

## Patient Preparation for EGD (Upper GI Endoscopy)

### YOUR EXAM IS SCHEDULED FOR:

Monday     Tuesday     Wednesday     Thursday     Friday

Date: \_\_\_\_\_

Time: \_\_\_\_\_

### LOCATION:

- SUNY Downstate Central Brooklyn**  
University Hospital of Brooklyn  
445 Lenox Road  
Brooklyn, NY 11203  
(718) 270-4788  
Admitting Office (then proceed to Suite H, 1st Floor—Endoscopy Suite)
  
- SUNY Downstate Long Island College Hospital**  
339 Hicks Street (corner of Atlantic Ave.)  
Brooklyn, NY 11201  
(718) 780-1991  
Admitting Office (then proceed to 6th Floor—Endoscopy Suite)  
Subway: 2,3,4,5,J,M,R to Borough Hall or Jay Street  
Buses: B61 or B63
  
- SUNY Downstate Bay Ridge**  
9036 7th Avenue (at 92nd Street)  
Brooklyn, NY 11228  
(718) 567-1464  
Urgent Care Center (then proceed to 6th Floor—Endoscopy Suite)  
Subway: R to 95th Street  
Buses: B70 to 92nd Street and 7th Ave., or  
B12 to B16 to 95th Street, then walk ½ mile

If you have any questions or need to change or cancel your appointment, please call (718) 270-4772 or (718) 270-2283.

**NOTE:** Please arrive 1 hour before your scheduled exam.

# Patient Preparation for EGD

## (Upper GI Endoscopy)

### 1 Week Before the Exam:

- If you take insulin, diabetes medications, clopidogrel (Plavix) or warfarin (Coumadin), please follow your doctor's specific instructions regarding these medications.

### Day of the Exam:

- Do not eat or drink anything after midnight the night before the exam.
- You may take heart or blood pressure medication the morning of the exam with a small sip of water.
- Diabetics: Do not take your morning dose of insulin. Speak with your doctor who prescribes your medication.
- Bring a list of your medications with you to the test.
- You may brush your teeth.
- Please make sure you have an adult over the age of 18 available to take you home after the test. You will receive anesthesia and will not be permitted to go home alone.

### After the Exam:

- Please make sure you have an adult over the age of 18 available to take you home after the test. You will receive anesthesia and will not be permitted to go home alone.

### What is Upper Endoscopy?

Upper endoscopy lets your doctor examine the lining of the upper part of your gastrointestinal tract, which includes the esophagus, stomach and duodenum (first portion of the small intestine). Your doctor will use a thin, flexible tube called an endoscope, which has its own lens and light source, and will view the images on a video monitor. You might hear your doctor or other medical staff refer to upper endoscopy as upper GI endoscopy, esophagogastroduodenoscopy (EGD) or panendoscopy.

### Why is Upper Endoscopy Done?

Upper endoscopy helps your doctor evaluate symptoms of persistent upper abdominal pain, nausea, vomiting or difficulty swallowing. It's the best test for finding the cause of bleeding from the upper gastrointestinal tract. It's also more accurate than X-ray films for detecting inflammation, ulcers and tumors of the esophagus, stomach and duodenum.

Your doctor might use upper endoscopy to obtain a biopsy (small tissue samples). A biopsy helps your doctor distinguish between benign and malignant (cancerous) tissues. Remember, biopsies are taken for many reasons, and your doctor might order one even if he or she does not suspect cancer. For example, your doctor might use a biopsy to test for *Helicobacter pylori*, the bacterium that causes ulcers.

Your doctor might also use upper endoscopy to perform a cytology test, where he or she will introduce a small brush to collect cells for analysis.

Upper endoscopy is also used to treat conditions of the upper gastrointestinal tract. Your doctor can pass instruments through the endoscope to directly treat many abnormalities. This will cause you little or no discomfort. For example, your doctor might stretch (dilate) a narrowed area, remove polyps (usually benign growths) or treat bleeding.

### What Preparations are Required?

An empty stomach allows for the best and safest examination, so you should have nothing to eat or drink, including water, after midnight before the examination.

## **What Happens During Upper Endoscopy?**

Your doctor might start by spraying your throat with a local anesthetic or by giving you a sedative to help you relax. You'll then lie on your side, and your doctor will pass the endoscope through your mouth and into the esophagus, stomach and duodenum. The endoscope does not interfere with your breathing, most patients consider the test only slightly uncomfortable, and many patients fall asleep during the procedure.

## **What Happens After Upper Endoscopy?**

You will be monitored until most of the effects of the medication have worn off. Your throat might be a little sore and you might feel bloated because of the air introduced into your stomach during the test. You will be able to eat after you leave unless your doctor instructs you otherwise.

Your physician will explain the results of the examination to you, although you'll probably have to wait for the results of any biopsies performed.

If you have been given sedatives during the procedure, someone must drive you home and stay with you. Even if you feel alert after the procedure, your judgment and reflexes could be impaired for the rest of the day.

## **What are the Possible Complications of Upper Endoscopy?**

Although complications can occur, they are rare. Bleeding can occur at a biopsy site or where a polyp was removed, but it's usually minimal and rarely requires follow-up. Perforation (a hole or tear in the gastrointestinal tract lining) may require surgery but this is a very uncommon complication. Some patients might have a reaction to the sedatives or complications from heart or lung disease.

Although complications after upper endoscopy are very uncommon, it's important to recognize early signs of possible complications. After the test, if you have a fever, if you have trouble swallowing, or if you notice increasing throat, chest or abdominal pain or bleeding, including black stools, contact your doctor immediately at 718-270-4772. Note that bleeding can occur several days after the procedure. If a serious problem develops, you should go to the SUNY Downstate Medical Center Emergency Room and ask the doctor there to contact the GI doctor on call.