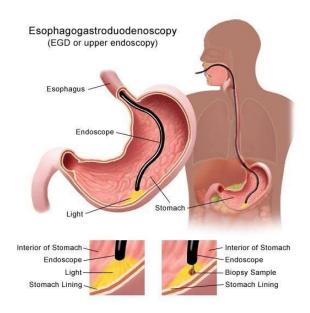
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What is an Esophago-Gastro-Duodenoscopy (EGD)?

This is a procedure that enables the physician to examine the lining of the patient's upper gastrointestinal (GI) tract, including the esophagus, stomach, and the first part of the small bowel (called the Duodenum). The physician will use a small, flexible tube that has a light and a camera. The tube enters through your child's mouth. Be assured that your child will be asleep during the procedure. Usually, during the procedure the physician will obtain samples of tissue from various areas, these are called biopsies. These are very small scratches to the tissue which may cause some bleeding. They do not cause any pain to your child.



Where is the procedure done?

This procedure is performed in an outpatient endoscopy procedure center

Who must attend?

A parent or legal guardian MUST be present during any IV sedated procedure. If a parent or legal guardian is unable to attend with the patient, the procedure MUST be rescheduled.

What can my child and I expect?

If your child is a female and has begun her menstrual cycle, she will need to collect a urine specimen for a pregnancy test.

When you arrive, your child will change out of his/her clothes. The nurse will start an IV (which is needed to give the sedation). You will be able to stay with your child until he/she falls asleep.

The procedure lasts approximately 15 minutes and when completed, the physician or one of the staff will come to get you from the waiting room to be with your child. At this time the physician will discuss any visual findings and the plan for your child until the biopsy results are available. Your child will be discharged when he/she is fully awake, able to keep some liquid down, and is feeling well. Your child may experience a sore throat after the procedure, pain at the IV site, nausea, or vomiting due to the sedatives, or pain in the

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stomach or chest for several hours due to retained air from the procedure. rarely these symptoms may last for 1-2 days. These symptoms are considered normal following this type of procedure.

How soon will I know the results?

After the procedure, the physician will discuss any visual findings with you. Pathology reports on your child's biopsies are usually available 7 to 10 business days after the procedure.

What are the possible complications?

Endoscopy is generally safe in a well-child. Any child with respiratory symptoms (thick drainage from the nose, a congested or junkie cough) will not undergo the procedure. It will be canceled and rescheduled for a later date when your child is well. Complications of the procedure can occur but are unusual. Possible complications are an allergic reaction to sedatives, breathing problems, bleeding, or perforation (tear) of the upper GI tract. The likelihood of these risks is small (less than 5%). If you have more questions please ask your physician.

What preparation does my child need?

Eating or drinking restrictions are necessary prior to the procedure. Your child not should eat any solid food 8 hours before the procedure. Your child may have clear liquids until 2 hours before the procedure, and nothing thereafter. You need to alert the physician if your child requires antibiotics before having dental work, since he/she may need antibiotics before this procedure also. The physician should discuss any adjustments in any of your child's usual medications before the procedure.

Are there any restrictions after the procedure?

Not usually. Children can resume their normal diet unless you are instructed otherwise. Any other restrictions will be given to you on your child's discharge instruction sheet.

What else should I know?

This procedure may or may not treat the actual problem; most of the time it is done to identify a problem. If a problem is found either during the procedure or after biopsy results are back, treatment will be directed by your physician.

When should I call the GI Office?

- If you have any questions after you get home
- If you have not received your biopsy results within 7—10 business days after the procedure
- If your child has symptoms listed on the discharge instruction sheet and if they do not resolve in 1-2 days.
- If your child has severe breathing difficulty after the procedure please call us and take them to the nearest emergency department

CANCELLATION:

- 1. For any reason if you want to cancel the procedure please notify our office immediately; this way we can accommodate other patients' needs.
- 2. Notify us immediately if your child has fever, cough, difficulty breathing, or other respiratory symptoms, within 48 hours before the procedure we may have to cancel and reschedule the procedure until respiratory symptoms resolve.

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Clear Liquid Diet:

A clear liquid diet helps maintain adequate hydration, provides some important electrolytes, such as sodium and potassium, and gives some energy at a time when a full diet isn't possible or recommended. The following items can be considered:

- Water
- Pop (non-caffeinated sodas)
- Fruit Juice you can see through (Apple, White Grape) without pulp
- Kool-Aid
- Strained lemonade or fruit punch
- Pedialyte
- Pediasure Sidekick Clear
- Gatorade, G-2, Powerade, and other similar sports drinks
- Popsicles
- Broth/Bouillon (without noodles)
- Jell-O
- Plain gelatin
- Honey
- Tea or coffee without milk or cream

Locations: Your procedure will be scheduled at one of the following centers:		
Date:	_Arrival Time:	Procedure Time:
1. Wake Endos 2601 Lake Dr, Ste 20 Raleigh, NC 27607 (919) 783-4888		

Dr. Sachin Kunde, MD, MPH

2. UNC Children's Hospital

101 Manning Dr Pediatric Endoscopy Unit, 2nd Floor Chapel Hill, NC 27514 (984) 974-100

3. WakeMed Hospital

3024 New Bern Ave Andrews Center, Ste 101 Raleigh, NC 27610 (919) 350-5318