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Your EGD is scheduled for _____ at _____.

If your Procedure is at **Fairfax Hospital** you must be in the Gastroenterology (GE) Lab (Blue entrance – Women’s and Children’s Center) 45 minutes before the scheduled time of your procedure.

If your procedure is at the **Woodburn Endoscopy Center (WEC)** you must arrive 45 minutes before the scheduled time of the procedure. The **WEC** is located at 3301 Woodburn Rd., Suite 109, Annandale, VA. The Center is located on the first floor.

YOU MUST BRING A DRIVER WITH YOU THE DAY OF YOUR EXAM

If biopsies are taken you will be called with the results within approximately 2 weeks after your exam. However, if you have not received your results within 3 weeks, please call our office Monday through Friday between 1:30 and 4:00pm.

****YOU MUST ALERT OUR OFFICE IF YOU CHANGE YOUR INSURANCE COMPANY AT LEAST 2 WEEKS BEFORE THE DATE OF YOUR PROCEDURE****

There is a huge demand for endoscopic procedures and we may have difficulty scheduling patients as early as they would like because of the limited number of time slots available. In addition, this procedure reserves up to one hour of the doctor’s time. Every effort must be made to inform the office of cancellations at least one week in advance. Even with this notice it is very difficult to substitute another patient because of the requirements of the prep and disruption of their schedule. These procedures often require insurance company pre-approval and therefore consume up to one hour of our scheduler’s time to reschedule procedure dates. Procedure slots that are not utilized further impair our ability to schedule our patients in a timely manner. **Late cancellations should be for true emergencies only.**

You will be medicated for your procedure with either:

- Deep intravenous sedation (for this sedation you may need an anesthesia assessment)

- Conscious sedation

Instructions for the preparation and explanation of the procedure need to be read now and one week before your examination.

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EGD – (ESOPHAGOGASTRODUODENOSCOPY)

An examination of your esophagus, stomach and duodenum has been recommended to locate and understand any abnormalities that are present. This will help diagnose and treat your symptoms. The examination requires that you have an **empty stomach; that is, you should not take any food after midnight the night before the exam, or any liquid six hours before the exam.** Essential medications, such as blood pressure or heart pills, may be taken with a small amount of water. Because many patients are nervous and apprehensive about the examination, we usually administer a small dose of sedative medication through an IV line (into a vein). The drugs usually used are Fentanyl and Versed or Propofol. Your throat may be sprayed with Benzocaine to numb your gag reflex. If you have had an unfavorable reaction to any of these drugs you should tell your physician before the procedure day. The drugs will either put you to sleep or strongly relax you. You should not drive a motor vehicle for 12 hours after the medication is given, so you must have someone drive you home after the test.

If you take **coumadin, plavix, aspirin, or vitamin E**, do not take for **4** days prior to the procedure.

The examination is conducted with the patient lying on the left side. A long flexible tube is placed in the mouth as the patient swallows; the doctor advances the tube into the esophagus. You will be able to breathe normally throughout the examination. A mouth guard on which the patient rests his teeth is used to protect the instrument from accidental bite injury. As the examination is conducted the doctor pumps a small amount of air into the esophagus and stomach to provide a good look at the tissues. The doctor will also remove air and secretions by suction to prevent distention, but you may feel some fullness during the test. Tiny bits of tissue may be removed with the biopsy forceps for examination by a pathologist. You will not feel the sampling process.

There is some risk to any procedure, but the frequency of complications with upper gastrointestinal endoscopy is exceptionally small. In a national survey of the results of 211,410 examinations there were 70 tears through the lining (perforation), 62 instances of bleeding, 129 heartbeat and breathing problems, 17 infections, and 228 miscellaneous reactions, primarily to medication (hives, blood clots, etc.). Perforation is a major complication requiring emergency surgery. Cardiac and pulmonary irregularities are exceedingly uncommon, but may be life-threatening. Aspiration of gastric fluid into the lungs may rarely occur. Bleeding complications may necessitate hospitalization and transfusions. Because removal of stomach polyps is sometimes associated with bleeding, your doctor may hospitalize you after the procedure. Again, I emphasize that the vast majority of patients tolerate the procedure very well. The above information is provided

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only to increase your medical awareness and enable us to deliver the best medical service to you.

The examination usually lasts 10-20 minutes. The physician will discuss the results with you immediately following the examination. Most patients will be able to leave within 30 minutes after the examination is completed. Until then, you will be asked to rest in the recovery room for a short time until the effects of the sedation have subsided. You should rest at home for the remainder of the day. You may resume most normal activities including driving and operating hazardous machinery the next day. The examining doctor will send a report to your physician reviewing all the details of the examination.

Some degree of apprehension is normal, but the endoscopy staff will try to make your examination as comfortable as possible. Most patients find that the exam is much less unpleasant than they anticipated. If you have any questions, Please call our office at your convenience.

Please visit our website for the answer to many frequently asked questions (FAQ's) at www.novagidoc.com.

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