

# Patient Instructions for Upper GI Endoscopy

This handout will help you get ready for your upper endoscopy procedure. It has information about:

- Where to go for your procedure
- What is your procedure and why is it done
- Preparing ahead of time for your procedure
- Medication and diet instructions before your procedure
- What to expect during your procedure

## WHERE TO GO FOR YOUR COLONOSCOPY/UPPER ENDOSCOPY

UVM Medical Center  
111 Colchester Ave  
Endoscopy Outpatient Clinic  
West Pavilion, Level 4  
Burlington, VT 05401

Check in at registration first: Level 3, Main Lobby

## WHAT IS AN UPPER ENDOSCOPY?

Also known as: Esophagogastroduodenoscopy; EGD, Gastroscopy.

An upper GI endoscopy is an examination of the upper gastrointestinal (GI) tract using a specialized video camera called an endoscope. This instrument is inserted down the throat and shows images of the lining of the esophagus, stomach and upper duodenum.

This test can help diagnose and potentially treat:

- The cause of upper GI (gastrointestinal) bleeding
- The cause of swallowing difficulties
- The removal of foreign objects
- The presence of tumors or other abnormalities of the upper GI tract
- Inflammation, narrowing, or tumors of the esophagus
- Acid reflux, gastroesophageal reflux disease (GERD)



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## PREPARING AHEAD OF TIME FOR YOUR UPPER ENDOSCOPY

### 7 Days Before Your Procedure

- Stop taking iron pills
- You may continue to take aspirin
- You may continue taking any acid suppressing medications. These medications include: Omeprazole (Prilosec), Pantoprazol (Protonix), Esomeprazole (Nexium), Lanoprazole (Prevacid), Rabeprazole (Aciphex), Famotidine (Pepcid), and Ranitidine (Zantac).
- If you are diabetic, please call your primary care provider and ask how you should manage your diabetes medications
- If you take blood thinners, call the prescribing doctor and ask what you should do. These medications include: Warfarin (Coumadin), Rivaroxaban (Xarelto), Apixabin (Elequis), Dabigatran (Pradaxa), Edoxabon (Savaysa), Dipyridamole (Aggrenox), Clopidogrel (Plavix), Prasugrel (Effient), Ticagrelot (Brillinta), Heparin, Enoxaparin (Lovenox), Fondaparinux (Arixtra). **Do not stop taking your blood thinning medicine without first talking to the doctor who prescribes this medicine.**
- If you take a MAOI (Rasagiline, Selegiline, Phenelzine, Tranylcypromine) call our office at (802) 847-8865.

### 1 Day Before Your Procedure

- Stop any antacids: TUMS, Roloids, milk of magnesia, sucralfate, Carafate, or any stomach coating products.
- Arrange for a driver. You will **not** be permitted to drive yourself home due to the sedative effects of the medications. Taxi, Uber driver, and bus are **not** permitted. Your driver must park and pick you up from the Endoscopy Clinic. You are not permitted to walk unaccompanied to meet your ride in front of the hospital.
- **Stop eating and drinking at midnight.**

## THE DAY OF YOUR UPPER ENDOSCOPY

- Do not drink, eat, suck on hard candy or chew gum.
- If your procedure is after 12 pm, you may have one glass of water before 8 am.
- You may take your morning medications with small sips of water.
- Leave all jewelry and valuables at home.
- Arrive at least one hour before your procedure time and check in at registration on the third floor. You should check in at registration even if you have received a pre-screen call from the endoscopy office.
- After registration, come up to the fourth floor **Endoscopy Outpatient Clinic**.

## THE UPPER ENDOSCOPY PROCEDURE

- You will have a short interview. Please tell the nurse of any drug allergies, medications you take, and health problems. Please bring a list of your medications if needed.
- You will change into a hospital gown.
- An intravenous (IV) line will be inserted into a vein in your arm. The IV will allow you to receive medications and fluids for the procedure.

After your arrival in the procedure room, you will:

- Be asked to remove dentures
- Be asked to swallow a special lidocaine gel that will numb your throat. This medication will help suppress the need to cough or gag when the endoscope is inserted.
- Receive medications through the IV, a combination of a sedative (relaxing) and narcotic (pain reliever)
- Be given a mouth guard to protect your teeth and the endoscope
- Be instructed to lie on your left side
- The endoscope will be advanced through the esophagus to the stomach and duodenum (the first part of the small intestine). The endoscope will NOT affect your breathing.
- Air will be introduced through the endoscope to enhance viewing. This may make you burp.
- The exam typically lasts about 5 minutes, depending on examination findings
- After the test is completed, food and liquids will be restricted until your gag reflex returns.

## RISKS OF THE UPPER ENDOSCOPY PROCEDURE

There is a small chance of perforation (hole) of the stomach, duodenum, esophagus, or at the biopsy site. A patient could have an adverse reaction to the medication. The overall risk is less than 1 out of 2,500 people.

## AFTER THE UPPER ENDOSCOPY PROCEDURE

- You will remain with us for 30-45 minutes after the procedure.
- *You will **not** be permitted to drive yourself home* due to the sedative effects of the medications. Taxi, Uber and bus are not permitted. Your driver must park and pick you up from the Endoscopy Clinic. *You are not permitted to walk unaccompanied* to meet your ride in front of the hospital.
- Report difficulty swallowing, fever, pain, black stools or bloody vomit to (802) 847-8865.
- If biopsies are taken, results will be mailed to you within a 2-3 week period.

Questions? Call **(802) 847-8865** for more information.