

PATIENT INFORMATION

GASTROSCOPY

ABOUT THE PROCEDURE

During a gastroscopy a thin, flexible camera is used to examine the oesophagus, stomach and duodenum (small bowel).

The test takes approximately 10 minutes to perform.

Common reasons to have a gastroscopy include the investigation of heartburn or reflux, upper abdominal pain, swallowing difficulties, anaemia, bleeding and to diagnose Coeliac Disease.

Biopsies or small samples of the lining of the oesophagus, stomach or duodenum may be taken during the gastroscopy to assist with diagnosis and exclude infections such as H. pylori.

COMPLICATIONS AND RISKS

Gastroscopy is a safe procedure with serious risks such as bleeding or perforation being described in less than 1 in 10 000 procedures.

COLONOSCOPY

ABOUT THE PROCEDURE

During a colonoscopy a thin, flexible camera is used to examine the colon (large bowel) and ileum (small bowel).

The test takes approximately 20 to 30 minutes to perform.

Common reasons to have a colonoscopy include the investigation of possible Crohns or Colitis, rectal bleeding, alteration in bowel habit, positive stool blood tests including national bowel cancer screening, anaemia and abdominal pain. You are also recommended to have a colonoscopy if you have a personal or family history of bowel cancer or polyps.

Bowel cancer usually arises from small growths in the colon called polyps.

If any polyps are detected during colonoscopy they will be removed.

Biopsies or small samples of the lining of the colon or ileum may be taken during the colonoscopy to assist with diagnosis.

COMPLICATIONS AND RISKS

Gastroscopy is a safe procedure with serious risks such as bleeding or perforation being described in less than 1 in 10 000 procedures.

INFORMATION FOR ALL PROCEDURES

MEDICATIONS

Please advise us if you are taking blood thinning medications as these usually need to be ceased for the procedure eg warfarin, clopidogrel, apixaban or rivoroxaban.

Please stop all iron supplements 1 week prior to the procedure.

ANAESTHETIC

As the procedure can be uncomfortable you will be given a light anaesthetic by the anaesthetist. This involves a small injection into the hand or arm. You will have little or no recollection of the test.

PRE-PROCEDURE CONSULTATION

You will meet Dr Smith and your anaesthetist prior to your procedure.

You will have the opportunity to discuss your symptoms, the procedure and the anaesthetic with your doctors.

PREPERATION FOR THE PROCEDURE

Make sure you carefully follow the instructions on the enclosed sheet.

Please ensure you have someone to take you into the hospital and to pick you up afterwards and stay with you overnight. You will not be allowed to drive after the anaesthetic.

FOLLOWING THE PROCEDURE

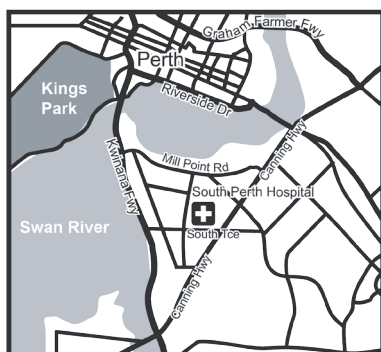
Following your procedure you will be given something to eat and drink.

Results and follow up will be explained to you and you will be given a written report for your own records. It is recommended you make a follow up appointment with your GP a week after your procedure to receive the results of any biopsies and to discuss ongoing management.

FOLLOWING THE PROCEDURE

If you have any concerns or further questions following your procedure please contact Dr Smith on (08) 6381 0343.

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