

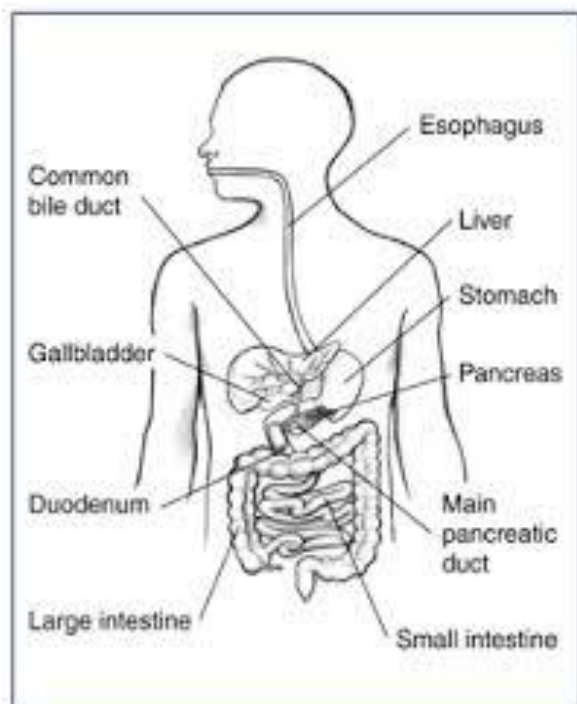
Having an Endoscopic Ultrasound – Information for Patients

What is Endoscopic Ultrasound?

You have been advised to have an endoscopic ultrasound to help find the cause of your symptoms.

The upper gut consists of the oesophagus (gullet), stomach and duodenum (part of the small intestine joining the stomach). Endoscopic ultrasound is a procedure that combines the ability to look directly at the lining of the upper gut with a video camera, whilst also showing the structures that lie outside the gut (such as the pancreas) using ultrasound.

This is done using an ultrasound scope, which is a long thin flexible tube with a light and an ultrasound probe at the end of it. It is passed into the mouth and on to the gullet (oesophagus), stomach and sometimes the duodenum. This is not a painful procedure and takes between 10 -20 minutes, if it takes longer, you should not worry. During the procedure the doctor may wish to take tissue samples. This is called Fine Needle Aspiration (FNA). You should not feel them being taken.



You have the choice of sedation or local anaesthetic throat spray. It is recommended that you have sedation for this procedure.

Although the procedure does not take long, you may be in hospital for 3-4 hours depending on whether you have had a FNA done. If you have had sedation you will need time to recover.

It is important that a friend or relative accompany you home and stay with you overnight.

If you had local anaesthetic spray you can go home alone and may be able to drive.

What are the risks associated with this procedure?

- Bloating and abdominal discomfort is not unusual for a few hours
- You may have a sore throat for 24 hours

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- There may be a slight risk to teeth, crown or, dental bridge work, you should tell the nurses if you have either of these.
- Using sedation can cause breathing complications in up to 1 in 200 procedures, which are not serious.
- Diagnostic endoscopic ultrasound procedure carries a very small risk (1 in 10,000 cases) of haemorrhage (bleeding) or perforation (tear) of the gut following the procedure. If samples are taken, these risks are increased. Should such complications occur you may require surgery to repair it.
- For patients having a sample (FNA) of their pancreas, there is an increased risk of developing pancreatitis (inflammation in the pancreas gland). Mild pancreatitis develops in up to 7 out of 100 patients who have sampling of the pancreas and is usually mild and goes away within a few days. Occasionally, very rarely, the pancreatitis can be very severe and life threatening; this happens in only a very small minority of patients (about 5% of all patients who develop pancreatitis after FNA).
- Other very rare complications include aspiration pneumonia (inflammation of the lungs caused by inhaling secretions from the mouth) or adverse reactions to intravenous sedative drugs.
- No test is 100% accurate and abnormalities may be missed, including cancers.

The person doing the test will discuss any worries you have about the risks associated with this procedure

What are the benefits of this procedure?

The procedure is to help diagnose your problem. Like all tests, this is not guaranteed to demonstrate all abnormalities and on rare occasions conditions are not identified.

What are the alternatives?

This is the most accurate way to investigate and diagnose certain problems in the upper abdomen. Alternatives are other scans, such as CT or MRI scanning.

Preparing for Endoscopic Ultrasound

Please read the information enclosed carefully. If you have any queries, contact the unit where you will be having your procedure.

If you are **diabetic**, **on blood thinners such as warfarin, clopidogrel, ticagrelor, prasugrel, rivaroxaban, apixaban, or dabigatran and edoxaban** please contact the unit for further information. Please bring any medication you are currently taking (including sprays and inhalers) with you to your appointment. If you are taking a number of tablets please bring in your repeat prescription sheet.

IMPORTANT – if you take medication for your blood pressure, please make sure you take this as usual prior to your procedure with small sips of water (at least 2 hours before)

To allow a clear view the stomach must be empty, so please follow these instructions:

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- Do not have anything to eat for at least **six** hours before the test
- Do not drink milk for four hours before your test. Milk will line the stomach and not allow a clear view of the lining
- You may drink clear fluids (water, black tea or black coffee) up to two hours before the time of the appointment

When you arrive at the hospital

Please report to the reception desk where a receptionist will check your details and direct you to the waiting area. Please be aware the appointment time you have been given, will be your admission time. Your procedure will be carried out as near to this time as possible however on occasions due to emergency patients being seen, this may be delayed.

- Please do not bring any valuables to the hospital with you
- Please do not wear any nail varnish, lipstick or jewellery (tongue studs must be removed)
- Please bring a contact number of a relative or friend with you.

A nurse will then explain the procedure to you, to make sure you understand the benefits, and possible risks as detailed in this leaflet. The staff will want you to be as relaxed as possible and will not mind answering your questions.

Provided you are happy for the procedure to be performed, you will be asked to sign the consent form to confirm your understanding of the procedure. You will be offered a copy of this.

This form also asks for your consent to further procedures that may be necessary, including taking tissue samples (biopsies) that may be helpful in diagnosing your problem. Tissue may be used for research but you can request that no removed samples be used for this purpose on your consent form.

Just before the procedure you will also see the person who will be performing the test and provided you are happy for the procedure to be performed, they will ask you to confirm your agreement and they will also sign your consent form.

If you need the help of an interpreter to understand any of this information, or on the day of the procedure, please contact the unit where you will be having the test, as soon as possible.

Please note relatives/friends or children should not be used as interpreters when you are required to sign your consent form. You should contact the Endoscopy Unit who will arrange for an interpreter to be present.

Information for patients arriving by ambulance

To ensure you do not miss your appointment and arrive home in a timely fashion, please when booking your transport, give the following instructions:

For morning appointments – please arrange for the ambulance to collect you at 9 am
For afternoon appointments – please arrange for the ambulance to collect you at 12 noon.

Privacy & Dignity

Delivering same-sex accommodation is a long standing commitment in the NHS as part of the drive to deliver the best possible experience for all patients (DOH 2007). Endoscopy Units within

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the Heart of England NHS Foundation Trust, maintain these standards either by operating single sex areas or single sex days.

Please note that relatives are NOT allowed to accompany you past the admission area due to privacy and dignity reasons.

Eliminating mixed sex accommodation is our priority except where it is in the overall best interests of the patient, i.e. in an emergency (they have a life threatening condition) or where delays to that patients treatment would mean deterioration in their condition. Should a patient of the opposite sex require such urgent care during your visit, we will ensure your privacy and dignity is maintained by screening off the patient of the opposite sex

On occasions medications are used during this procedure, which are known as 'off shelf'. This means medicines that are used for clinical situations which fall outside of the terms of their Summary of Products Characteristics. The use of medicines in this way is seen as a legitimate aspect of clinical practice and is often necessary in many areas of medicine. For further information concerning the use of 'off shelf' drugs, please log onto the Medicines and Healthcare product Regulatory Agency (MHRA) website.

During the test

You will not have to undress but you must remove dentures, glasses or contact lenses and loosen tight clothing around the neck.

In the examination room you will be made comfortable on the couch resting on your left side. A nurse will stay with you throughout the procedure. To keep your mouth slightly apart, a plastic mouthpiece will be put gently between your teeth. When the person doing the test passes the endoscope into your stomach it will not cause pain, nor will it interfere with your breathing. The whole examination usually takes between 20 – 30 minutes.

Throat spray

This procedure is usually carried out using a combination of throat spray, which will be applied to the back of the throat to numb it, and sedation. This procedure can be carried out with throat spray alone but because the ultrasound scope is bigger than a standard scope, and the procedure lasts longer, it is usually recommended that sedation is given as well. The procedure can be done with throat spray alone but may be uncomfortable. With throat spray alone you are fully conscious and aware, and you can go home unaccompanied almost immediately after the procedure. You are permitted to drive and carry on your day as normal.

You will not be able to have anything to EAT or DRINK for about an hour, until the effects of the spray have worn off. After this you will be able to eat and drink normally.

Sedation and oxygen

The procedure is normally done with sedation. If you have sedation it will be given through a small needle in the back of your hand or in your arm. Sedation will make you slightly drowsy and relaxed but not unconscious. You will be in a state called co-operative sedation. This means that although drowsy you will still hear what is said to you and there will be able to following simple instructions during the procedure.

You will be given oxygen through small tubes placed gently in your nostrils or through the plastic guard in your mouth. A clip will be attached to a finger or ear-lobe so that the levels of oxygen in the blood can be monitored and your blood pressure may also be measured automatically during the procedure using a small cuff around your arm.

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Please note that we will not be able to give you sedation if you do not have a responsible adult to collect you and stay with you for 24 hours following your procedure.

Further information

Training doctors and other health professionals is essential to the continuation of the NHS, and improving the quality of care. Your treatment may provide an important opportunity for such training under the careful supervision of a senior doctor. You can, however, decline to be involved in the formal training of medical and other students - this won't affect your care and treatment.

Going home after you have received sedation

After the test you will remain in the unit to rest for about an hour. It is essential that a responsible adult comes to pick you up from the unit and accompanies you home by car or taxi – **public transport is not suitable**. Please note the unit closes at 6pm. Your relative/friend should arrive no later than 5.30pm to collect you.

When you arrive home, it is important to rest quietly for the remainder of the day, with someone to look after you for 12 hours. It is advisable to have the following day off work but in any event for the first 24 hours following sedation **DO NOT**:

- Drive a car
- Drink alcohol
- Take sleeping tablets
- Operate any machinery or electrical items – even a kettle
- Sign any legally binding documents
- Work at heights (including climbing ladders or onto chairs)

Sedation can impair your reflexes and judgement.

When will I know the results?

Before discharge from the unit, the nurse who has been looking after you will be able to give you a brief outline of the test results. If a biopsy has been done, the laboratory results will take longer, about 4 -6 weeks. You will be given a copy of the report to take home with you.

The nurse will advise you to discuss the details of the results and any necessary treatment with your GP or hospital specialist. If you have any questions about the test, please contact the unit where you will be having your Endoscopic Ultrasound.

To contact us by telephone before your appointment (NOTE this number should NOT be used for booking enquiries):

Heartlands Endoscopy Unit

Monday to Friday 8.30 am to 5.30 pm – Excluding Bank holidays **0121 424 0438**

Queen Elizabeth Hospital Endoscopy Unit

Monday to Friday 8.30 am to 5.30 pm – Excluding Bank holiday **0121 371 3833**

If you are unable to keep your appointment please telephone the appropriate number as soon as possible so the appointment can be allocated to another patient.

If you require this information in another format, such as a different language, large print, braille or audio version please ask a member of staff or email interpreting.service@uhb.nhs.uk

