

PREPARING FOR YOUR UPPER ENDOSCOPY (EGD)

For your safety, **STOP** consuming all liquids and nothing by mouth 3 hours prior to your procedure or your procedure will be cancelled and rescheduled. Please follow detailed instructions below.

Cancel or reschedule your appointment:

If you must cancel or reschedule your appointment, please call 612-871-1145 as soon as possible.

Transportation:

You must arrange for a responsible person to escort you to your procedure and stay at our facility for the duration of your procedure. A taxi ride is not an option unless you are accompanied by a responsible person. If you fail to arrange transportation with a responsible person that can stay for the duration of your procedure, your procedure will be cancelled and rescheduled.

The night before your procedure:

- Stop eating solid foods and begin clear liquid diet at 11:45pm. Clear liquids include things you can see through.
 - Examples of a clear liquid diet include: water, up to one cup of black coffee or tea (no milk or cream) each day, clear broth or bouillon, Gatorade, Pedialyte or Powerade, carbonated and non-carbonated soft drinks (Sprite, 7-Up, Gingerale), strained fruit juices without pulp (apple, white grape, white cranberry), Jell-O and popsicles.
 - The following are not allowed on a clear liquid diet: red liquids, alcoholic beverages, dairy products, protein shakes, cream broths, juice with pulp and chewing tobacco.

Day of your procedure:

Morning Medications: You may take all of your morning medications including blood pressure medications, blood thinners (if you have not been instructed to stop these by our office), methadone, and anti-seizure medications with sips of water 3 hours prior to your procedure or earlier. If you have diabetes, contact your monitoring provider for further direction on insulin and/or blood sugar management.

Continue the Clear Liquid Diet up to 3 hours prior to your procedure, then stop drinking. Avoid red liquids, dairy products, protein shakes, alcoholic beverages, chewing tobacco and illicit drugs. Use of these will result in your procedure being cancelled.

- **3 hours prior:**
 - STOP consuming all liquids.
 - Do not take anything by mouth during this time.

Bring the following to your procedure:

- Bring the completed Health History form included in this packet with you the day of your appointment.
- Insurance Card / Photo ID
- List of Current Medications including over-the-counter medications and supplements
- Bring your rescue inhaler if you currently use one to control asthma
- Bring contact lens supplies as you will be asked to remove contact lenses prior to the start of your procedure
- Advance Directives: If you have an Advance Directive, please bring a copy of your Advance Directive with you to your endoscopy appointment. Advance Directives are not honored at MNGI facilities, and in the event of a life-threatening situation, life support measures will be instituted in every instance and our patients will be transported to a higher level of care facility (i.e., hospital). In the unlikely event that you require an emergency transfer to a higher level of care facility, your Advance Directive should accompany you to that facility.

DESCRIPTION OF UPPER ENDOSCOPY

What is an upper endoscopy?

An upper endoscopy is a procedure performed to evaluate symptoms of upper abdominal pain, bleeding, nausea, vomiting or difficulty swallowing. During the procedure, the physician examines the lining of your esophagus, stomach and the first part of your small intestine through a thin, flexible tube called an endoscope. If growths or other abnormalities are found, the physician may remove the abnormal tissue for further examination, or biopsy. If you have difficulty swallowing, it may be possible for the area to be expanded during the procedure.

What happens during an upper endoscopy?

Plan to spend up to 2 hours at the endoscopy center the day of your procedure. The procedure itself takes about 15 minutes to complete.

Before the procedure:

Your medical history will be reviewed with you by your health care team including a nurse, your gastroenterology physician and an anesthesia provider. An IV line will be placed.

During the procedure:

During your procedure, the anesthesia provider will administer medications and monitor vital signs which is a process known as Monitored Anesthesia Care (MAC). While most patients sleep through the procedure, some remain awake and aware. The anesthesiologist and/or certified registered nurse anesthetist (CRNA) will help determine the appropriate type of drug to be used during the procedure to keep you safe and comfortable.

What happens after the procedure?

The physician will talk with you about the initial results of your procedure and will prepare a full report for the healthcare provider who referred you for your upper endoscopy. You may have some bloating after the procedure which is normal. Your throat may feel sore for a short time. Any tissue samples or polyps removed during the procedure will be sent to a lab for evaluation. It may take 5-7 working days for you to be notified of the results by mail or through the Patient Portal.

You may resume most of your regular activities the day after the procedure. However, medication given during the procedure will prohibit you from driving for the rest of the day. You may resume your normal diet, but alcohol should be avoided until the next day after your procedure.

Are there possible complications from an upper endoscopy?

Although serious complications are rare, any medical procedure has the potential for risks. Risks from an upper endoscopy include perforation, or a tear, of the lining of the stomach or esophagus, bleeding from a biopsy site, reactions to medications, heart and lung problems, and dental or eye injuries.