



Mountain West Gastroenterology Patient Information and Prep Sheet – ERCP - EUS

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You have been scheduled for an examination of the upper gastrointestinal tract (esophagus, stomach, and a part of the small intestine) as well as the bile duct and pancreas. This is done by looking at the lining of the esophagus, stomach, and intestine with a lighted video tube. If you are having an ERCP, the bile duct and pancreatic duct will be cannulated under fluoroscopic X-Ray vision. If you are having an EUS then a specialized ultrasound video tube is used to visualize the surrounding tissues. The video tube is thinner than most foods that you swallow. It is important that you do not eat any solid food within twelve hours of your procedure. You may have sips of water until 4 hours prior to your procedure.

The morning of the test you will be given medicines to help you feel relaxed and comfortable. **Tell your doctor and nurse if you have any medication or food allergies. Your doctor must know if you are pregnant due to the possible usage of X-Ray beams.** Once you are relaxed, the doctor will examine your upper GI-tract with the endoscope while you are in a comfortable position lying on your side. The endoscope is passed through the mouth, esophagus and stomach into the small intestine. The endoscope does not interfere with your breathing. Most patients are asleep during the procedure and do not report any discomfort. The examination usually takes 5-15 minutes. If anything unusual is seen in your upper GI-tract, like a polyp or inflamed tissue, biopsies (small pinches of tissue) can be taken through the tube. These biopsies are not painful. Larger lesions can be removed as well using a snare or similar device. The tissue samples are then sent to the laboratory for examination by the pathologist using special stain techniques and a microscope.

After the exam is completed, most patients are awake enough to leave within an hour. However, for safety reasons, you cannot drive or operate machinery, tools or appliances until the following day as the full effect of the medicine may wear off slowly. Before you leave, preliminary results will be discussed with you and your relative.

If you are having an ERCP or if you had pancreatic biopsies performed during your EUS, **you are advised not to eat for the rest of the day of your procedure** (unless otherwise specified by the doctor after the exam) to minimize the risk of pancreatitis. Water and ice-chips are ok.

Although an ERCP and EUS are generally very safe, bleeding may occur from a biopsy or polypectomy site or if a sphincterotomy or similar intervention was performed. Bleeding is usually minimal but may require a repeat procedure, blood transfusions or rarely surgery. Complications such as a perforation (a tear that might require surgery for repair) are very rare. Pancreatitis can be a frequent post ERCP complication and may occur in 5 to 8 percent of cases. You may need to be admitted to the hospital if this complication occurs. It is important for you to recognize early signs of any possible complication. If you begin to run a fever after the test, have trouble swallowing, or have increasing throat, chest or abdominal pain, let your physician know about it promptly. Pancreatitis usually requires a hospital admission, intravenous hydration, pain control and at times antibiotics. You will not be allowed to eat if you have pancreatitis.

Any questions you have about this examination or its possible complications should be discussed with the doctor before the exam begins.

7 DAYS PRIOR TO YOUR EXAM:

- Stop taking **Aspirin, Ginkgo Biloba, or Plavix**. Tylenol is ok to take. If you have a heart condition, had a recent heart attack or cardiac stent placement, you should discuss this with your Cardiologist or Primary Care Physician prior to stopping any anti-clotting agents.
- If you are taking blood thinners such as **Coumadin**, you should discuss with your Cardiologist or Primary Care Physician how to manage your blood thinners prior to the procedure.
- If you have had a mechanical heart valve, history of deep clots in your legs, or a pulmonary embolism, you may need **Lovenox or Heparin** up to the day of your procedure and possibly after the procedure.
- If you have **diabetes**, please follow our attached guidelines and discuss this with your Primary Care Physician. Test your blood sugar before coming in for your exam and bring the reading with you. If you take oral medications for your diabetes, don't take them the morning of your procedure unless otherwise instructed by your doctor. If you take insulin, bring your insulin with you. If you take insulin in the morning, take only ½ of your usual dose.
- **Nursing Mothers** – please “pump and dump” twice after the procedure before resuming breastfeeding.

3 DAYS PRIOR TO YOUR EXAM:

- Stop taking all anti-inflammatory medicines such as **Ibuprofen, Advil, Naproxen, Excedrin, Aleve or similar**.
- You can take Tylenol for pain.

THE DAY OF YOUR EXAM:

You may not eat any solid food until the day after your procedure!

- If you have diabetes, test your blood sugar before coming in for your exam and bring the reading with you. If you take oral medications for your diabetes, don't take them the morning of your procedure unless otherwise instructed by your doctor. If you take insulin, bring your insulin with you. If you take insulin in the morning, take only ½ of your usual dose.
- Remember to TAKE YOUR USUAL MEDICATIONS (no blood thinners, no NSAIDS, no aspirin, no Plavix) the morning of your procedure.
- It is important that you do not eat any solid food within twelve hours of your procedure.
- You may have sips of water until 4 hours before your scheduled exam. Stop drinking 4 hours before your scheduled arrival time.

Please bring someone with you to the endoscopy center to drive you home, as you will be sedated for the exam. You may not drive for 12 hours.

You will be in the Endoscopy Lab for approximately two to three hours. The doctor will talk to you after the exam and will give you recommendations for diet, medication, follow up care, etc. Wear comfortable clothing; bring your glasses, hearing aids, insurance card(s) and completed information form.

We will expect payment of co-pays, coinsurance and deductibles at the time of service.

If your insurance requires a referral, you should contact your primary care physician to arrange for us to receive the referral prior to the procedure.

Additional information can be found at our website www.mwgi.com.

You may receive THREE separate bills for this procedure: 1 - Physician, 2 - Facility, 3 – Pathology

_____ ERCP _____ EUS

YOUR PROCEDURE IS SCHEDULED AT THE FOLLOWING TIME AND PLACE:

- Mountain West Endoscopy Center, 6360 South 3000 East, Ste 320, SLC, UT.**
801-944-3166
If not contacted by the day before your procedure, call 801-944-3166 to pre-register.
- Intermountain Medical Center, 5121 South Cottonwood Drive, Murray, UT.**
801-507-3262
Check in at the Eccles Outpatient Building, Level 2. Free Valet Parking Available.
Call the day before your procedure to pre-register, 801-314-4395
- Davis Hospital & Medical Center, 1600 Antelope Drive, Layton, UT.**
801-807-7034
Use the ER Entrance
- Lakeview Hospital, 630 E Medical Dr, Bountiful, UT.**
801-299-4657
South Entrance, Same Day Surgery Registration.
- Lakeview Endoscopy Center, 620 E Medical Dr, Suite 200, Bountiful, UT.**
801-299-6760
Call the day before your procedure to pre-register
- LDS Hospital, 8th Avenue & C Street, SLC, UT. ~Dr. Batista Only~**
801-408-1057
Entrance West Wing of Hospital. Call the day before your procedure to pre-register, 801-314-4395. Free Valet Parking Available.
- Riverton Hospital, 3741 West 12600 South, Riverton, UT.**
801-285-2775
Main entrance (Northeast corner) sign in at kiosk, take a pager and admitting will come get you from the waiting area.

For Questions - Call _____

Patient Signature: _____

Date: _____

Patient Name (print): _____

Date of Birth: _____