Upper Gastro-intestinal Endoscopy (Gastroscopy)

Information for patients, relatives, and carers

Endoscopy Unit

ℹ️ For more information, please contact:

York Hospital Patients:
The York Hospital
Wigginton Road, York, YO31 8HE
Tel: 01904 726694

Scarborough and Bridlington Hospital Patients:
Scarborough Hospital
Woodlands Drive, Scarborough, YO12 6QL
Tel: 01723 385141

Caring with pride
If you become ill or cannot keep your appointment for any reason, please tell us as early as possible so that another patient can be offered treatment.

We will rearrange your appointment.

Please telephone the endoscopy waiting list team on York: 01904 724111 or Scarborough/Bridlington on 01723 342660 between 8am and 5pm.

To cancel your appointment out of hours, with at least 48 hours’ notice, please use our online form: www.yorkhospitals.nhs.uk/appointment

If you receive a consent form in the post, please **read and sign** this before your procedure and bring it with you.

If you have doubts that need discussing before signing please bring the form and discuss it with the nurses at admission.

If you have a stoma, pacemaker, have diabetes, other health issues (listed on page 10), or are on blood thinning medication please see the advice given on pages 8-10 of this booklet and contact us before your appointment:

If you are a York Hospital patient please contact the pre-assessment nurses on York: 01904 724527.

If you are a Scarborough/Bridlington patient, please phone the automated helpline on 01723 342905.
Listening in order to improve ● Always doing what we can to be helpful

Contents

Information about consent .................................................................4
What is an upper gastro-intestinal (GI) endoscopy? ..........................6
What happens when I arrive at the Unit? ...........................................7
What if I have diabetes? .....................................................................8
What if I have a pacemaker? ............................................................8
What if I am on blood thinning medication? ....................................9
What about other health issues? .......................................................10
What happens before the procedure? .................................................11
I have been told there will be trainees in the list, what does this mean? ..................................................................................11
Why might you take photos or videos of my gullet, stomach, or upper intestine? .................................................................12
Will I be awake during the procedure? .............................................13
What happens during the examination? .............................................15
Can I drive home? Will I need someone to stay with me? .................16
Are there any risks involved in having an upper GI endoscopy? ..........17
What are the benefits of having an upper GI endoscopy? ..................18
What are the alternatives to an upper GI endoscopy? .........................18
When can I go home? ........................................................................19
Before you leave the Endoscopy Unit.................................................20
How will I feel after my endoscopy? ..................................................20
When will I get my results? ...............................................................20
Space for your questions ..................................................................21
What should I do if I have any problems or worries about my gastroscopy after going home? .........................................................22
Fasting Instructions to follow before Endoscopy: ..............................23
A checklist for patients .....................................................................24
Information about consent

This leaflet explains a little about what will happen before, during and after your procedure on the Endoscopy Unit. It tries to answer some of the questions you may have.

We are there to help you and will always make time to listen to you and answer your questions. If you do not fully understand anything about your procedure, please ask.

You have been advised by your GP or hospital doctor to have this investigation.

This procedure requires your formal consent.

If you are unable to keep your appointment, please notify the waiting list team as soon as possible: York Hospital patients, phone 01904 724111, Scarborough/Bridlington Hospital patients, phone 01723 342660. This will enable the staff to give your appointment to someone else and they will be able to arrange another date and time for you.

This booklet has been written to enable you to make an informed decision in relation to agreeing to the investigation. Please bring this booklet and the enclosed consent form with you when you attend for the procedure. The consent form is a legal document therefore please read it carefully. Once you have read and understood all the information, including the possibility of complications, and you agree to undergo the investigation, please sign and date the consent form.
You will notice that the consent form is duplicated, allowing you to keep a copy for your records, please check and sign it before you attend.

If however there is anything you do not understand or wish to discuss further do not sign the form but bring it with you and sign it after you have spoken to a health care professional.
What is an upper gastro-intestinal (GI) endoscopy?

Upper gastro-intestinal (GI) endoscopy is an examination of your gullet, stomach, and upper intestine using an endoscope/gastroscope. The procedure is also known as gastroscopy. An endoscope/gastroscope is a flexible tube with very small lenses and a light attached to the end of it. The procedure is carried out by someone with special training called an endoscopist.
What happens when I arrive at the Unit?

Your appointment time is not the time you will get your procedure done, but you will be assessed by a nurse first.

**You can expect to be on the unit for up to four hours.**

The nurses introduce themselves to you and explain what will happen to you during your stay. You will be asked about your present medicines, any allergies you may have, your arrangements for going home and who is to look after you.

A nurse will check your details with you and (if you have not already done) ask you to sign a consent form (FYCON31-1 Gastroscopy) saying that you:

- Fully understand the examination and local anaesthetic or sedation,
- Fully understand the risks and benefits,
- Are aware of the alternatives, and
- Agree to have the examination.

Please ask if there is anything you do not fully understand about your treatment or if there is anything you are uncertain about. A copy of the consent form will be kept in your medical records and you will be given a copy for your own records. You may change your mind and withdraw consent at any time, even after you have signed the form.
What if I have diabetes?
We need to know if you have diabetes. If you have tablet or insulin treated diabetes you may need further advice. This can include how to prepare for the procedure and how to take your medication.

York Hospital Patients:
If you have not received any specific diabetes information with this pack please contact the pre-assessment Nurses for advice on 01904 724527.

Scarborough and Bridlington Hospital Patients:
If you have not received any specific diabetes information with this pack please contact the Endoscopy automated helpline number for advice on 01723 342905.

What if I have a pacemaker?
If you have any implantable cardiac device, such as a pacemaker or internal defibrillator as this may need adjusting on the day of your procedure.

York Hospital patients please call the pre-assessment Nurses on 01904 724527.

Scarborough and Bridlington Hospital patients please call our automated helpline 01723 342905.
What if I am on blood thinning medication?

You need to let us know if you take any of the following blood thinning medications:

- Warfarin
- Apixaban
- Edoxaban
- Dabigatran
- Rivaroxaban
- Clopidogrel
- Ticagrelor
- Prasugrel
- Dipyridamole

If you are a **York Hospital Patient**:  
You will need to inform the pre-assessment nurses on 01904 724527.

If you are a **Scarborough or Bridlington Hospital Patient**:  
You will need to phone the automated helpline on 01723 342905.

We will need to advise you about whether or not your medication should be continued for the procedure.

Although **Aspirin** is a medication which thins the blood it is safe to continue and we therefore do not need to know about this.
What about other health issues?

Please ring the Endoscopy Unit as soon as possible if any of the following apply to you:

- You have had any previous infections of the heart valve (endocarditis)
- You have an abnormal or artificial heart valve or a blood vessel graft
  
  or

- You have been advised that you need antibiotics before an operation or dental treatment.
- You have a latex allergy
- You have been informed that you are at risk of CJD or vCJD for public health purposes

If you are a York Hospital Patient:
Phone the pre-assessment nurses on 01904 724527.

If you are a Scarborough or Bridlington Hospital Patient:
Phone the automated helpline on 01723 342905.
What happens before the procedure?

It is important that you do not have anything to eat for at least six hours before the examination. You may drink a cup of clear fluids (those you can see through) up to two hours before. You must not eat or drink anything during the two hours before your examination. Please see detailed instructions in the section on fasting later in the leaflet.

You may be asked to take off your jumper or cardigan. If you have false teeth, you will be asked to take them out just before the examination. Please bring a bag with you for your belongings.

I have been told there will be trainees in the list, what does this mean?

We take the training of endoscopists very seriously. Our Trust is committed to teaching, training, and research to support the development of staff and improve health and healthcare in our community. We provide specific training lists for the next generation of endoscopists. All training lists have a reduced number of procedures in order to facilitate careful training. The training is always closely supervised by accredited endoscopists. In addition we monitor all results and outcomes of both the trainees and the individual endoscopists. We also have a feedback mechanism so trainees’ progress is scrutinised and monitored. You can opt out if you do not want trainees to attend.
Why might you take photos or videos of my gullet, stomach, or upper intestine?

As part of your treatment, we may take photos of your gullet, stomach, or upper intestine. These are kept in your medical records. We may need to use these images for assessing lesions and discussing them with colleagues and ask them their opinion. We may also use the images for teaching purpose.

Occasionally we take a video recording of a gastroscopy. This is to help us monitor the quality of the gastroscopies we carry out. If we take a video of your gastroscopy you will not be identified in the recording. We will destroy the video as soon as we have viewed it.
Will I be awake during the procedure?

You do not need a general anaesthetic to have a gastroscopy so you will be awake during the procedure.

As the gastroscopes have become thinner, many patients are happy for the procedure to be carried out without sedation and to have throat spray instead. The throat spray has an effect very much like a dental injection. It is sprayed on the back of your throat to numb it.

The benefit of choosing throat spray is that you are fully conscious and aware and can go home unaccompanied almost immediately after the procedure. You are permitted to drive and carry on life as normal.

The only constraint is that you must not have anything to eat or drink for about 30 minutes after the procedure, until the sensation in your mouth and throat has returned to normal. It is strongly advised that when having your first drink after the procedure, it should be a cold drink and should be sipped to ensure you do not choke.
If the local anaesthetic does not make you feel comfortable enough to have the gastroscopy, the endoscopist may decide to give you a mild sedative (Midazolam) or strong painkiller (Fentanyl). You can always request for the procedure to be done with sedation or a pain killer. We give these drugs through a vein in your arm.

If we give you sedation or a strong painkiller, we will give you some oxygen through two short plastic tubes that sit inside your nostrils (nasal cannula). Sedation and strong pain relief can depress breathing and we give this oxygen as a precaution. If you have been given Midazolam or Fentanyl you must not drive or operate machinery for 24 hours after your gastroscopy. With Midazolam you also must not sign legal documents, or drink alcohol for 24 hours.

We will monitor your condition throughout the gastroscopy by attaching a clip to your finger that measures the amount of oxygen in your blood.

Most people tolerate the procedure with only the local anaesthetic spray.
What happens during the examination?

Before starting the examination, the endoscopist will check your details and ask you to confirm you still agree to have the procedure. We will ask you to lie on your left side. A plastic mouthpiece is gently placed between your teeth to keep your mouth open a little during the examination. You may have small plastic tubes placed just inside the nostrils so that you can be given oxygen. This is if you need support to breathe easily if you have sedation.

The endoscopist passes the endoscope through your mouth and down into your stomach. The procedure is painless and does not affect your breathing. It is normal to have some retching. Air is passed down the endoscope to expand your stomach so that the endoscopist has a better view. If you produce a lot of saliva during the examination, the nurse uses a small suction device to remove it.

If needed, the endoscopist can take a small sample of tissue (a biopsy) for examination in the laboratory. This is also painless.

At the end of the examination, the air is sucked out of your stomach and the endoscope is removed painlessly.

The procedure usually takes less than 10 minutes.
Can I drive home?  
Will I need someone to stay with me?

**Fentanyl (strong pain relief)**  
You will need adult supervision if you are discharged before one hour after having your procedure. You will not need adult supervision if discharged over an hour after your procedure. You must not drive or operate machinery for 24 hours.

**Midazolam (sedative)**  
You will need adult supervision, recommended for 24 hours and a minimum of three hours. Avoid using public transport. You must not drive, operate machinery, drink alcohol, or sign legal documents for 24 hours.

**Midazolam + Fentanyl**  
You will need adult supervision, recommended for 24 hours and a minimum of four hours. Avoid using public transport. You must not Drive, operate machinery, drink alcohol, or sign legal documents for 24 hours.
Are there any risks involved in having an upper GI endoscopy?

There is a very low risk of complications associated with upper GI endoscopy. As with any diagnostic test, there is a very small chance of an abnormality being overlooked.

Very rarely, damage occurs to the gullet, stomach (1 in 2000 patients) or to teeth and or dental crowns or there may be some bleeding. When the endoscope is used to treat ulcers, bleeding or narrowing of the gullet, for example, the risk of complications is a little higher than when it is used only for examination purposes.

If you have biopsies taken, the risk of bleeding/perforation increases in proportion to the number of biopsies taken. The greater the number of biopsies taken, the greater the risk will be.

The sedative you may be given to keep you relaxed during the examination carries a small risk of depressing your breathing. You will be monitored and if it occurs, the condition is treated.

In general, the risk of complications associated with upper GI endoscopy is less than 1 in 2,000 cases.

All the instruments we use are cleaned thoroughly by hand and machine using special disinfectant so the chance that they will pass on infection is extremely small.

If you are concerned about any of the risks, please speak to your endoscopist.
What are the benefits of having an upper GI endoscopy?

Your problem can be diagnosed quickly, accurately and safely, often allowing prompt treatment. Sometimes treatment can also be given down the endoscope.

What are the alternatives to an upper GI endoscopy?

You can have an x-ray procedure called a barium meal. This is usually less accurate than an endoscopy and tissue samples cannot be taken at the same time. Having an upper GI endoscopy instead of a barium meal also means that you are not exposed to radiation.
When can I go home?

If you have only had the throat spray and not had sedation or a strong painkiller, you can go home unaccompanied when you feel you are ready.

It is essential that you have someone to accompany you home unless you have had no sedative drugs. A responsible adult must accompany you for a minimum of three hours after the last dose of sedative or a minimum of four hours if you have had both a sedative and strong pain relief, but we recommend supervision for a full 24 hours. Please see the list of medications in this booklet to help you identify if you need an accompanying adult to take you home. These precautions are very important. If you feel that you cannot make these arrangements please let us know in plenty of time before your procedure by contacting the Pre Assessment Nurses:

If you are being treated in York contact the pre-assessment nurses on 01904 724527.

If you are being treated in Scarborough or Bridlington phone our automated helpline on 01723 342905.

If you have had a sedative, you must not drive yourself, operate machinery, drink alcohol, or sign legal documents for at least 24 hours following your examination.
Before you leave the Endoscopy Unit
A nurse will go through the discharge instructions with you and tell you about the care you need at home. The nurse will give you the necessary follow-up papers and appointments. Please ask if you are unsure of any of the instructions. Sometimes treatment is prescribed or further tests arranged.

How will I feel after my endoscopy?
You may have a slight sore throat. Usually this clears up quickly but it can last for two to three days. If some air remains in your stomach, you may feel a little bloated for a few hours. If you have had sedation, you are advised to rest for the remainder of the day. You should be able to resume normal activities 24 hours after the examination. If you have had throat spray only, then you can resume normal activities straight away.

When will I get my results?
Your endoscopist will discuss the results of your examination with you before you go home and give you a written summary.

If biopsies have been taken or polyps removed, it generally takes approximately seven weeks for the results to be available. If your consultant does not contact you within seven weeks, please ring your GP.
Space for your questions

Please use this space to make a note of any questions you have or to list any items you need to bring with you.
What should I do if I have any problems or worries about my gastroscopy after going home?

If you have problems in the first 24 hours after you leave hospital please contact us.

Please telephone the Endoscopy Unit on:

York Hospital Patients:  01904 726694
Scarborough and Bridlington Hospital Patients:  01723 385141

Out of hours, please telephone the hospital on:
York: 01904 631313 or
Scarborough and Bridlington: 01723 368111

and ask for the 'on call surgical registrar'.

If you have problems after 24 hours, please contact your GP.
Fasting Instructions to follow before Endoscopy:

It is important that you do not eat anything for six hours before you arrive on the Unit.

You may drink clear fluids (clear fluids include water, tea without milk or dilute squash) up to two hours before the time of your appointment.

You should not have anything to eat or drink during the two hours prior to your appointment.

It is important to follow these instructions exactly so that your stomach is empty which gives the endoscopist a better view.

Do not drink milk for four hours before your appointment.
A checklist for patients

☐ Bring your consent form with you to your appointment.

☐ Please do not have anything to eat for at least six hours before the examination. You may drink a cup of clear fluids (those you can see through) up to two hours before. You must not eat or drink anything during the two hours before your examination.

☐ Please ring us if you have a pacemaker, are diabetic or are on blood thinning agents.

☐ Do bath or shower as usual before your appointment.

☐ Please leave all jewellery and other valuables at home. Do bring something to help pass the time while you wait on the Endoscopy Unit, e.g. books, magazines.

☐ Do bring a bag with you for your belongings.

☐ If you normally wear reading glasses, please remember to bring them with you.

☐ Please bring a list of your medications with you.
A Checklist for Patients

☐ **Important:** please see the list of medication in this booklet to help you identify if you need an accompanying adult to take you home.

☐ It is essential that you arrange for an adult to accompany you home if you have had sedation. Remember you **must not** drive for at least 24 hours following sedation.

☐ We strongly advise that an adult stays with you for 24 hours following sedation.

☐ Do arrange your transport home. You may wish to bring change if you are going to use the hospital car park.

☐ Your appointment time is not the time you will have the procedure, as a nurse will assess you first.

The section on consent is taken with adaptations from the British Society of Gastroenterology patient leaflet “colonoscopy – the procedure explained” dated June 2005. Used with permission.
Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact:
York Hospital patients contact: Sister Michelle Robinson, Endoscopy Unit, The York Hospital, Wigginton Road, York, YO31 8HE, telephone 01904 726690.
Scarborough/Bridlington Hospital patients contact: Sister Sue Thomson, Endoscopy Unit, Scarborough Hospital, Woodlands Drive, Scarborough, YO12 6QL, telephone 01723 385106.

Teaching, training, and research

Our Trust is committed to teaching, training, and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email pals@york.nhs.uk.

An answer phone is available out of hours.
Listening in order to improve • Always doing what we can to be helpful
Providing care together in York, Scarborough, Bridlington, Malton, Selby and Easingwold communities

Please telephone or email if you require this information in a different language or format

01904 725566  
email: access@york.nhs.uk

Braille  Audio e.g. CD  
Large print  Electronic

Owner  Mr S Chintapatla, Endoscopy Lead, Surgery, York  
Dr P Kant, Endoscopy Lead, Medicine, York  
Dr O Saraj, Consultant Gastroenterologist, Scarborough

Date first issued  September 2001  
Review Date  December 2020  
Version  12 (issued January 2019)  
Approved by  Endoscopy User Group  
Linked to consent form  FYCON31-1 Gastroscopy v6  
Document Reference  PIL 83 v12

© 2019 York Teaching Hospital NHS Foundation Trust. All Rights reserved

www.yorkhospitals.nhs.uk