

The ROYAL MARSDEN

NHS Foundation Trust

Having an Endoscopic Ultrasound (EUS) examination and Fine Needle Aspiration (FNA) biopsy

Endoscopy Suite

Patient Information



NHS

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Introduction

Your doctor has recommended that you have an Endoscopic Ultrasound (EUS) and a Fine Needle Aspiration (FNA) biopsy to investigate your medical condition. This test can be used to help make a diagnosis or to see if treatment is working. If you prefer not to be investigated, we advise you to discuss the implications of not having the test with your doctor. You may have already had a number of tests to investigate your problem. EUS and FNA is another way of getting more information.

This leaflet has been written by staff working in the Endoscopy Suite at The Royal Marsden NHS Foundation Trust. It tells you about the examination and what to expect. We hope you find it useful. If, after you have read it you have any questions or concerns, please ring us on our direct line: 020 7811 8328/ 020 7811 8320.

Appointments for an endoscopy are in high demand. If you are unable to attend your appointment, please contact the Endoscopy Suite as soon as possible so that your appointment may be offered to another patient.

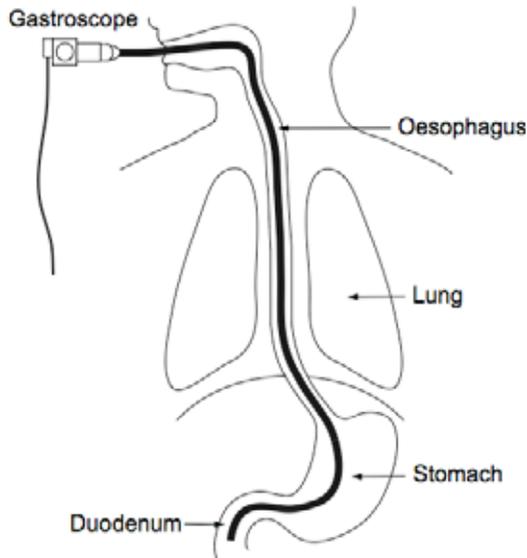
When you come to the Endoscopy Suite (ground floor, Granard House Wing) please talk to us about any worries and ask any questions you may have.

Your procedure time in Endoscopy is approximate as some procedures may take longer than expected and emergency procedures will take priority.

What is an EUS and FNA biopsy?

EUS is a test which allows the doctor to look directly at the gastrointestinal tract (gut) using a long flexible tube (an endoscope), about the thickness of your index finger, with a bright light at its tip. Ultrasound waves are used to look at the gut wall and internal organs such as the gall bladder and

pancreas. The endoscope is carefully passed through your mouth and down your oesophagus (food pipe) into your stomach (see illustration).



The doctor will then turn on the ultrasound machine to produce sound waves that create images of your gastrointestinal tract that are transmitted to a monitor, so that the doctor can look for any abnormalities. If an abnormal area is identified within the internal organs, the consultant can take a sample using a very fine needle which can be passed into it. It is a painless procedure and is called fine needle aspiration (FNA).

What preparation will I need for my EUS and FNA procedure?

To allow the consultant to see clearly, your stomach must be empty. It is therefore important that you have nothing to eat for at least **six hours** before the test. Unless you have been told otherwise, you may drink water but nothing else up to **three hours** before the test and nothing until after the procedure.

What about taking my medication before the procedure?

It is important to continue taking the following medication **unless you are advised to stop by the telephone nurse during your telephone pre-assessment.**

- esomeprazole (Nexium), omeprazole (Losec), lansoprazole (Zoton), pantoprazole (Protium), ranitidine (Zantac), cimetidine (Tagamet)

If you are on anti-coagulants (such as warfarin, tinzaparin or clopidogrel), are diabetic or have an artificial heart valve you will be given instructions by the nurse during your pre-assessment. The nurse will also advise you which medication you can take on the day of your procedure.

If you feel unable to carry out any of the instructions, please contact the Endoscopy Suite.

What should I bring on the day?

If you are diabetic, please bring your insulin or tablets with you. If you use reading glasses, please bring them with you so that you can read the consent form and any other paperwork. You are welcome to bring a book or other reading material. Please do not bring any valuables with you.

When you arrive

When you arrive at the hospital, please report to Endoscopy Reception (ground floor Granard House Wing). If you need wheelchair access, please enter the hospital by the Wallace Wing entrance on Dovehouse Street. On arrival you will be asked to go for a blood test in outpatients.

Please note:

The time of your procedure will be dependant on when we receive the results of your blood tests. When you have had your

blood test and return to the Endoscopy unit, the nurse will take you to the admission area.

Your escort/relative can wait in the reception area or have refreshments from the café located by the Wallace Wing entrance.

During your admission to the endoscopy unit, a nurse will ask you several questions about your health and what medication you are taking. The nurse will also take your observations: blood pressure and pulse. You will also be asked to change into a gown.

You will also see the doctor and anaesthetist before the procedure. This is the opportunity for you to ask questions and to talk about your procedure before you sign the consent form. It is important that you understand what is going to happen.

Your EUS and FNA procedure

Your procedure will be carried out in the endoscopy procedure room. We will give you sedation before the procedure, to make you feel sleepy and relaxed. We will make you comfortable on a trolley, lying on your left hand side. To keep your mouth slightly open, a plastic mouthpiece will be put gently between your teeth. The sedation is given through a small needle placed into a vein on the back of your hand. You will not remember the procedure taking place. The anaesthetist will stay with you throughout the test, monitoring your blood pressure, pulse and oxygen level in your blood. You will be given oxygen during the procedure, usually through nasal prongs that fit just inside your nostrils.

The doctor will carefully pass the endoscope through your mouth and into your stomach. This should not cause you any discomfort, nor will it interfere with your breathing at any time. During this time some air and then water will be passed down the tube to expand your stomach and allow the doctor a clearer

view. If you get a lot of saliva in your mouth, the nurse will clear it using a small suction tube. When the examination is finished, the tube is removed quickly and easily. During the procedure the doctor may take FNA samples (biopsies), photographs or video of your gastrointestinal tract, even if it all looks normal. It may take up to 90 minutes to carefully examine all areas of your gastrointestinal tract.

What are the benefits and risks?

The procedure will help us to investigate your symptoms and it may help us to treat you.

EUS and FNA biopsy is generally safe, but all procedures have some risks, which you should discuss with your doctor. These are the more common risks:

- A sore throat which should wear off within 24 hours.
- Complications such as bleeding or damaging the gastrointestinal tract are very rare, for example approximately one in 3,000 risk of bleeding or tearing (perforation) of the gut. This risk is increased to one in 100 if biopsies are taken when infection and inflammation may also occur. An operation is likely to be needed for perforation and this is likely to be on the same day.
- Other rare complications include inflammation of the lungs (aspiration pneumonia) and a reaction to the intravenous sedative drugs or local anaesthetic spray.
- Upper gastrointestinal endoscopies may involve a slight risk to crowned teeth or dental bridgework. These risks occur in less than one in 100 procedures.
- There is no known risk associated with the ultrasound part of the procedure.

What happens afterwards?

- As you have had sedation, you will need to rest in the recovery area until you are fully awake (usually an hour and

a half). Your blood pressure and pulse will be monitored.

- An adult must be available to escort you home as the sedation impairs your reflexes and judgement.
- You will be given a drink of water and other refreshments when you are fully awake.
- Your length of stay on the Endoscopy Suite will usually be between three and four hours. Very occasionally some patients will be asked to stay in overnight for observation.

When will I know the results?

In many cases your doctor will be able to tell you the results of the test as soon as you are awake. As you will have had sedation it is a good idea to ask for your escort or relative to be present when the doctor speaks to you because the sedation can make you forget what is discussed.

A copy of your gastroscopy report will be given to you before you leave the endoscopy suite and another copy will be sent to your GP or specialist who referred you. However, if a biopsy was taken for examination under the microscope, these results may take five days to process. A copy of the biopsy results will be sent to your GP or specialist who referred you.

Going home after your procedure

As you will have had sedation, it is essential for an escort to accompany you home and stay with you for at least 6 hours.

Please note: your procedure will be cancelled if you do not have an escort as we cannot arrange for an escort to take you home.

Sedation causes drowsiness, and even if you feel that you are wide awake, your reactions could still be affected. You may find it difficult to concentrate on what you are doing and you may forget things that you have been told.

For at least 24 hours after your procedure, we would advise you, not to

- drive or ride a bicycle
- operate machinery
- look after young children alone
- take sedatives
- drink alcohol
- sign legal papers

You will be given some written information to remind you of this before you leave the endoscopy suite.

Follow-up appointments

You will have a follow up appointment with the GP or specialist (who referred you for the procedure). At this appointment, please ask for the details of any biopsy results or further investigations.

Your medication

We will talk to you before you go home about your medication. It may change, or stay the same, but we will discuss it with you after the procedure.

How you may feel after your procedure

You may have a sore throat. You may also feel a little bloated if some air has remained in your stomach. Both of these discomforts should pass within 24 hours. Throat lozenges may help with the sore throat. Walking around, warm drinks and peppermint water may also help you to pass wind. If pain is a problem, you may find it helpful to take a pain killer, such as paracetamol (according to manufacturer's instructions).

Complications

You should seek medical help immediately if you develop any of the following symptoms:

- Chest or shoulder pain

- If bowel motions turn black
- Persistent vomiting
- Shortness of breath
- Severe abdominal pain
- Worsening abdominal swelling
- Fever (above 38°C) and/or chills

Contact details in an emergency

Telephone your GP surgery or out of hours service (your GP 24 hours number), or else phone or go to your nearest A&E (Accident and Emergency) and then inform the Endoscopy Department at The Royal Marsden.

The Endoscopy Unit is open 8am - 5pm Monday to Friday:
020 7811 8328 or 0207 811 8320.

Outside of working hours you can call the main switchboard number: 020 7352 8171 and ask to speak to the Clinical Site Practitioner at Chelsea.

If you have any concerns or questions you can contact:

For routine advice, contact the Endoscopy Unit between 8am and 5pm (Monday to Friday) telephone: 020 7811 8328 or 0207 811 8320.

If we are unable to take your call, please leave a message. Answerphone messages will be collected twice daily, Monday to Friday and a member of the Endoscopy Unit will return your call.

Sources of information and support

If you would like this information leaflet in a different format, please contact the PALs office on **0800 783 7176** or talk to the clinical staff responsible for your care.

Notes and questions

References

This booklet is evidence based wherever the appropriate evidence is available, and represents an accumulation of expert opinion and professional interpretation.

Details of the references used in writing this booklet are available on request from:

The Royal Marsden Help Centre
Freephone: 0800 783 7176
Email: patientcentre@rmh.nhs.uk

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