

Endoscopy (EGD) Appointment Information

Date: _____

Procedure Time: _____

Arrival Time: _____

If you need to reschedule, please call the office (210) 405-3410

Procedure Locations:

- **Methodist Surgery Center Landmark: 5510 Presidio Parkway, Suite 100 San Antonio, TX 78249 (210) 583-7500**
- **Stone Oak Methodist Hospital: 1139 E. Sonterra Blvd, San Antonio, TX 78258 (210)638-2000**
- **Northeast Baptist Hospital: 8811 Village Dr., San Antonio, TX 78217 (210)297-2000**
- **Theda Oaks Surgery Center: 19226 Stone Hue Suite 103, San Antonio, TX 78258 (210)268-0100**

General Instructions

- **NO** ALCOHOL, NO MARIJUANA, NO SMOKING 5 DAYS PRIOR TO PROCEDURE DATE.
- **NOTHING** by mouth (Foods, Drinks, Gum or mints) for 8 hours prior to procedure. Except for **BLOOD/THYROID** medication with a sip of water, enough to pass pills.
- **STOP** all PPIs 2 weeks prior to procedure (Omeprazole, Pantoprazole, Esomeprazole, etc.)
- Stop Aspirin and blood thinners 4 days before your procedure, such as:
 - Coumadin (Warfarin)
 - Plavix
 - Fish oil
 - Vitamin E
 - Iron supplements

Take your blood pressure/thyroid medication as you normally do.

Do NOT take diabetes pills in the morning of the procedure.

Only take 1/2 of your regular insulin dosage.

- Allow 2 ½ - 3 hours for the procedure
- **Bring a driver, you will not be allowed to drive home.**

You have been scheduled for an upper endoscopy. You will be provided with more information about this procedure, have your questions answered, and then be asked to provide your written consent to undergo the endoscopy.

Why am I having this test?

Your doctor has arranged this test for a look at your esophagus, stomach and duodenum to see if there are any abnormalities of the upper digestive tract.

What happens during the examination?

The doctor will use a small, lighted flexible tube thinner than most of the food you swallow to examine the lining of the upper digestive tract. We may numb your mouth and throat and use medication to sedate you. We do not obstruct breathing passages. We will make a special effort to keep you comfortable. In fact, most patients don't even remember the procedure.

Are there any possible complications?

EGD is safe and is associated with a very low risk. Complications can occur but are rare.

Possible complications include:

- Hemorrhage (bleeding)
- Perforation (tearing) of the esophagus and stomach.
- Pneumonia, or an adverse reaction to the sedative(s)

You must tell the nurses at the procedure center of any allergies or peculiar reactions you have had to medications, particularly Novocain and medicines that dentists use for numbing teeth. Also, any reactions to sedatives and pain killers. In very rare circumstances death could result from a complication. It should be emphasized that complications are extremely **RARE**. This is a routine procedure, and we are extremely careful.

After the procedure:

- Expect a mild sore throat lasting 1-2 days. You can use lozenges for relief
- Do not eat or drink for one hour (your throat will be numb, and we don't want anything to go down the wrong "pipe")
- Do not drive for 24 hours after the procedure.

Items to bring with you:

- Please bring a list of medications including dosage and frequency
- i.e Lisinopril 20mg daily
- Insurance Card
- Picture ID / ID Card
- Method of Payment (in case of co-pay)
- Warm socks
- You will need a driver - Patients who received anesthesia are only allowed to leave the facility in the company of a responsible adult.

Covid Precautions:

- When to reschedule:
- If you or anyone you have had contact with has had Covid within 14 days
- If you or anyone you have had contact with is pending the results of a Covid test • If you or anyone you have had contact with has had any symptoms of Covid
- i.e. - Fever (100* F), Cough, Muscle aches, Loss of taste / smell etc.

Day of Procedure:

- Only the patient will be allowed to wait in the waiting room
- We ask that the driver either stay in the car or provide a number to be reached at when the patient arrives in Recovery

GLP – 1 Agonists:

- Hold GLP-1 agonists on the DAY of the procedure/surgery for patients who take the medication DAILY.
- Hold GLP-1 agonists a WEEK prior to the procedure/surgery for patients who take the medication WEEKLY.
- On the day of the procedure, consider delaying the procedure if the patient is experiencing GI symptoms such as severe nausea, vomiting, bloating, or abdominal pain, and discussing the potential risk of regurgitation and aspiration with the proceduralist or surgeon and the patient.
 - On the day of the procedure, if the patient has no GI symptoms but the GLP-1 medications were not held, consider delaying the procedure or proceeding using full stomach precautions. The potential risk of regurgitation and aspiration of gastric contents should be discussed with the proceduralist or surgeon and the patient.

Below are the currently available GLP-1 receptor agonist listed by whether they are given daily or weekly:

- Daily- Rybelsus (semaglutide) Victoza (liraglutide) Saxenda (liraglutide) Byetta (exenatide) Adlyxin (Lixisenatide)
- Weekly - Ozempic (semaglutide) Wegovy (semaglutide) Trulicity (dulaglutide) Bydureon (exenatide)

Mounjaro (tirzepatide)