About endoscopies

EGD

EGD (esophagogastroduodenoscopy) is a procedure performed by a gastroenterologist to diagnose and, in some cases, treat problems of the upper digestive system. The endoscope is a long, thin, flexible tube with a tiny video camera and light on the end. By adjusting the various controls on the endoscope, the gastroenterologist can safely guide the instrument to carefully examine the inside lining of the upper digestive system.

Upper endoscopy can be helpful in the evaluation or diagnosis of various problems including difficult or painful swallowing, pain in the stomach or abdomen, bleeding, ulcers and tumors. Instruments can be passed through the endoscope to obtain tissue samples, coagulate (stop) bleeding sites, dilate or stretch a narrowed area, or perform other treatments.

ERCP

With ERCP (endoscopic retrograde cholangio-pancreatography) a long, thin, flexible tube with a tiny video camera and light on the end is passed into the duodenum (the first portion of the small intestine) until the opening from the bile duct and pancreatic duct into the duodenum is identified. A small plastic tube (cannula) is then passed through the endoscope into this opening and directed into the bile duct and/or pancreatic duct. Contrast material (dye) is then injected and x-rays are taken to study the ducts.

EUS

EUS (upper endoscopic ultrasonography) allows your physician to examine the lining and walls of your upper and lower gastrointestinal tract. The upper tract is the esophagus, stomach, and duodenum; the lower tract includes your colon and rectum. EUS is also used to study internal organs that lie next to the gastrointestinal tract such as the gallbladder and pancreas. Your physician will use a thin, flexible tube called an endoscope that has a built-in-miniature ultrasound probe. Your doctor will pass the endoscope through your mouth or anus to the area to be examined. Your doctor will then use the ultrasound to use sound waves to create visual images of the digestive tract.

EUS provides your physician with more information than other imaging tests by providing detailed images of your digestive tract. Your doctor can use the EUS to diagnose certain conditions that may cause abdominal pain or abnormal weight loss. EUS is also used to evaluate known abnormalities including lumps or lesions which were detected at a prior endoscopy or were seen on x-ray tests such as CT scan.

Planning for other medical conditions

A registered nurse will call you prior to your procedure to go over your health history.

Please contact your prescribing provider if:

- If you are on Coumadin, Plavix, or another blood thinning medication. You may be placed on a different blood thinner until your procedure.
- If you are a diabetic and on any medications to control your blood sugar. Your primary care provider may instruct you to adjust your medication the day before and the day of your colonoscopy. Continue to monitor your blood sugar as usual.

Please let us know if you:

- Have a pacemaker or defibrillator. Please call our Endoscopy department before your procedure at 207.973.7446 to inform the nursing staff. If you have the device card, please bring it with you.
- Are allergic to any medications
- Are taking Versed or Fentanyl
- Have a history of a bleeding disorder
- Have frequent unexplained bleeding

Planning for your upper endoscopy

We want to make you as comfortable as possible during your endoscopic procedure. We know it can be difficult, and we want to make sure you are prepared to have the best results. Here is a helpful guide to get ready for your procedure.

You have been scheduled for an upper endoscopy with:

_____________________________________________

Physician name

There are circumstances in which your physician may change on the day of your procedure.

Date ________________________________________

Arrival time __________________________________

If you have any question or concerns, please call:

_____________________________________________

Scheduler’s name

Location for your upper endoscopy

Please arrive at Northern Light Endoscopy, located on the third floor of the Kagan Parking Garage at our State Street campus.

Northern Light Health complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, ethnicity, age, mental or physical ability or disability, political affiliation, religion, culture, socio-economic status, genetic information, veteran status, sexual orientation, sex, gender, gender identity or expression, or language.

French: ATTENTION: Si vous parlez français, des services d’aide linguistique vous sont proposés gratuitement.
Appelez le 1-888-986-6341 (ATS: 711)

Spanish: ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.
Llame al 1-888-986-6341 (TTY: 711)
Instructions and preparation

Please follow these instructions carefully to avoid having to reschedule your appointment.

Five (5) Days Before to Endoscopy

Stop Taking
- Ibuprofen, Advil or any other NSAID (non-steroidal anti-inflammatory drug)
- Fish Oil
- Pepto Bismol
- Iron supplements or multivitamins with iron
- Fiber supplements

You may remain on:
- 81 mg of aspirin.

The Day of Your Endoscopy

- Morning medications may be taken with a tiny sip of water
- Do not eat solid foods after midnight
- You may have clear liquids only, including black coffee, black tea, apple juice, and water
- Nothing by mouth four (4) hours prior

Plan ahead!
Who will your support person be?
Please arrange for someone to come in with you, receive discharge instructions, and sign you out. They will also need to drive you home. We highly recommend someone stay with you for 24 hours after your procedure.

Let’s get ready!
Did you call your insurance company? Please make sure you have prior authorization from your insurance company for your endoscopy.