

Gastroenterology - Gastroscopy

Introduction

The COVID-19 pandemic has had a significant impact on the NHS ability to provide routine elective services. We recognise that patients are waiting longer than we would all like and it is not always possible to identify when treatment will take place. This document provides you with information on how you are able to support yourself while waiting to attend the hospital. The guidance has been written by clinicians who are responsible for your care.

When you are waiting for further treatment it can sometimes feel like a long wait. The information and advice here is aimed at helping you manage that wait so you arrive for your appointment in the best possible physical and mental health.

The NHS has limited resources which means that we are unable to treat you as quickly as we would like. Each healthcare provider has to consider the type of help you need, how quickly you need treatment, the best course of action to help you and when and where you can be seen.

The process of sorting patients based on their individual needs is called prioritisation. The system of prioritisation is applied consistently across the NHS to help us to decide the order in which patients receive their treatment. This is essential to ensure that we provide care based on need. The system means that care is delivered in the fairest way possible.

Once a referral has been made from primary care to secondary care, the specialist team reviews your case and will make a decision on the urgency of investigations and appointments that is appropriate for you based on the information provided by the referrer. .

Our Endoscopy Department sees patients at the Royal Bournemouth Hospital and Poole Hospital routinely six days a week. Our dedicated staff perform more than 23,000 procedures per year by clinicians from a variety of medical and surgical specialties. The unit at the Royal Bournemouth Hospital has five endoscopy rooms and an x-ray suite and the unit at Poole Hospital has three endoscopy rooms.

We provide the following services:

- Gastroscopy
- Flexible sigmoidoscopy
- Colonoscopy
- Endoscopic Retrograde Cholangiopancreatography (ERCP)
- Endoscopic Ultrasound (EUS)
- Enteroscopy

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- Video Capsule Endoscopy
- HALO radiofrequency ablation (for Barrett's oesophagus)

The Endoscopy Bookings Office will contact you directly to arrange an appointment and you will be provided with a written information booklet that details specific instructions relating to your procedure.

If you have any communication difficulties, require a translation service or have mobility difficulties or any concerns about your appointment please let the Endoscopy Bookings Office know in advance of your appointment and they will ensure that you have the support you require.

Please don't be a DNA!

A DNA is someone who Did Not Attend for a hospital appointment and did not advise us beforehand. Many appointments each year are wasted in this way. If you cannot attend, or need to rearrange your appointment, please contact the Endoscopy Bookings Office.

Further information –

Further information on endoscopy can be read on the NHS Choices website. Please also refer to this site for further information on other endoscopy providers in your area.

NHS Choices - Endoscopy

<https://www.nhs.uk/conditions/endoscopy/>

Guidance for Patients

Your Doctor has recommended a Gastroscopy.

A Gastroscopy is an examination of your oesophagus (gullet), stomach and the first part of the small intestines, (duodenum). It will be performed by using a long, flexible telescope (gastroscope) with a light source and camera built into the tip. This procedure will be carried out by a trained endoscopist. The gastroscope is passed through the mouth or through the nose into the oesophagus and beyond with the help of local anaesthetic. Many patients tolerate this very well with local anaesthetic throat spray alone, while others prefer to have light sedation.

Your doctor may have referred you for this procedure in order to investigate symptoms such as indigestion, reflux, difficulty swallowing, anaemia, vomiting, weight loss, or blood loss either through vomiting, or as black, tarry stools. Finding the cause for your symptoms thereby enables treatment and if necessary, to decide on further tests that may be required. You may also be required to have a gastroscopy as part of ongoing surveillance for Barrett's oesophagus or ulcers. During this procedure the endoscopist may take a biopsy (a small sample of tissue) for testing if necessary. The tissue is removed painlessly through the gastroscope using tiny forceps and sent off for examination.

The Endoscopy Department is very busy and sometimes appointments are delayed due to emergencies or unforeseen problems. Every effort will be made to see you punctually but it may not always be possible for you to be seen at precisely the time stated on your appointment letter. The procedure usually lasts between 5 and 10 minutes although it may take longer in some cases. You should expect to be in the hospital for 2-3 hours so that you can be admitted and recovered safely and it is advisable to bring a book

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or something to read to help you pass the time. Please remember, the time of your appointment is not the time you will have your test. It takes time to safely admit you and prepare you for your procedure. You may observe others being called before you who may have arrived after you, this is because we have several lists running at the same time and not everyone will be having the same procedure. Do not bring valuables or large quantities of money into the hospital as we cannot accept responsibility for them.

Gastroscopy can be slightly uncomfortable but not painful. The majority of patients do not require sedation and manage with a local anaesthetic sprayed onto the back of the throat or up the nose depending whether the gastroscope is one that goes through the mouth or through the nose. The spray makes it more comfortable to pass the gastroscope. We encourage you to avoid sedation if possible, the benefits of this are that you are able to leave the department as soon as you wish after the procedure, independently and are not inconvenienced by the restrictions associated with sedation. The admitting nurse will talk through the most suitable and safest option for you. The sedation we use is a form of conscious sedation.

If you choose to have sedation this will make you feel relaxed and drowsy but it is unlikely to send you to sleep. It will reduce your awareness of time and may make you forget the procedure itself. You should expect to be in the Hospital for 3-4 hours minimum. You must be supervised by an adult for 12 hours after the procedure and for 24 hours you must not drive any vehicle, work, operate heavy machinery, sign any legally binding document, drink alcohol or take sedative medication, or look after babies or young children.

What should I do if my health is deteriorating?

If your symptoms deteriorate please contact your GP who will then get in touch with us if required.

Urgent Health Advice

For urgent health advice about physical or mental health, when it's not an emergency, please call 111 from any landline or mobile phone. You can also visit www.nhs.uk. The NHS 111 service is available 24 hours a day, seven days a week.

Life Threatening Emergencies

For something life threatening – severe bleeding, breathing difficulties or chest pains – please dial 999.

Contact Us

Endoscopy Bookings Office:

Bournemouth site:

Telephone - 0300 019 4667 (lines are open Monday-Friday, 0830-1630)

Email - Endoscopy.Enquiries@uhd.nhs.uk

Poole site:

Telephone - 0300 019 2939 (lines are open Monday-Friday, 0830-1630)