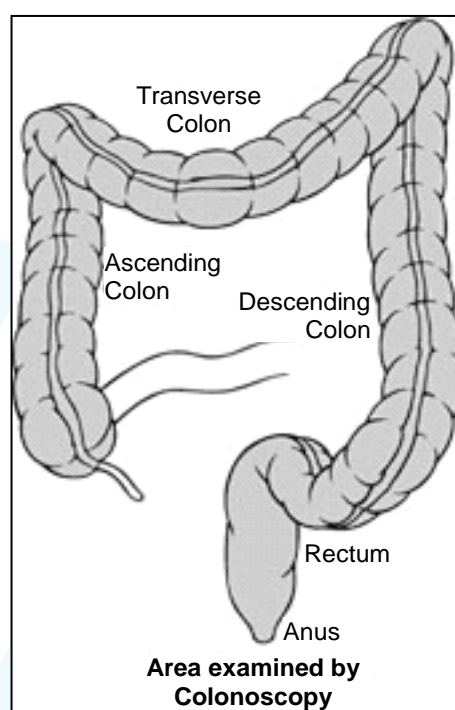
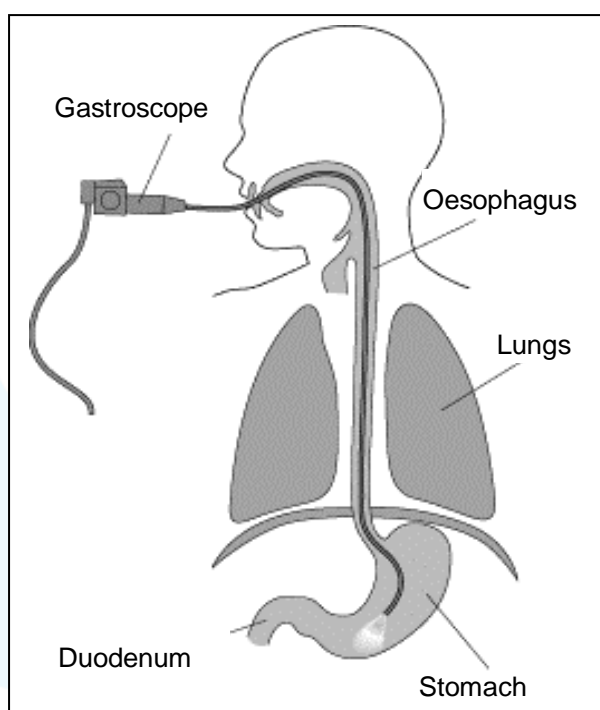


## Information for Patients

# Your Gastroscopy (OGD) and Colonoscopy



### PLEASE NOTE:

You may need to start preparing for your test up to a week before your appointment. Please ensure you read this information in good time to ensure you know what to do. Poor preparation can result in cancellations and incomplete procedures.

If you are unable to keep your appointment, please telephone the Waiting List Office as soon as possible via the number on your appointment letter. Your appointment can then be offered to someone else which helps to keep waiting lists shorter.

Thank you.

## Introduction

Your doctor has advised you to have two tests called:

- Gastroscopy (the full name for this test is oesophago-gastro-duodenoscopy (OGD)).
- Colonoscopy.

This booklet has been written to inform you about the tests and to answer the most frequently asked questions. If you have more questions, or if there is anything that you do not understand, please ask. There is a phone number on page 1 of this booklet.

Both tests will be carried out by a doctor or specialist nurse, called an endoscopist.

## What is an OGD?

An OGD is a test to look at the lining of your gullet (Oesophagus), stomach and the first part of your small bowel (duodenum). A thin flexible tube, about the width of a little finger, is passed through your mouth.

## What is a colonoscopy?

A colonoscopy is a test to look at the lining of the back passage (rectum) and large bowel (colon). This is done using an endoscope that has a thin flexible tube, about the width of a finger, which is passed into your back passage. The test will be carried out by a doctor or specialist nurse, called an endoscopist.

## Why do I need the tests?

Your symptoms may be caused by a problem in your gullet, stomach, small bowel or large bowel. The tests will help your doctor to find any problems and then plan your treatment.

## Preparation for the tests

To allow clear views of your bowel, it will need to be empty. The bowel can be cleaned by using the laxative provided. With your appointment letter, you should have received a leaflet explaining how to take the laxative and about restrictions to eating and drinking while you take it. Please follow these very carefully. Here are some important points to remember:

- Please ensure that you have received the correct morning or afternoon leaflet according to the time of your appointment.
- The advice about restrictions to eating and drinking will vary depending on the type of bowel preparation you have been sent. It is very important that you follow the advice given whilst also bearing in mind that:
  - You must not have anything to eat or drink for at least 6 hours before your test (or sooner if your bowel preparation leaflet advises this).
  - You may then have sips of water only, up to 2 hours before your test.
  - Then, you must not eat or drink anything until after your test when you have been advised that it is safe to do so by a member of staff.

If you are worried about taking the medicine, please contact us straight away.

## Should I take my usual tablets or medications?

**Acid reducing medication:** If you take medication to reduce the acid in your stomach (such as Omeprazole, Lansoprazole, Rabeprazole or Esomeprazole), you should continue to take it in the following circumstances:

- You are being reviewed for Barrett's Oesophagus.
- You have been told not to stop taking this medication by your doctor.
- You have an ulcer and we are checking if it has healed.

If none of these apply, please stop this medication 2 weeks before your appointment to prevent it affecting the results of your test. Taking Gaviscon or Rennie's will not affect the test.

**Iron Tablets or Stool Bulking Agents** (such as Fybogel): Stop taking these seven days before your test.

**Warfarin or Sinthron:** Please contact your anticoagulant clinic and ask them to check your clotting levels within 1 week of your test. The anticoagulant nurse will advise you if your dose needs changing. Do not stop taking it unless you are specifically told to do so.

**Other blood thinning tablets (such as Clopidogrel or Apixaban):** You should have been advised at your outpatient appointment whether you should continue or stop taking these prior to your test. If you require further advice, or did not receive this advice, please call us.

### If you are a diabetic treated with insulin or tablets:

- You will need an early morning appointment. If you have been given a later appointment please contact the Waiting List Office, via the number on your appointment letter.
- You will need to contact your diabetes specialist (E.g. Diabetes clinic, GP, Practice Nurse) for advice on how to manage your diabetes whilst taking your bowel preparation.
- On the morning of your test, do not take your insulin or diabetic tablets. Bring them with you to take after your test.

**All other medication** normally taken in the morning may be taken as follows:

- Morning appointments - take your medication before 7am or bring it with you to take after your test.
- Afternoon appointments - take your medication before 10am.

## Pacemakers and Implantable Cardioverter Defibrillator (ICD) Devices

If you have a pacemaker, please ensure this has been checked within 3 months of your procedure, and that the technicians are happy that the device is fully operational.

If you have an ICD, please telephone the endoscopy unit on (0161) 746 2016.

## What pain relief is available?

For an OGD and Colonoscopy, there are two choices:

**1. Sedation and a pain relief drug** can be given as an injection into a vein in your hand or arm. The sedation will make you feel sleepy and relaxed but won't make you go to sleep. You will still hear what is said to you and you will be able to carry out simple instructions during the test.

Sedation may make you forgetful. Afterwards you may remember very little about the test.

You must have a responsible adult (18+) to take you home and look after you for at least 12 hours after having sedation. Do not travel home on public transport.

Sedation can remain in your blood system for up to **24 hours**. For this length of time **you should NOT:**

- Look after children
- Drive (You will not be covered by your insurance if you have an accident).
- Return to work.
- Use any kind of machinery, including household appliances.
- Drink alcohol.
- Sign any important documents.

**2. Entonox** can be given through a mouthpiece during your colonoscopy. Whilst you will not be able to use it during the OGD, this procedure can be done quite acceptably without.

Entonox is the gas and air mixture commonly used by women during childbirth - it can help with discomfort during the procedure and will not affect your memory. If you wish to have Entonox, the admitting nurse will assess your suitability for this as some conditions may prevent you from having it. Following the test, you should be able to carry on with your normal daily life without any restrictions.

## Throat spray

Before your test your throat will be sprayed to make it numb. You will be offered throat spray whether or not you choose to be sedated. You must not eat or drink for 1 hour following the test.

## How long will I be in hospital?

Your length of stay can vary, but you should expect to be in the department for up to three hours. If your test and recovery is complete, you may be allowed home sooner.

If you are having your test under general anaesthetic, your length of stay will increase. You will be asked to attend the unit early morning or early afternoon to allow the anaesthetist to assess you prior to having the anaesthetic. You will then need to wait until you are called for your test. You may expect to be in the hospital all day.

We will always try to see you at your appointment time. However, please note that there are several factors that may cause unavoidable delays. For example, if we find a condition during a

procedure which we need to treat at the time, or if we need to see emergency patients.

## Do I need to bring anything with me?

Please bring:

- A dressing gown and slippers, if you have them.
- A copy of your most recent prescription or a list of your medication.

You will be provided with a basket in which to keep your belongings. This will remain with you at all times.

## Visitors

The Endoscopy Unit is a very busy ward and to ensure the privacy and dignity of all our patients we are unable to accommodate friends and relatives in the treatment area. However, staff may assess your circumstances and make exceptions where necessary. For example:

- The patient concerned has special needs
- The patient is 16 to 18 years of age
- The patient requires support with communication needs (Please note that friends and relatives are not allowed to interpret for patients. If an interpreter is required, please inform Waiting List using the phone number on your appointment letter)

During your test, friends and relatives may wait in reception, visit the restaurant or go home for a while depending on your expected length of stay. If necessary, staff will contact them by phone when you are ready to be escorted home.

If you would like to discuss your needs before arrival, please telephone the Endoscopy Unit on 0161 746 2016.

## What happens when I arrive?

The receptionist will ask you a few questions and ask you to take a seat in the waiting room. A nurse will then take you to a more private area where:

- Your personal details will be checked.
- You will be asked some questions about your general health.
- Your blood pressure, pulse and oxygen level will be recorded.
- Your test will be explained and your questions answered.
- Arrangements for going home and aftercare will be checked.
- You will be asked to give your consent to the test and sign a consent form, if you haven't already done so. Please take your time to read the consent form, and make sure you fully understand the test and any possible treatments, before signing.
- You will be shown to a changing room and asked to undress and put on a hospital gown.
  - **Patient Dignity:** In order to maintain your dignity at all times, disposable privacy pants are available to wear beneath your hospital gown – please ask if you require these. You may also wear your dressing gown and slippers if you have them with you.

- A needle will be inserted into the back of your hand or arm. The needle will be removed and a soft plastic tube left in place. This will be used to give your sedation or a medicine to relax the bowel during the test.
- If you are a diabetic your blood sugar level will be checked before and after your test.
- If you are taking tablets to thin your blood, we will check the result of your most recent blood test. Occasionally, we may need to take another sample to make sure it is safe to carry out your test.
- You will be asked to take a seat in the sub-waiting area. Please refrain from returning to the reception area in your hospital gown. The doctor will then know where to find you when they are ready to consent you for your test.

## Before the test

The endoscopist will make sure you understand the test and that you have signed your consent form.

## What happens during the tests?

- When you enter the procedure room, additional checks will be completed (Eg. Your name, date of birth, allergies, medical history etc).

### OGD:

- If you have dentures, you will be asked to take them out. We will give you a pot to put them in.
- Your throat will be sprayed with a banana flavoured anaesthetic to make it numb.
- You will be asked to lie down on your left hand side.
- If you want to be sedated, your sedation will be given just before the test starts.
- A probe will be clipped on to your finger to monitor your breathing and heart rate.
- A mouthguard will be placed between your teeth (you will be given the option of placing this yourself if you wish). The mouthguard will prevent you from biting the scope.
- The flexible tube is passed through your mouth and into your stomach.
- Air is gently blown inside to expand your stomach to allow good views.
- Normally the test will take less than ten minutes. At the end of your test the flexible tube is easily removed.

### Colonoscopy:

- You will remain on your left hand side initially, although we may need to ask you to change position during the test.
- If you choose to have Entonox, instructions on how to use it will be given just before this test starts.
- A probe will be clipped on to your finger to monitor your breathing and heart rate.
- The endoscopist may need to examine your back passage with a gloved finger.
- The flexible tube is passed into your back passage.
- Air is gently blown inside to expand your bowel to allow good views.

- Normally the test will take on average 30 minutes. At the end of your test, the flexible tube is easily removed.
- If you decide to watch your test on the monitor, please note that images are greatly magnified.

During both tests:

- We may take internal photographs. These images are only used for medical purposes. Your privacy will be respected.
- Tiny samples of tissue may be taken and small polyps (fleshy overgrowths of tissue, usually on a stalk) may be removed. This is painless.
- Anything unusual, which we can treat during your tests, will be treated unless you ask us not to before the tests begin.

## Who will be present during my tests?

As a minimum:

- The endoscopist.
- Two members of endoscopy nursing staff.

Sometimes, additional staff may be present, depending on circumstances on the day of your test:

- \*A trainee endoscopist, who may carry out your procedure under the supervision and guidance of a consultant endoscopist.
- Another doctor in an observational capacity.
- A specialist nurse if required.
- \*A student nurse or medical student on placement.

\*The Trust participates in the training of doctors, nurses and other healthcare staff. Should you wish to discuss this during your visit, please speak to a member of the nursing staff.

## After your tests

- If you have had sedation, you will be transferred into the recovery area on a patient trolley. Otherwise, you will be given the option of walking.
- You will be able to rest in the recovery area.
- You will be monitored by the nurses until you are fully recovered.
- You may feel a little bloated with wind. This should settle quickly.
- When you feel sufficiently recovered, you will be offered a drink and a biscuit.
- A nurse will talk to you (in a private room) about the findings of your test and any follow-up. If you would like someone with you whilst receiving results, please inform the nurse. You will also be given written information about this and a discharge advice sheet. If we have taken biopsies (samples) during your test, you will be informed of the results either at a future out-patient appointment or by letter.
- Again, you will be able to ask any questions you have.
- If you have had sedation, you must have a responsible adult to take you home and look after you for 24 hours. We will contact this person for you when you are ready to go home.
- If you have not had sedation, you may leave on your own.
- You must wait for 1 hour after you test before eating and drinking.

## After you have left the unit

Problems following your test are unusual. When you leave the unit, we will provide you with a discharge advice sheet which will contain the possible after effects of your test and contact details should you need them.

## What are the benefits of having the tests?

The tests will give us the information we need to treat your condition. If we find anything unusual, we may be able to treat it during your tests.

## What are the possible risks or complications of having the tests?

The tests are usually very safe. Problems may include:

- Failure to complete the tests. The colon has a number of bends and it is not always possible to pass the scope around them.
- A sore throat.
- A slight risk of damage to teeth or dental bridgework.
- Changes in your heart rate and breathing caused by the sedation or the tests themselves.
- Pneumonia, if stomach contents are inhaled.
- Bleeding, or a hole in the gut wall, caused by:
  - irritation of the lining of the gut by the endoscope
  - taking samples of tissue
  - other treatments carried out during your tests.

If this happens, you may need to stay in hospital for observation or an operation to repair the damage.

In large surveys, the risk of complications is less than 1 in 1,700 tests. The risk is increased to 1 in 700 if a polyp is removed.

## What are the discomforts of the tests?

The spray which numbs your throat produces the feeling that your throat is swelling. It only lasts for a very short while and does not interfere with swallowing or breathing.

Some patients experience discomfort during the tests. This may be caused by the flexible tube and air being passed inside. This is rarely distressing enough to stop the tests. We remove as much air as possible when each test is complete.

Although it is in your best interests that we complete the tests, if you feel that you are unable to tolerate it please inform the doctor or nurses looking after you and the tests will be stopped.

## Is there an alternative test?

There are a number of tests that can be used to look at your gullet, stomach or lower bowel. These include:

- **Barium Swallow/Meal** – This is a special X-ray of the gullet and stomach. It can be used to give some information about your condition. However: This test may not show minor inflammation, small polyps and tumours; Samples of tissue can not be taken and

tested; Polyps can not be removed; Treatments can not be carried out during the test; The test involves X-ray radiation similar to the amount received naturally from the environment in 12 to 18 months.

- **Barium Enema** – a white liquid is introduced into the back passage that outlines the bowel. X-ray pictures are then taken.
- **CT Scan** – this is a special X-Ray where a scanner takes many pictures of the abdomen in sections or ‘slices’.
- **CT Colonography** (also known as Virtual Colonography) – in this test pictures of the bowel are obtained from a CT scanner. However, this test involves much more preparation than a standard CT scan. You would need to take laxatives the day before the test and air is pumped in through the back passage to stretch out the bowel.

All of these tests have a particular role in the medical investigation of the stomach or bowel. Your doctor will have explained to you why a colonoscopy is thought to be best in your situation.

## What will happen if I don't have the tests?

This will vary depending on your individual circumstances. However, if you do not have the tests your doctor may not be able to find the cause of your symptoms. Should you have any questions about this, please speak to your doctor.

## If I have any further questions about the tests, who should I contact?

If you have any worries about your tests, you can talk to your doctor beforehand or contact the Endoscopy unit on 0161 746 2016, Monday to Friday 8.00 am-6.00 pm.

Further information can also be obtained via our website at [www.mft.nhs.uk/trafford/services/endoscopy](http://www.mft.nhs.uk/trafford/services/endoscopy) or from [www.nhs.uk](http://www.nhs.uk).

**Please make sure you fully understand the tests and any possible treatments before signing your consent form. You may ask questions about anything you are unsure of.**

## Check list

- Are you able to keep your appointment? If not have you phoned to cancel or change it? The phone number is on your appointment letter.
- Are you worried or do you have any questions to ask? You can talk to your doctor or ring the Endoscopy Unit on 0161 746 2016.
- Have you taken your bowel preparation?
- If you are required to do so, have you stopped taking any acid reducing tablets two weeks before your tests? Please refer to the section entitled “What about my medication?” for detailed information.
- If you are having sedation, have you arranged for an adult to take you home and look after you for at least 12 hours?
- If you are a diabetic treated with Insulin or tablets:
  - Have you got an early morning appointment? If not, please call the number on your appointment letter to change it.

- Have you contacted your diabetes clinic for advice on managing your diabetes whilst taking your bowel preparation?
- If you are taking anticoagulants, such as Warfarin or Sinthrome, have you been in touch with your anticoagulant clinic to have your clotting level checked within one week of your appointment?

## General Information

Our aim is for you to be seen as quickly as possible. However, the unit is very busy and if emergencies occur these will naturally be given priority over less urgent cases, therefore your examination may be delayed.

Do not bring valuables to the hospital. We cannot be responsible for loss or damage to personal property.

To maintain patient privacy and dignity, we provide single sex accommodation.

## How to Get Here

The hospital is situated on Moorside Road in Davyhulme.

Parking is available at the front of the hospital and there are a few parking places at the front of the Endoscopy Unit. The car park is monitored by an automated number plate recognition system. Parking is free of charge for the first three hours. If your stay exceeds three hours, please provide reception with your vehicle registration number on the day of your visit in order to avoid a fine being issued.

Several buses serve the hospital. For up to date information on these bus routes, contact Transport for Greater Manchester on 0871 200 2233 or visit [www.tfgm.com](http://www.tfgm.com). For more information on how to get to Trafford General, including the MRI-Trafford shuttle bus, please visit [www.mft.nhs.uk/trafford](http://www.mft.nhs.uk/trafford) and click on 'Getting Here'.

## No Smoking Policy

The NHS has a responsibility for the nation's health. Protect yourself, patients, visitors and staff by adhering to our no smoking policy. Smoking, and the use of e-cigarettes, is not permitted within any of our hospital buildings or grounds.

You can contact the Trafford Stop Smoking Service on 0300 456 2400 or by e-mail at [stopsmoking.trafford@nhs.net](mailto:stopsmoking.trafford@nhs.net). For some great information go to: [www.nhs.uk/livewell/smoking](http://www.nhs.uk/livewell/smoking)

## Notes

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## Translation and Interpretation Service

It is our policy that family, relatives or friends cannot interpret for patients. Should you require an interpreter ask a member of staff to arrange it for you.

These translations say “If you require an interpreter, or translation, please ask a member of our staff to arrange it for you.” The languages translated, in order, are: Arabic, Urdu, Bengali, Polish, Somali and simplified Chinese.

اذا كنت بحاجة الى مترجم، او ترجمة، من فضلك اطلب من احد موظفينا ترتيب ذلك لك

اگر آپ کو ایک مترجم، یا ترجمہ کی ضرورت ہے، تو برائے کرم ہمارے عملے کے کسی رکن سے کہیں کہ وہ آپ کے لیے اس کا انتظام کرے۔

আপনার যদি একজন দোভাষী, অথবা অনুবাদের প্রয়োজন হয়, দয়া করে আমাদের একজন কর্মীকে বলুন আপনার জন্য ইহা ব্যবস্থা করতে।

Jeśli Pan/Pani potrzebuje tłumacza lub tłumaczenie prosimy w tym celu zwrócić się do członka personelu.

Haddii aad u baahantahay tarjubaan, fadlan waydii qof ka mid ah shaqaalahayga si uu kuugu.

如果你需要翻译或翻译员，请要求我们的员工为你安排