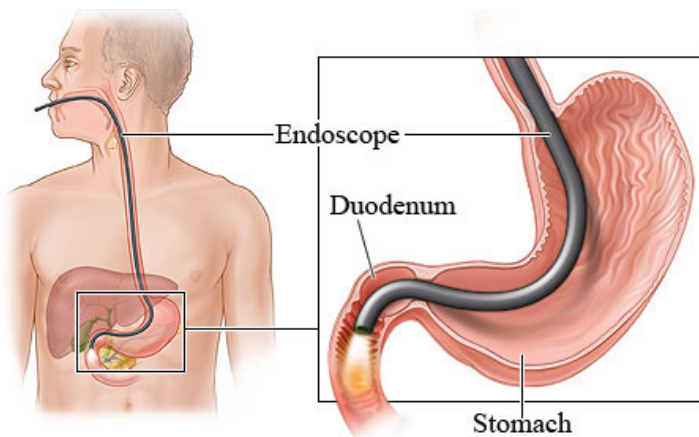


ENDOSCOPY (EGD) INFORMATION

What is an endoscopy?

- An endoscopy (also called an upper GI scope, EGD, or esophagogastroduodenoscopy) is a procedure that uses a long, thin, flexible tube with a tiny camera on the end, through which the doctor can examine your esophagus (swallowing tube), stomach, and the duodenum (the first part of the small intestine).
 - The image on the TV monitor is magnified many times so the doctor can see small changes in tissue.
- If the doctor sees areas of inflammation, ulcers, polyps, or tumors or needs a sample of tissue to look for microscopic changes, biopsies or samples of tissue can be obtained.
 - You will not be able to feel a biopsy and taking biopsies will not impact your recovery time.



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How do I prepare for the endoscopy?

- No solid food after midnight the night before your procedure.
- You may have clear liquids up until 3 hours before the procedure.
 - This includes coffee and tea (no milk or cream), Gatorade/Propel, juice without pulp, soda, and water.
- For the procedure to be thorough and safe, it is necessary for your stomach and duodenum to be empty.
- Three hours before your scheduled procedure time, absolutely nothing more to eat or drink!

What about my medications?

- If you take medications for **HIGH BLOOD PRESSURE, IRREGULAR HEART BEAT, SEIZURES, ASTHMA, THYROID, or PREDNISONE:**
 - Please take your medication with a sip of water the morning of your procedure.
- If you use **WEIGHT LOSS or DIABETES MEDICATIONS** called **GLP-1 AGONISTS** (including Ozempic, Wegovy, Mounjaro, and Zepbound), please read the **LONG STORY** carefully on how the medications will need to be adjusted. In brief, daily dosed medications will need to be skipped on the day of the procedure and weekly dosed medications will need to be skipped for at least 7 days before the procedure.



COMPREHENSIVE
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ENDOSCOPY (EGD) INFORMATION

What should I bring?

- **The first and last names of all doctors you would like us to send a copy of procedure report.**
- **Someone to drive you home.**
 - Sedation is given during the procedure and although you may feel clear headed, your abilities are impaired.
 - If you have not arranged for someone to drive you home, your procedure may be cancelled.
 - You will not be able to drive, operate machinery, make any important or legal decisions, or return to work for the rest of the day.
- **Your insurance cards.**
 - If you have specific questions about coverage for your upcoming procedure, please contact your insurance company.
- **Your medication list.**

What should I wear?

- **Wear comfortable, loose fitting clothing that is easy to step into.**
- **Wear flat shoes (skip the heels).**
- **Do not wear jewelry or bring valuables.**
- **You may wear makeup, but please skip the fragrances and body lotion.**

How long will I be there?

- **Every effort will be made to keep your appointment at the scheduled time, but in medicine, unexpected delays and emergencies may occur and your wait time may be prolonged. We give each patient the attention needed for his or her procedure.**
- **Typically we run on schedule and the duration from the time of drop off until you leave to go home runs approximately 2 hours.**

What should I expect after I arrive?

- **After the administrative check in, a nurse will ask questions to ensure the patient understands the procedure and the reason it is planned.**
- **The nurse will start an intravenous line (insert a needle into a vein in the hand or arm; feels similar to having blood drawn) to administer medications.**
- **The vital signs (blood pressure, heart rate, and blood oxygen level) will be monitored before, during, and after the examination.**
 - The monitoring is not painful, though the first time the blood pressure cuff inflates it can be uncomfortable for 20-30 seconds.



ENDOSCOPY (EGD) INFORMATION

What happens in the procedure room?

- Vital sign monitors will be placed and values checked again before starting the sedating medications.
- All patients will be given oxygen during the examination through plastic tubing prongs aimed into their nostrils.
- You will position yourself to be lying on your left side.
- A plastic mouth guard will be placed between the teeth to prevent damage to the teeth and scope.
- The anesthesia provider will administer medications through the IV line.
- Most people have a deep sleep during the examination and are unaware that it was even performed.

How long does an endoscopy take?

- The procedure is generally about 5-15 minutes long.

What happens after the procedure?

- You will be recovering for approximately 20-40 minutes.
- You may feel slightly bloated and belching will help to relieve this sensation.
- You may have a sore throat. This usually lasts for less than 48 hours.
- Due to the lingering effects from the sedation medication, you may not remember the physician speaking to you. If you gave permission prior to the procedure, the doctor will review the findings with your family member or responsible adult that accompanies you. You will also receive a printed report with the procedure findings and recommendations.
- You will be able to eat and drink right after the procedure is completed.
- **You will NOT be able to drive or return to work for the remainder of the day.**
 - Although you will be awake by the time you are discharged, the sedative medications cause changes in reflexes and judgment that cause a person to feel well but can interfere with the ability to make decisions, similar to the effects of alcohol.



ENDOSCOPY (EGD) INFORMATION

ADDITIONAL FREQUENTLY ASKED QUESTIONS

What if I take BLOOD THINNERS?

- Contact the physician who prescribes the medication to determine how to take it before and after your procedure.
- Please do not assume that you can safely follow the same medication adjustments that have been made for your previous procedures.
- **These medications include:**
 - Coumadin (warfarin)
 - Plavix (clopidogrel)
 - Brilinta (ticagrelor)
 - Effient (prasugrel)
 - Xarelto (rivaroxaban)
 - Eliquis (apixaban)
 - Pradaxa (dabigatran)
 - Savaysa (edoxaban)
 - Bevyxxa (betrixaban)
 - Lovenox (enoxaparin)
 - Arixtra (fondaparinux)
 - Aggrenox (dipyridamole/aspirin)
 - Persantine (dipyridamole)

What if I take GLP-1 medication?

If you take **any GLP-1 medication** (oral or injectable) for **WEIGHT MANAGEMENT** or **DIABETES**, please follow the instructions below carefully.

- **GLP-1 medications include:**
 - Tirzepatide (Mounjaro, Zepbound)
 - Semaglutide (Ozempic, Wegovy, Rybelsus)
 - Dulaglutide (Trulicity)
 - Liraglutide (Victoza, Saxenda)
 - Orforglipron (or any other oral GLP-1)
- **How to Hold Your Medication**
 - **Weekly injections:** Do not take your medication for 7 days before your procedure.
 - **Daily oral or injectable medications:** Do not take the medication on the day of your procedure.
- **Important for diabetes patients:** If you take GLP-1 medications for diabetes and will be holding them for more than 2 weeks, please contact your prescribing doctor for guidance on interim diabetes management.
- **Diet Instructions**
 - Do **NOT** follow the standard dietary preparation instructions included in this handout.
 - You must have **only a CLEAR LIQUID DIET for the entire 24 hours before your procedure**, regardless of medication type or dosing schedule.
- **If Instructions Are Not Followed**
 - If you did not hold your GLP-1 medication as instructed, call our office immediately at 224-407-4400.
 - If you have not followed these instructions, your procedure may need to be rescheduled at the anesthesia provider's discretion to ensure safety and reduce complications.
- **Questions?**

If you take any of the medications listed above and have questions or need help with medication adjustments, please schedule a pre-procedural visit with one of our providers.



ENDOSCOPY (EGD) INFORMATION

ADDITIONAL FREQUENTLY ASKED QUESTIONS (continued)

What if I have diabetes?

- **If you control your diabetes with ORAL medications alone:**
 - Do NOT take any diabetes medications on the day of your procedure.
 - You may resume your medications after the procedure is complete and you have eaten.
- **If you control your diabetes with INSULIN alone:**
 - Do NOT take any insulin on the day of your procedure.
 - You may resume your medications after the procedure is complete and you have eaten.
- **If you control your diabetes with BOTH INSULIN and ORAL medications:**
 - Follow both sets of instructions as above.
- **If you utilize an INSULIN PUMP:**
 - Please contact your endocrinologist for specific instructions.
- **Check your blood sugar frequently the morning of your procedure.**

What if I have a cold?

- If your symptoms are mild and you have no fever, feel free to use Tylenol or other over the counter cold medications and proceed as scheduled.
- If you have a fever, shortness of breath, or severe cough, please call and we can discuss if you need to reschedule the procedure when you are feeling better.

What if I do not want information shared with my ride?

- No problem at all.
- Your doctor will confirm just prior to the procedure what you are comfortable with.
- Although you may not remember the details of the procedure findings due to the sedation, all of the information is typed up and attached to the photos that were taken. If you have any questions later on when you are clear-headed, just call the office and we can review the details.



ENDOSCOPY (EGD) INFORMATION

ADDITIONAL FREQUENTLY ASKED QUESTIONS (continued)

Are endoscopies safe?

Adapted from Up to Date Patient Information and AGA resources.

- **Endoscopy is a safe procedure and complications are rare, but they can occur.**
- **Risks include:**
 - An anesthesiologist or nurse anesthetist will review your health history and be with you for the entirety of the procedure to ensure your safety. Complications of anesthesia are rare and usually easily treated.
 - You may experience redness, swelling, or warmth at the IV site. Begin by applying a cold compress and elevating the irritated IV site and. If symptoms are not improving, please call our office and ask to speak to a nurse so we can help you further.
 - Aspiration (inhaling) of food or fluids into the lungs, the risk of which can be minimized by not eating or drinking for the recommended period of time before the examination.
 - The endoscope can cause a tear or hole in the tissue being examined, which is a serious problem, but fortunately, very uncommon (approximately 1 in every 5,000-10,000 endoscopies).
 - Bleeding can occur from biopsies or the removal of polyps, but it is usually minimal and stops quickly or can be controlled.

