



Atrium Health

GASTROENTEROLOGY & HEPATOLOGY

If you have any questions regarding your procedure please contact us at 704-512-6161.

Outpatient Upper Endoscopy Instructions

Carolinas Gastroenterology Centers
www.carolinashealthcare.org/carolinas-gastroenterology-centers

Ballantyne
15110 John J. Delaney Drive • Suite 120
Charlotte, NC 28277
704-512-2140

Atrium Health Endoscopy Center Kenilworth
1225 Harding Place • Suite 5200
Charlotte, NC 28204
704-355-4178

Atrium Health Main
1000 Blythe Blvd., 4th Floor • Endoscopy Unit
Charlotte, NC 28203

Atrium Health Pineville - Pineville
10628 Park Road, 1st Floor • Endoscopy Unit
Charlotte, NC 28210

Atrium Health Mercy - Mercy
2001 Vail Avenue
Charlotte, NC 28207

Pineville Endoscopy Center
10520 Park Road • Suite 105
Charlotte, NC 28210
704-927-5756

Huntersville Endoscopy Center
16455 Statesville Road • Suite 114
Huntersville, NC 28078
704-237-9290

Atrium Health Union West
1000 Healing Way • Endoscopy Suite
Matthews, NC 28104

University Endoscopy Center
101 East WT Harris Blvd. • Suite 3215
Charlotte, NC 28262

PREPARATION FOR THE TEST

DATE OF EXAM: _____

TIME: _____

REPORT AT: _____

Do not eat or drink after midnight to ensure that the stomach is empty for the procedure. You may take approved medications with small sips of clear liquids up to 3 hours prior to your procedure.

Your adult driver must stay with you and drive you home. The total time will be about 3 hours.

Your doctor will talk to you about any adjustments of medications which you might be taking.

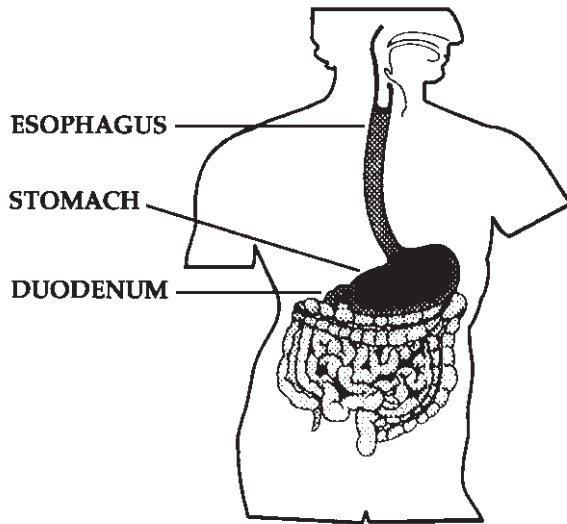
If you have any questions, please call our office.

If you take Coumadin (Warfarin), Plavix, Lovenox, Aggrenox or other “blood thinners”, please alert your doctor or nurse at time of scheduling.



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UPPER ENDOSCOPY



THE TEST

Upper endoscopy (also called *esophagogastroduodenoscopy* or *EGD*) is a procedure in which a flexible tube is swallowed in order that your physician may examine your esophagus (*swallowing tube*), stomach and duodenum (*first part of the small intestine*).

REASONS FOR THE TEST

Upper endoscopy may be performed to evaluate the following problems:

- Nausea and vomiting
- Upper abdominal pain
- Feeding Tube insertion

- Difficulty swallowing or painful swallowing
- Bleeding from the esophagus, stomach or duodenum
- Abnormal X-rays of the upper digestive tract (*e.g., a stomach ulcer or tumor*)
- Iron deficiency anemia

In addition, different instruments can be passed through the endoscope for the purpose of biopsy or treatment of certain conditions of the upper intestinal tract. Conditions that may be treated include bleeding ulcers and/or polyps (*abnormal growths*). Objects caught in the esophagus may also be removed with the endoscope.

WHAT HAPPENS DURING ENDOSCOPY?

An IV will be started prior to the procedure and monitors will be connected so that your blood pressure and respiration can be monitored during the test. You will be lying on your left side during the procedure. Medication will then be given through your IV to sedate you. Next a thin flexible tube is put into your mouth so that the doctor can see your digestive tract from the inside. The procedure takes 15 to 30 minutes to perform.

AFTERWARDS

You will be monitored in a recovery area until most of the effects of the medications have worn off. This is usually for about 30 to 60 minutes. Your throat may be slightly sore after the test and you may feel bloated right after the procedure due to the air placed in your stomach during the test. You will be able to resume your usual diet after the test unless your doctor tells you otherwise.

POSSIBLE COMPLICATIONS OF UPPER ENDOSCOPY

Upper endoscopy is a safe procedure. Although complications can occur, they are rare when the procedure is performed by a physician who has been specially trained in the procedure. Major complications include bleeding, (3 per 10,000), when a biopsy is performed or a polyp removed; and perforation, (3 per 10,000), which is a tear in the lining of the gastrointestinal tract which could require surgery for repair. Other potential risks include reactions to the sedatives used. One minor complication which can occur is irritation of the vein at the site of the IV. This is not dangerous and goes away in a few weeks.