What is an Upper Endoscopy?

An upper endoscopy enables your physician to look inside your esophagus, stomach, and duodenum (the first part of the small intestine). A small flexible tube (endoscope) about the thickness of your index finger with a bright light at its tip is gently inserted into your mouth and advanced to the small intestine. The video camera on the scope transmits images of the inside of your esophagus, stomach, and small intestine allowing the physician to examine the lining of these organs for any disease or abnormalities such as narrowing of the esophagus, inflammation, or bleeding.

Preparation

You may have clear liquids only on the day of your procedure. Stop all liquids three hours before your testing. It is important for the stomach to be empty to allow your physician to see the entire area and to decrease the possibility of food or fluid being vomited into the lungs while under anesthesia. Follow your physician's instructions carefully.

What To Expect Before, During, and After Your Endoscopy

Prior to the procedure you will be called and asked questions regarding your medical history and the reason for having the endoscopy. On the day of your procedure the nurse getting you ready will review this information and answer any questions you might have about the test. An IV will then be started; your driver must be in our waiting area at this time.

In the procedure room our nurse anesthetist will go over the anesthesia with you. You will then be asked to lie on your left side and a bite block will be placed in your mouth, this is to protect your teeth and our scope. Anesthesia will then be given. After you have been sedated your physician will gently insert the endoscope into your mouth and begin to advance it into your small intestine. The procedure usually lasts 10 to 20 minutes. If your physician sees an area that needs further evaluation he may take a biopsy, (a small sample of tissue that can be examined under a microscope) this is painless. Specific treatment may also be performed (such as dilation or removal of polyps) depending on the reason for your procedure. Polyps are generally removed by cutting and cautering (burning) and then sent for examination. Results usually take 10-14 days. Dilatation (stretching of the esophagus using a tube) is used when there is a narrowing of the esophagus.

After your procedure, you will return to the recovery area. During this time, your physician will explain the results of your endoscopy. You and your driver will be given discharge instructions, which include diet, medication and activity restrictions. You will not be able to drive, operate machinery, drink alcoholic beverages, make any critical decisions such as signing legal documents, or do anything that requires you to be alert and coordinated for 12 hours. Total time in the center for your procedure is usually around two hours. A responsible adult must be available to drive you home as the sedation impairs your reflexes and judgment.

Upper Endoscopy Checklist:

- Arrange for a responsible adult to stay during your procedure and drive you home after your discharge. Your procedure will be cancelled if the above is not followed.
- Follow diet instructions
- Do not drink after the time specified in your instructions.