

HOW DO I PREPARE FOR MY UPPER ENDOSCOPY?

One Week Before Your Procedure

- Arrange a ride: Please have a responsible driver come with you for your procedure. Your procedure will be cancelled if you do not have a responsible person to remain with you and drive you home. Let them know they will need to wait for you about 2 hours. You will be given medications that will make you relax and be sleepy, so you cannot drive a car or take public transportation alone the day of your procedure.
- Re-read the Instructions on the Patient Clinical Summary you were given at the office the day you scheduled your endoscopy. Follow all of the instructions, especially the medication instructions. There may be medications you need to stop for a few days prior to the procedure.
- Please call us right away if you develop any illnesses or changes in your health, or if you have any concerns or need to cancel your procedure.

The Day Before Your Procedure

- Unlike a colonoscopy, there is no special cleansing preparation you need to drink before an upper endoscopy. You can eat normally the day before the procedure. Your stomach and duodenum must be empty the day of the procedure for the examination to be thorough and safe, so you will not be able to eat or drink anything starting at midnight

the night before your procedure.

- A nurse from the Endoscopy Center will call you the afternoon before your procedure day to check on you and answer any questions you may have.

The Day of Your Procedure

- Take only the medications we have instructed you to take with a sip of water at least 2 hours before your procedure arrival time.
- Do not eat, drink, chew gum, suck on candy or smoke.
- Have your responsible driver bring you to your procedure, remain with you, and drive you home.
- Bring your insurance cards, a photo ID (driver's license) and any required payment.
- Leave your other valuables including jewelry home.
- You will not have to undress for your procedure. Please wear comfortable clothes with a top that is not too bulky and has sleeves that can be rolled up.

QUESTIONS?

It is important that you follow all of the written instructions carefully. If you have questions about your scheduled procedure, your instructions, or anything in this brochure, please contact the Seaford Endoscopy Center at (302) 629-7177 or Dr. Mackler's office at (302) 629-2229.



Upper Endoscopy Patient Information

Procedure Date _____

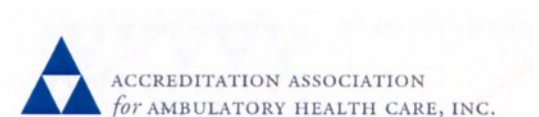
Procedure Arrival Time _____

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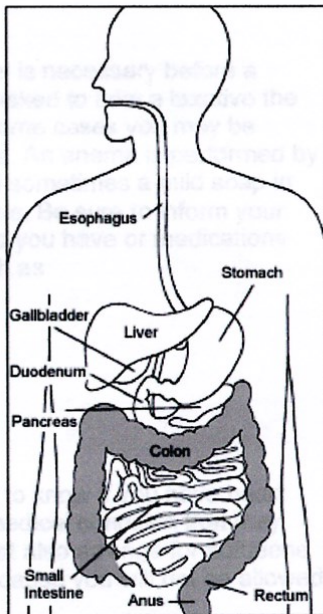
www.seafordendo.com



Understanding your Upper Endoscopy

WHAT IS AN UPPER ENDOSCOPY?

An upper endoscopy is a procedure during which your gastroenterologist is able to see inside your upper digestive system including your esophagus, stomach, and the duodenum (first part of the small intestine). The procedure is done to look for the reason for swallowing difficulties, nausea, vomiting, reflux, bleeding, indigestion, abdominal pain, or chest pain. The procedure might also be done to remove foreign bodies, stop bleeding, or open narrow areas in the esophagus (strictures). Upper endoscopy is also called EGD, which stands for the technical term for the procedure, esophagogastroduodenoscopy.



The digestive system

HOW IS THE UPPER ENDOSCOPY PERFORMED?

An upper endoscopy is an outpatient procedure done in the Endoscopy Center. The procedure itself only takes a few minutes, but you can expect to be at the Center for a total of about 2 hours.

After you arrive, you will be admitted to a room in our pre-procedure area. A Registered Nurse will review your medical history and medications, perform a brief examination, and insert a small intravenous catheter (IV) in your arm or hand which will be used to give you medications and fluids. The anesthesiologist will also examine you and explain his/her plan for the sedation you will receive. Your heart rate, blood pressure and breathing will be monitored before, during, and after your procedure.

You will be transported to another room for your procedure. A small plastic mouthpiece will be placed in your mouth to protect your teeth and the endoscope. The anesthesiologist will administer a sedative through your IV that will put you to sleep and keep you comfortable during the procedure. Once you are sedated, the doctor will guide a thin, flexible, lighted tube (endoscope) through your mouth and into your esophagus. He will carefully examine your esophagus, then your stomach and duodenum. The doctor will put a small amount of air thru the endoscope into your stomach to expand it and make it easier for him to examine it. He

will be able to see through the endoscope if there are any abnormalities such as inflammation or bleeding that do not show up well on x rays. The doctor can also remove growths (polyps), take tissue samples (biopsies) and stretch narrow portions of the esophagus (dilation) as necessary. The polyps and tissue samples will be sent to the laboratory for examination.

WHAT SHOULD I EXPECT AFTER THE PROCEDURE?

After the procedure, you will be returned to your room in the post anesthesia care unit (PACU) where you will quickly recover from your sedation. It is uncommon but possible that you may have a mild sore throat after the procedure. Your doctor will speak to you before you are discharged. General findings from the procedure will be given to you at that time. You will receive written and verbal discharge instructions prior to leaving. It is important to follow these instructions carefully and keep your scheduled follow-up appointment with your doctor. You can also expect a nurse from the Center to call you the day after your procedure to see how you are feeling. If at any time after the procedure you experience pain of any kind, please contact your doctor at the numbers provided.