

Having an Endoscopic Ultrasound

Information and advice for patients

Endoscopy

What is an Endoscopic Ultrasound (EUS)?

An EUS is a specialist test not available at all hospitals. It is a technique where a flexible lighted tube with additional equipment that produces ultrasound images to examine you in more detail, is passed into the mouth and down into the gullet and stomach. This procedure is usually performed under sedation. It is used to assess the chest, gullet, stomach and surrounding organs including the pancreas, lymph nodes or major blood vessels.

What are the benefits of this procedure?

An EUS allows a more detailed assessment of the tissue and surrounding organs. The ultrasound component allows the deeper structures to be seen rather than just the surface lining. Biopsies (tissue samples) can sometimes be taken during this procedure. It is not a painful procedure and takes 20 – 40 minutes, but if it takes longer you should not worry.

What can go wrong with the procedure?

As with any procedure, there are risks associated with the procedure and with the sedation given.

- There is a risk of perforation (making a hole or tear) in the oesophagus. This is a rare complication (1 in 1,000 cases) but may require an operation to repair the damage.
- There is a small risk of bleeding (1 in 1,000 cases), which may be serious enough for you to be admitted to hospital and treated with a blood transfusion.
- There is a slight risk of damage to your teeth crowns or bridgework. You should tell the nurse if you have either of these.
- Sedation can reduce the breathing rate, heart rate and blood pressure. You will be monitored throughout the procedure.

What are the side-effects of the procedure?

You may have bloating and abdominal discomfort for a few hours following the procedure as air is used to inflate your stomach. You may have a sore throat for up to 24 hours.

What are the alternatives to the procedure?

This is usually the best form of examination for your condition. Occasionally other forms of imaging such as CT and MRI may provide some of the information but if you wish to discuss what it would mean to decline this test, you would need to speak to your doctor.

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Information and advice for patients

Endoscopy

Preparing for an EUS

Read the following information carefully. If you have any queries, contact the Endoscopy unit.

- If you take diabetic tablets or insulin and did not receive a diabetic leaflet, please contact the unit. If you take tablets that thin the blood such as warfarin, dabigatran, rivaroxaban, clopidogrel/ Plavix, prasugrel, ticagrelor or apixaban and did not receive instructions on stopping these, please contact the healthcare professional who referred you for the procedure.
- If you are pregnant please contact the unit as soon as possible as you may need some further information.
- Please bring any medication you are currently taking (including sprays and inhalers) with you to your appointment.
- To allow a clear view, the stomach must be empty, so please follow these instructions:
 - Do not have anything to eat or drink for at least 4 hours before the procedure apart from regular medication with sips of clear fluids.
 - Do not drink milk for 4 hours before the procedure. This is because milk will line the stomach and not allow a clear view.

When you arrive at the hospital

- Please report to the reception desk in the Endoscopy department where a receptionist will check your details and direct you to the waiting area.
- Please do not bring any valuables with you.
- Please do not wear any nail varnish, lipstick or jewellery. Please note that tongue studs must be removed.
- A doctor will explain the procedure to you in detail to make sure you understand the benefits and possible risks as detailed in this leaflet.

The staff will want you to feel as relaxed as possible and they will be pleased to answer any questions that you might have about the procedure. Provided you are satisfied for the procedure to be performed, you will be asked to sign a consent form. This is to confirm your understanding and acceptance of the procedure. This form also asks for your consent to other procedures that may be necessary, including taking tissue samples (biopsies) that may be helpful in diagnosing your problem.

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Sedation and Local Anaesthetic

An endoscopic ultrasound is usually best carried out using both a numbing throat spray and sedation, but you may request not to have sedation if you wish. Sedation will be given through a small needle into the back of your hand or into your arm. Sedation will make you sleepy and you may not remember the procedure taking place.

The procedure

- You will be escorted into the procedure room where the endoscopist and the nurses will introduce themselves and you will have the opportunity to ask any final questions.
- You will be asked once more if you are satisfied and understand the information and explanation that has been given to you about the procedure.
- If you have any dentures you will be asked to remove them at this point. Any remaining teeth will be protected by a small plastic mouth guard, which will be inserted immediately before the procedure commences.
- Local anaesthetic throat spray may be sprayed onto the back of your throat whilst you are sitting up. It has a bitter taste and may feel hot on the back of the throat when you are asked to swallow it down.
- A small plastic cannula (tube) will be placed into a vein in your hand or arm to administer your sedation medication.
- The nurse looking after you will ask you to lie on your left side and will then place the oxygen monitoring probe on your finger. This measures the amount of oxygen in your blood and also your heart rate.
- The sedative will be given at this time and you will quickly become sleepy.
- Any saliva or other secretions produced during the procedure will be removed using a small suction tube, like the one used at the dentist.
- The endoscopist will introduce the endoscope into your mouth, down your gullet and into your stomach and then into your duodenum (part of your digestive system which connects your stomach to your small intestine). Your windpipe is deliberately avoided and your breathing will not be affected.
- During the procedure, samples may be taken and will be retained. Any photographs taken will be recorded in your notes.

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After the procedure

After the procedure, you will remain in the unit to rest for about an hour. It is essential that an adult accompanies you home by car or taxi, public transport is not suitable. **You cannot drive a car or ride a bicycle.** Please ask this relative or friend to ring the Endoscopy Unit on 0121 507 5318 approximately 2 – 3 hours after your appointment to check if you are ready.

Going home after you have received sedation

- When you arrive home, it is important to rest for the remainder of the day.
- **Someone should stay with you overnight.**
- It is advisable to have the next day off work.
- During the first 24 hours following sedation you must not:
 - Drink alcohol
 - Drive any vehicles (including riding a motorcycle or bicycle) it is illegal to drive under the influence of midazolam (a medication used for procedural sedation).
 - Take sleeping tablets
 - Operate any machinery or electrical items (including a cooker or kettle)
 - Sign any legally binding or important documents
 - Work at heights (including climbing ladders or onto chairs)

Contact Details

If you have any questions or concerns please contact:

Endoscopy unit 0121 507 5318

Monday - Friday 8am- 4pm

If you would like to suggest any amendments or improvements to this leaflet please contact the communications department on 0121 507 5303 or email: swb-tr.swbh-gm-patient-information@nhs.net



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