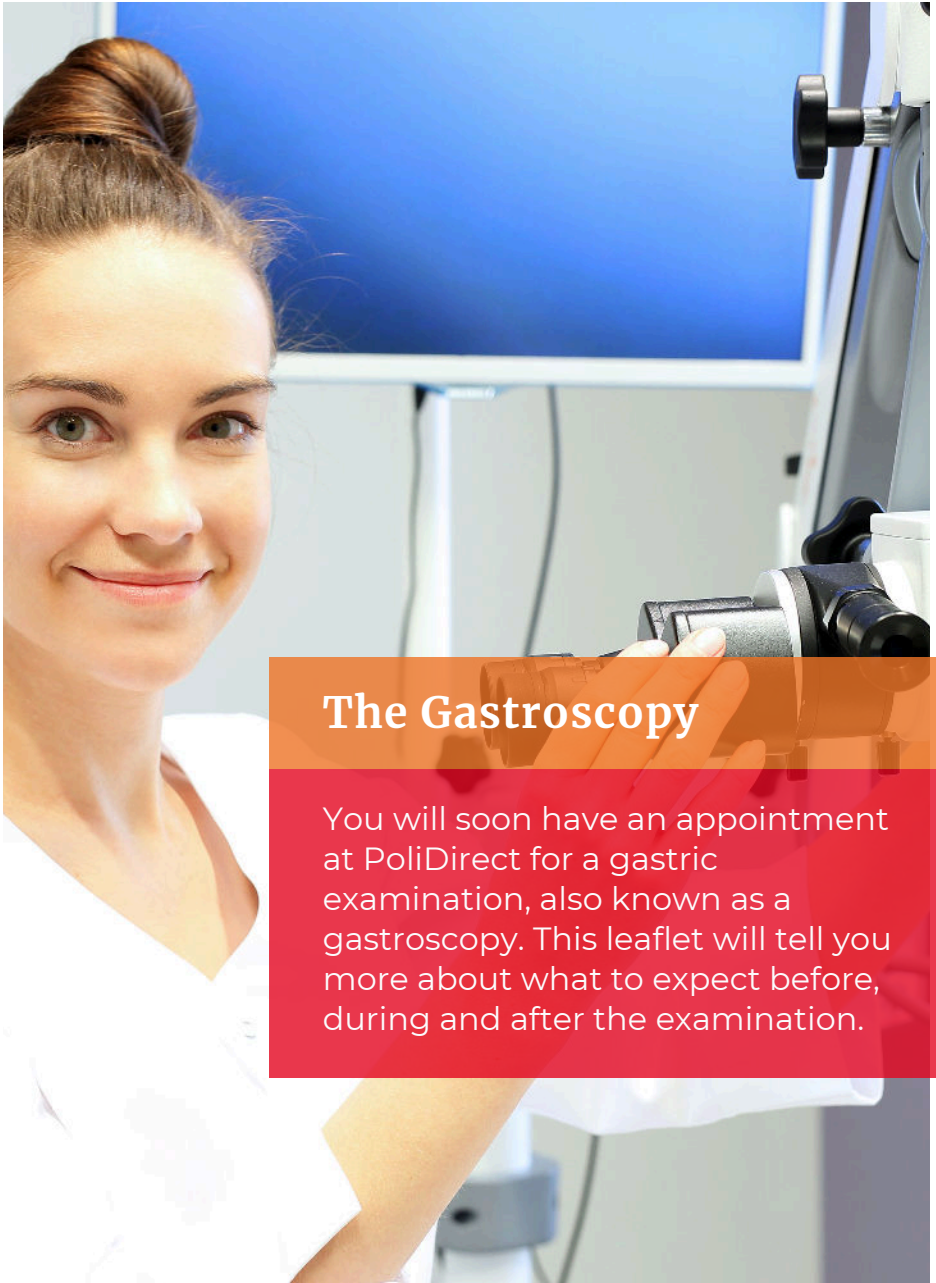


PoliDirect



The Gastroscoy

You will soon have an appointment at PoliDirect for a gastric examination, also known as a gastroscopy. This leaflet will tell you more about what to expect before, during and after the examination.

What is a gastroscopy?

A gastroscopy is an internal viewing examination during which the doctor examines the oesophagus, stomach and the first part of the small intestine (duodenum) for any abnormalities.

The stomach examination is performed using a gastroscope. This is a thin, flexible tube with a light and a camera at the end. The camera is connected to a monitor on which the doctor can follow the examination.

How do you prepare?

In order to view the stomach wall, there should be no food in your stomach. This is why we ask you to come to the examination sober, i.e. not to eat, drink or smoke anything beforehand.

Preparation

No food should be left in your oesophagus or stomach during this examination. To avoid serious complications such as pneumonia, you must be sober for this examination.

Sober policy

- Up to 6 hours before the examination, only a light breakfast such as 2 rusks or 2 crackers or 1 slice of bread.
- Up to 2 hours before the examination, only clear drinks (coffee without milk, tea, water or apple juice).
- From 2 hours before the examination, do not drink anything.

If you are taking medication, you may take it with a little water.

Example

You are expected at the clinic at 3 pm. You may not eat anything from 9 am onwards. You may not drink anything from 1 pm onwards.

Transport

Arrange for transport! If you are given an anaesthetic (optional in addition to the throat anaesthetic), you may not drive independently after the examination.

Risks and complications

A gastroscopy is a safe examination. Complications are rare. A few cases are e.g. an after bleeding with people using blood thinners or painkillers.

In 1 in 10,000 patients, a more serious complication occurs, namely a hole in the wall of the oesophagus, stomach or duodenum.

However, the risk of this remains small.



Before the examination

The nurse will collect you from the waiting room. In the preparation room, take off your jacket and shoes. You will be given a drink to prevent foaming of the stomach juices. If you are undergoing sedation, the nurse will insert an infusion needle into your hand or arm.

In the preparation room and during the examination, we will measure your blood pressure, heart rate and blood oxygen level. Therefore you will be given a squeezer on your finger or earlobe, and a band around your arm.

Sedation (not anaesthesia)

You can choose to undergo the examination with sedation. This sedative (Dormicum) will make you sleepy and reduce your perception of the examination. Transport and assistance after the examination are then necessary!

Sometimes sedation is not possible because it may be medically irresponsible because of your health. The nurse will discuss this with you in advance.

The course of the gastroscopy

During the examination, you will lie on your left side on the examination table. If required, an anaesthetic spray will be sprayed down your throat and you will be given a bite ring to protect your teeth and the scope.

The gastroscope will be carefully inserted through your mouth. Some air is blown in during this process. During retraction, the wall of your duodenum, stomach and oesophagus will be carefully inspected. If necessary, pieces of tissue are taken for further examination. You will receive the results after 1-2 weeks.

After the examination

After the examination, you will be taken to the recovery room. When you have recovered sufficiently and the anaesthetic has worn off, we will give you something to eat and drink. You will then return to the waiting room.

The air blown in during the examination may make you burp from time to time. This is perfectly normal.

The results

Before you leave, you will have a short conversation with the doctor, who will tell you the results of the examination. You will be given a letter with the results, additional information and important telephone numbers.

In this last conversation, only the results of the examination will be briefly discussed. Would you like more detailed information about the examination and/or your symptoms? Discuss this with your referring physician (e.g. your GP) or make an appointment at our outpatient clinic. Your GP will be informed by e-mail.

What can and cannot be done after the examination?

You may feel sleepy, confused or forgetful for the first 24 hours after the examination. Therefore, make sure you are being picked up by someone who can accompany you from the clinic **to inside the house** (i.e. not a taxi).

In the first 24 hours, we strongly discourage the following:

- Work and other responsible tasks (e.g. operating machinery, important decisions)
- Consuming alcoholic beverages
- Participating in traffic

Caution! If you do the above within 24 hours and will cause an accident, you are not insured.

Side effects

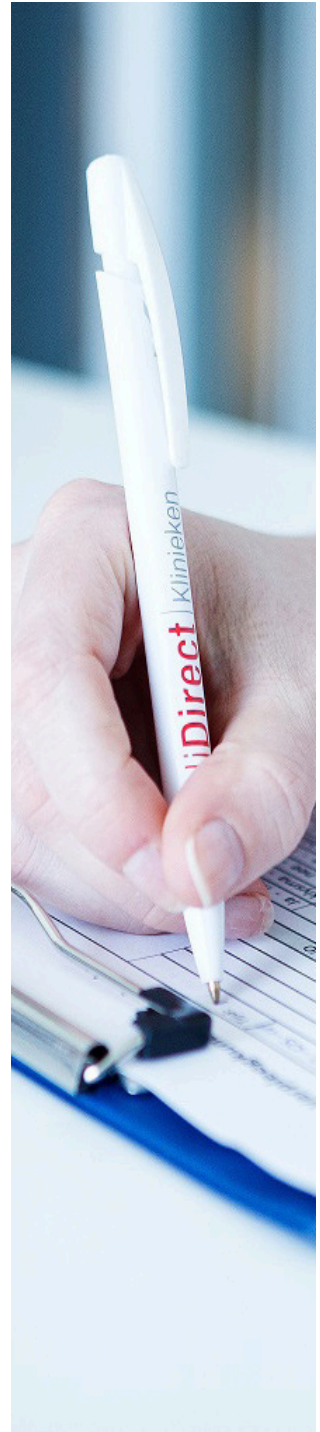
After the examination, you may experience some bloating and burping. Your throat may also be sensitive for a while. Gargling with lukewarm water or the use of throat lozenges may reduce the symptoms

Contact us if you experience any of the following symptoms:

- Fever higher than 38 degrees;
- Sudden severe abdominal pain;
- Vomiting of (more than 1/2 cup) blood;
- Shortness of breath;
- Blood loss through stools (more than 1/2 cup) or black stools.

You can reach us at 088 888 4555.

Choose option 1 in case of an urgent and life-threatening situation.



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