



A guide to...

Having a Gastroscopy and Endoscopic Ultrasound (EUS)

Patient Information

How to contact us

Booking and interpreting queries – Please call the number on your appointment letter Clinical queries –Watford 01923 436095

Any other query – Please call Watford 01923 217530

If you need this leaflet in another language, large print, Braille or audio version, please call 01923 217187 or email westherts.pals@nhs.net









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If you are taking blood thinning medications such as warfarin, clopidogrel, ticagrelor, dabigatran, rivaroxaban or apixaban, please call the department on the number on your appointment letter to notify us.

What is a gastroscopy and endoscopic ultrasound (EUS)?

Gastroscopy is an investigation that allows us to look directly at your gullet (oesophagus), stomach and the upper part of the intestine (duodenum). A flexible camera is passed through your mouth, down the back of your throat, into your stomach. The camera has an ultrasound probe built in which allows the endoscopist (the person doing the endoscopic ultrasound) to scan beneath the lining of your gullet, stomach or duodenum at structures and organs underneath. The endoscopist may need to perform fine needle aspiration to remove cells or a deeper core biopsy to remove small pieces of tissue to help make a diagnosis.

Preparation

This investigation must be done on an empty stomach. If you have a morning appointment, you must not eat anything after midnight the night before but can have sips of water up to 6.30am on the morning of the investigation. If you have an afternoon appointment, you must not eat anything after 7am but can have water up to 11.30am. If you are taking diabetic medication, you can contact your GP or nurse specialist for advice. If you are taking blood thinning medications such as warfarin, clopidogrel, ticagrelor, dabigatran, rivaroxaban or apixaban, please inform us as these may have to be stopped prior to the procedure. Take all other medications as you would usually. Please make sure you bring with you a list of all medications you are currently taking.

What will happen?

When you arrive the doctor or nurse will explain the procedure and answer any questions you may have. You will be asked to sign the consent form, giving us your permission to have the procedure performed. You will be taken into the investigation room on a trolley and asked to lay in a comfortable position on your left-hand side.

Having sedation

As the test may take several minutes it is usual to give intravenous conscious sedation to help you feel more comfortable. Please note conscious sedation is not a general anaesthetic.

Sedation will be given to you through a small tube in a vein in your arm or hand. This will make you feel relaxed but not asleep. With this type of sedation, it will be necessary for you to stay in the unit for a while afterwards. It is essential that you arrange for a responsible person to escort you home after the test. Failure to make these arrangements may result in the investigation being cancelled. Because of the lingering effects of the drugs used it is important that, for the next 24 hours, you have someone to stay with you, you do not drive, return to work, operate machinery, sign any legal documents, or drink alcohol.

Afterwards

You will need to rest and be observed for a short while before going home. We will want you to have a drink before you leave the unit to check that you have no problems with your swallowing. If the endoscopist has administered local anaesthetic throat spray, you will need to wait a short while for the numbness to start wearing off before having a drink. For some time afterwards you may find you have a sore throat. This is quite normal and may be eased by drinking water.

When will I get the results of the procedure?

You will be given a copy of the report before you leave the department and the doctor or nurse will talk to you at the end of the procedure to explain their findings. If you have had samples sent to the laboratory the results will be reviewed by the Endoscopist and you will be contacted within two weeks if there is anything of concern.

Are there any risks?

A gastroscopy and endoscopic ultrasound is a very safe procedure but there are some risks associated with the test. Rarely, a small hole in the gullet, stomach or small intestine or bleeding, requiring a blood transfusion, can occur. The risk of this happening is 1 in every 1000 procedures performed. If a fine needle aspiration or deeper core biopsy is performed, the risk of perforation, introducing infection and causing bleeding is 1 in every 100 procedures and there is a much rarer risk of causing pancreatitis (pancreas inflammation) if the sample is taken from the pancreas gland. Very rarely, these complications can be life threatening. There is also a small risk that crowned or capped teeth can become damaged during the procedure. If you have a fine needle aspiration or deeper core biopsy you may need treatment with antibiotics. You should let your doctor know if you get a temperature, severe abdominal pain or feel unwell after the procedure. If you are worried about any of these risks, please speak to your doctor or a member of the team before you are due to have the procedure.

Are there any alternatives?

Your doctor has recommended a gastroscopy and ultrasound as it is the best way of diagnosing your problem.

What happens if I decide not to have a gastroscopy and EUS?

Your doctor may not be able to confirm the cause of the problem. If you decide not to have a gastroscopy and EUS you should discuss this carefully with your doctor.

Who can I contact if I have any questions?

Please do not hesitate to telephone the department on 01923 436095 for Watford General Hospital (8.00am– 6.00pm Monday to Friday).

After the investigation if you experience severe chest or tummy pain, swelling in the neck or shortness of breath please attend your nearest Accident and Emergency department, do not drive.

- Accident and Emergency at Watford on 01923 217 256
- Please note: there is NO Accident and Emergency at Hemel Hempstead or St Albans Hospitals.