

### Will I be Sedated?

For your double procedures, most patients choose to have sedation. If you choose to have conscious sedation you will have a small tube called a cannula put into your vein. You will be awake enough to talk with staff during the test and tell them if you are having any discomfort. Some patients will remember things about the test. If you choose to have no sedation you can have throat spray for your gastroscopy. Do not eat or drink anything for at least one hour after throat spray.

### Answers to Frequently Asked Questions

- A nurse will stay with you throughout the examination.
- A throat spray may be given to numb your throat.
- You will lie on your left side.
- A plastic mouth guard will be placed between your teeth - this helps to keep your mouth slightly open to enable the tube to be passed.
- During the tests air will be passed into your stomach/bowel which enables a better view and is removed at completion of the test.
- The gastroscope does not interfere with your breathing and you can breathe normally.
- The tests usually take approximately 50-60 minutes.

### Imaging/Biopsies

Photographs/videos of the intestine and samples of the intestine (biopsies) will be taken as part of your care, in order to report/diagnose or exclude particular diseases. The images or samples taken may be retained by the hospital for further testing and/or education and research in accordance with hospital procedures. In any such event, patient confidentiality will be maintained at all times.

### Special requirements

If you use a wheelchair or have a physical or any other disability please contact us to let us know in advance so that we can ensure you receive appropriate assistance. If you need an interpreter please let us know in advance.

**If you request to reschedule or cancel your appointment, please contact the number on your appointment letter.**

### Complaints / Compliments /Comments

Please contact nursing staff if you wish to make a complaint, compliment or comment. A comments box is also situated in the endoscopy unit.

### Hospital Facilities

- Coffee Dock
- Prayer Room

**For your day procedure you will be attending a mixed day ward. If you have any concerns, please contact the relevant department. If you have any complications after your procedure please contact your GP/DOC or your nearest emergency department.**

### Other important points to note:

As the RCSI Louth Hospitals are teaching hospitals, a person other than a consultant, such as a registrar (senior trainee) or advanced nurse practitioner (ANP), may perform the procedure.



## Louth County Hospital, Our Lady of Lourdes Hospital

Patient information on:

## Combined Colonoscopy & Oesophago-Gastro Duodenoscopy (OGD) / Gastroscopy

**Please read this leaflet carefully  
and contact us before your  
procedure date if you have  
questions or concerns**

### Contact details:

**Louth County Hospital (LCH):**  
Endoscopy Department  
**(042) 93 34 701**  
Monday to Friday, 8.00am - 6.00pm

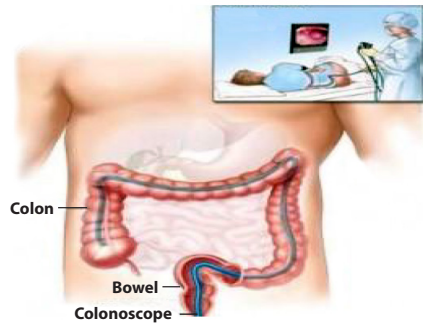
**Our Lady of Lourdes Hospital (LOL):**  
**(041) 983 7601**

**Consent**

Please read the information contained in this leaflet. You will be asked to sign a consent form on the day of your procedure. The doctor or nurse performing the test will answer any questions you may have and you may change your mind at any time.

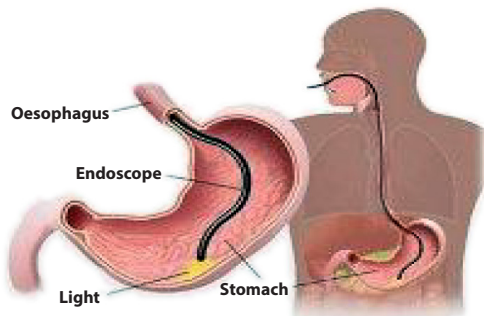
**What is a colonoscopy?**

A colonoscopy is a visual examination of the lining of your bowel. It is performed by using a thin tube (colonoscope) with a camera and a light on the tip which is used to look through the rectum into the large bowel (colon). During the course of the examination biopsies may be taken.



**What is Oesophago-Gastro Duodenoscopy (OGD) / Gastroscopy?**

A Gastroscopy is a test which allows the doctor to look at the lining of the oesophagus (tube that food passes down), the stomach and the first part of your intestine. It is performed by passing a thin flexible tube (Gastroscope) through your mouth. During the course of the examination samples of the intestines (biopsies) may be taken.



**Preparation for the examination**

- Your stomach needs to be empty so you will need to fast before the test. Please fast from food for 6 hours - 4 hours from clear fluids.
- You will be provided with a hospital gown.
- Please have a telephone number of a relative or friend who may be contacted to collect you.
- The scheduling of your tests is an estimate only and unfortunately there can be unforeseen delays, therefore plan to be in the department as a day case.
- If you have a referral from your doctor, bring this with you.
- Please bring a list detailing your medication.
- You are advised not to bring jewellery, valuables or large sums of money.
- If you choose to have sedation for these procedures you must be collected on discharge.

**Medications (tablets)**

- You may continue to take essential medication. If you are taking **blood thinning medication** you should contact the nurse in the Endoscopy Unit where you are having your procedure.
- There is no need to stop taking blood pressure medication. Iron tablets must be stopped one week before examination.
- If you have **diabetes** you should contact the Endoscopy Unit for advice before you attend for your test.

**Risks**

OGD is a safe test but there are risks.

- **Risk of perforation** (Tear) in approximately 1 in every 2000 patients.
- **Bleeding** may occur during or after procedure, if this happens at home please contact your emergency department.
- Damage caused by Endoscope to **teeth and bridgework** can happen but this is rare.
- You may experience a **sore throat** or feel some wind in your stomach after the procedure.
- There is a risk that some abnormalities may be missed during this procedure (1 in every 100).

Colonoscopy is a safe test but there are risks.

- **Bleeding:** If a polyp is removed during your procedure this can result in some bleeding. This bleeding can often be stopped straight away but may occasionally be more serious or may even occur a few days later. This may need further investigation or medical advice. Depending on the size, the risk of bleeding is 2 in every 1000 patients post polypectomy. Many polyps are the type which can turn into cancer if left untreated for a long period of time and removing them when still benign eliminates the risk.
- **Perforation:** The colonoscope can cause a hole in the wall of your bowel. The chances of this happening are about one in 1,000. If this happens, you may need an operation.
- **Drug reaction:** You may have a reaction to the sedative that may make you have temporary breathing or heart problems. Serious problems are rare as you are carefully monitored during the investigation.
- **Missed Pathology:** Colonoscopy is not a perfect test and even with complete examination things, such as polyps or cancer, very occasionally can be missed (about 5 in every 100). Ensuring that you are fasting and that your bowel is very clean helps to reduce the risk.
- The endoscopist will complete this test in >90% of cases. **Failure to complete** can be due to many factors. A poor bowel preparation can prevent the advancement of the scope in the bowel and a poor view is not acceptable nor is it safe to continue. If your test is incomplete another test maybe required and this will be discussed with you after the colonoscopy.
- Some of these complications may need further treatment, or even an operation. If a complication occurs during your procedure in Louth County Hospital you may need to be transferred by ambulance to Our Lady of Lourdes Hospital for overnight observation or further treatment.

**What are the benefits?**

Gastroscopy is the best test to check the gullet, stomach and intestines and will allow a biopsy to be taken of any abnormality detected. A Colonoscopy is the best test to check the bowel. If polyps are identified, these will be taken away by the doctor if it is judged safe. Removing polyps increases slightly the risk of the procedure, but reduces the risk of bowel cancer in the years ahead.