NORTON GASTROENTEROLOGY CONSULTANTS OF LOUISVILLE

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GASTROENTEROLOGY HEPATOLOGY DIAGNOSTIC & THERAPEUTIC ENDOSCOPY

PATIENT NAME:	 DATE:	

EGD (ESOPHOGOGASTRODUODENOSCOPY) EDUCATION AND CONSENT FORM

DESCRIPTION OF PROCEDURE:

An EGD is a procedure in which your doctor will examine the lining of your upper gastrointestinal tract and identify and potentially treat any abnormalities that are found. The exam is done with a flexible fiber optic tube (scope) which is passed through your mouth into your stomach and within the first part of your small intestine. Your doctor will watch the exam on a TV screen. A needle for IV medicines will be placed in your arm prior to the procedure. Medicine will be injected through this needle that will make you sleepy and relaxed. Your blood pressure, respirations, pulse, and oxygen level will be monitored by a nurse throughout the procedure. Your doctor may spray your throat with a numbing medicine to relax your gag reflex. As you lie on your left side, a small mouthpiece will be placed between your teeth. As your doctor gently passes the scope through your mouth into your esophagus (food tube), and into your stomach and first part of the small intestine, he will be examining the lining for any abnormalities. You may experience some cramping and gas due to the air your doctor is putting in during the procedure. Please inform your doctor and nurses if there is any chance that you may be pregnant. Your doctor may take tissue samples (biopsy) by passing small instruments through the scope. Therapies/treatments may be performed during an EGD include, but are not limited to:

- 1. Dilatation stretching narrowed areas by passing special instruments.
- 2. Hemostasis stopping/controlling bleeding with special instruments and/or medicines.
- 3. Feeding tube placement placing a special feeding tube through the stomach wall.
- 4. Removal of foreign objects passing special instruments to retrieve objects.

After the procedure, you may feel drowsy and may sleep for a short time. You may feel bloated from the air inserted during the procedure. You will be encouraged to expel the air. Your doctor will discuss the findings with you and your family before you leave.

WHAT ARE THE RISKS OF THIS PROCEDURE?

The risks of an EGD include, but are not limited to bleeding which may require transfusions, perforation (puncture, tear or hole in the stomach, esophagus or duodenum) which may require surgery, and possible sedation reaction.

WHAT ARE THE BENEFITS OF THIS PROCEDURE?

The benefit of an EGD is that it is a nonsurgical procedure, which we utilize for direct visualization of upper GI tract that will allow us to obtain specimens as necessary and perform therapies as discussed above.

WHAT ARE THE ALTERNATIVES?

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A possible alternative to an EGD is an upper GI series which is an upper GI X-ray where pictures of your upper GI tract are taken to check for abnormalities and is performed in the radiology department by an X-ray technologist. The barium contrast is swallowed and X-ray pictures are taken. A radiologist (a doctor who specializes in interpreting X-rays) will study and interpret your upper GI series and send a report to your doctor.

WHAT ARE THE RISTS OF THE ALTERNATIVES?

The risks of an upper GI series include, but are not limited to, the inability to detect mucosal lesions, Barrett's esophagus, and Helicobacter pylori, and also the inability to perform various therapies and treatments outlined above.

WHAT ARE THE BENEFITS OF THE ALTERNATIVES?

The benefit of an upper GI series is that it is a diagnostic test which requires no sedation with minimal risk and you are able to leave shortly after the scan has been completed.

have read, or had read to me, this education & consent fo	rm.	
Patient/Authorized Signature	Relationship	Date
Witness Signature	Title	 Date