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What is an Endoscopic Ultrasound?

Endoscopic Ultrasound (EUS) involves the use of a flexible tube with a tiny camera to examine the upper intestinal tract including the oesophagus, stomach and duodenum. The ultrasound probe attached to the tip of the endoscope also allows to scan the neighbouring organs (e.g. liver, gall bladder, pancreas, lymph nodes, adrenal gland). The procedure is commonly undertaken if your previous endoscopy or scans (CT, MRI, abdominal ultrasound) had shown abnormalities that needs to be scanned and tissue samples obtained. A variety of interventions can also be performed through the EUS endoscope including Fine Needle Aspiration Biopsy (FNABx), cyst drainage, stent insertion and injection of pain killers for coeliac nerve block.

How are you prepared?

You need to fast for 6 hours before the procedure. While fasting, take all your regular medications with a sip of water. You can have sips of water alone until 2 hours before your appointment. If you are taking blood thinning medications like Warfarin, Rivaroxaban, Apixaban, Dabigatran, Clopidogrel, Prasugrel or Ticagrelor, this needs to be stopped for at least 3-5 days prior. Please check with your doctor for advice and instructions for stopping and any alternative medications to be taken when you stop them.

Special Considerations

If you have serious heart or chest problems special precautions need to be taken to reduce any possible risk. You should therefore inform your doctor of any serious illness of this nature before your procedure. The precautions taken will usually include providing oxygen during the procedure and/or monitoring the heart and oxygen levels during the procedure.

What do we do?

An EUS endoscope is a flexible tube about 13mm in diameter. It allows full colour inspection of the oesophagus, stomachand duodenum. In addition, it also allows to perform ultrasound examination of the wall of the intestine and neighbouring organs like pancreas, liver, lymph nodes etc. At the beginning of the procedure your throat will be sprayed with a local anaesthetic and you will be given a sedative by injection in a vein to make you more comfortable. Rarely the anaesthetist may decide to give you general anaesthesia so that you are put to sleep with a tube in your throat (trachea). The procedure will take between 30-45 minutes and you will be sleepy for about half an hour afterwards.

Is it safe and what are the risks?

EUS is a well established technique and is safe. It is unlikely to cause problems for patients unless they have serious heart or chest problems. Rarely, individual patients may have a reaction to the sedation or damage to the oesophagus or stomach at the time of examination.

The EUS endoscope is a complex reusable instrument, which cannot go through a heat sterilisation process. However, after each use it is thoroughly cleaned and then disinfected, using a high level disinfectant. The hospital cleans and disinfects the gastroscope according to the standards set by the Gastroenterological Society of Australia. The possibility of infection being introduced during the procedure cannot be completely ruled out, but seems extremely rare. Death is a remote possibility with any interventional procedure. However, if you wish to have full details of all possible rare complications discussed before the procedure, you should inform your doctor.

What happens after the procedure?

The sedative pain-killer you are given before the procedure is very effective in reducing any discomfort. However, it may also affect your memory for some time afterwards. Even when the sedative appears to have worn off, you may find you are unable to recall details of your discussion with your doctor. For this reason a relative or friend should come with you if possible. You must not drive, operate machinery or make major decisions for 12 hours after the gastroscopy.

If after you have returned home you have any severe pain, bleeding, fever, or other symptoms that cause you concern, you should contact the Hospital, your General Practitioner or attend your nearest emergency department.



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What happens when I arrive on the day?

At the hospital. Report to the Hollywood Hospital Endoscopy suite at the time advised. Please bringany relevant test results or X-rays and your Medical Insurance and Medicare details.

You will be in the hospital for about 3 – 4 hours. It is unsafe to drive yourself home. You must not drive or operate machinery or make major decisions for 12 hours after the EUS procedure. The sedative painkiller you are given before the procedure is very effective in reducing any discomfort. However, it may also affect your memory for some time afterwards. Even when the sedative appears to have worn off, you may find you are unable to recall details of your discussion with the Gastroenterologist. For this reason, have a relative or friend come with you if possible.

If after you have returned home you have any severe pain, bleeding, fever, or other symptoms that cause you concern, you should contact the Hospital, your General Practitioner or attend your nearest emergency department.

In most instances health funds accept Riverview Endoscopy accounts for direct no-gap billing. If not, you will be given an invoice for the doctor's services. Most health funds require you to pay a hospital excess which must be paid on the day. If biopsies are taken you will also receive an account from the Pathologist. Your sedation will be provided by a qualified Anaesthetist. Where possible, this is usually also billed as a no-gap service direct to your health fund.

EUS PREPARATION INSTRUCTIONS

Please read carefully

You must fast for 6 hours before the test. When fasting, have nothing to eat or drink. You can have a few sips of water if too thirsty until 2 hours before your appointment. You may take all your regular medications with sips of water unless instructed by your doctor to stop.

Morning Appointments

Fast from midnight.

Afternoon Appointments

Fast from 7 am.