure

### **ABOUT GASTROSCOPY**

- Gastroscopy is a procedure that examines the lining of the oesophagus/food pipe, stomach and duodenum (first part of the small intestine) with an endoscope, which is a long, thin, flexible tube with a camera and light source.
- The endoscope is inserted via the mouth under sedation so you will not be aware of the procedure. Sometimes local anaesthetic is sprayed into your throat.
- Biopsies (tiny samples) may be taken from the lining of the oesophagus, stomach or duodenum with a biopsy forceps.

## GASTROSCOPY PREPARATION

- × **DO NOT eat food 8 hours prior to your procedure.**
- ✓ You are allowed to eat a **light breakfast up till 8 hours prior** to your procedure.
- × **DO NOT drink any fluids (including water) 4 hours prior to your appointment time.**
- × **DO NOT chew gum or consume mints or lollies.**
- ✓ You are allowed to drink **clear fluids up till 4 hours prior** to your procedure.
- ✓ **Clear fluids include:**
  - ✓ Water, honey water, coconut water
  - ✓ Black coffee, black tea (**no milk/milk products**)
  - ✓ Clear broth, Bonox
  - ✓ Light coloured soft drink, cordial, sports drink, icy pole (avoid deep colouring, such as red, purple, black)
  - ✓ Clear, strained, pulp-free juices, such as apple juice
- ✓ Please **take** your morning regular **medications** for **reflux, epilepsy, blood pressure, heart rate and asthma before 6am** with a **sip of water**.
- × **STOP medications for diabetes** if you are taking these medications, unless advised otherwise.
- ✓ If you are on **blood thinning medications** (see list of drugs on page 2), please follow the instructions given by our doctor at your pre-admission assessment.

When you arrive:

- ✓ Must wear a t-shirt and loose, comfortable clothing and shoes (not high heels).
- ✓ Bring all your regular medications, Medicare card and private insurance card if you are insured.
- ✓ You must have a responsible adult take you home in a suitable vehicle and stay with you at home for the rest of the day and overnight. Train/tram/bus/walking home are not allowed.

## RISKS & SAFETY OF PROCEDURES

Gastrointestinal endoscopies are usually very safe procedures. However, there is a slight risk of complications requiring further management. If you wish to discuss these earlier or in greater detail, please make a pre-procedure appointment at least one week before your procedure appointment.

### Specific risk of gastroscopy

- a. Mouth/throat/oesophageal/abdominal pain or discomfort can occur that takes a few days to settle with symptomatic treatment.
- b. Organ injury and perforation through the wall of the oesophagus (food pipe), stomach or duodenum might occur very rarely.

If there is heavy bleeding or severe pain, you may need to have further assessment at your nearest hospital emergency department.

### General risks of gastroscopy and colonoscopy

- a. The procedure may not be finished due to problems inside your body or because of a technical difficulty.
- b. Abnormalities or diseases may be missed or not seen. This is uncommon.
- c. Nausea, vomiting and dizziness may occur. This usually last less than 4 hours.
- d. Bleeding can occur at a biopsy site or where a polyp had been removed. This is usually minor and can be stopped through the scope.
- e. For heavier bleeding or abdominal pains, a hospital transfer may be needed. Admission and interventional endoscopy may occur. Blood transfusion or surgery may be rarely needed to stop bleeding. **Ambulance at your expense may be required to transfer you to hospital.**
- f. Reflux of gastric fluid can occur which can cause coughing and may require suctioning. Mouth/throat abrasion causing soreness, hoarse voice and chest infection may occur. This tends to settle itself. Antibiotics, physiotherapy/other treatments may be needed.
- g. Teeth or dental oral works can be damaged due to instrumentation.
- h. Heart problems like heart attack or abnormal heart rhythms may uncommonly occur and is more common in those with other significant health conditions. Strokes can occur rarely.
- i. Cross infections are rare. Instruments and equipment are either single use or else are thoroughly cleaned and disinfected according to the required standards.
- j. Reactions to sedation drugs including severe allergic reactions can occur.
- k. Deep vein thrombosis can occur and lead to pulmonary embolism – this is rare with endoscopies.
- l. Death is possible due to the procedure or sedation but is extremely rare
- m. As the procedure is done under sedation and not under general anaesthetic, there may be a small risk of awareness during the procedure.

The Glen Endoscopy Centre