

**ERCP - MORNING INSTRUCTIONS**

**PLEASE DO NOT EAT OR DRINK ANYTHING FROM MIDNIGHT THE NIGHT BEFORE**

**WHAT IS AN ERCP?**

* An **ERCP** is where the doctor examines the tubes (ducts) that drain your liver, pancreas and gallbladder
* The doctor will pass the endoscope, which is a flexible tube with a camera attached which allows the doctor to see the food pipe, stomach and the small bowel.
* A fine plastic tube will be passed inside the endoscope into the liver and/or pancreas. Contrast material (dye) will be injected and x-rays taken.
* The doctor may then remove stones, relieve duct blockage or take samples (biopsy).
* The procedure is performed under sedation or anaesthetic administered by a specialist Anaesthetist
* The ERCP is a safe procedure. Complications are rare and include:
* **Pancreatitis:** Less than 3-5 in 100 people will experience pancreatitis. Pancreatitis is inflammation of the pancreas which causes it to become swollen and painful. Most pancreatitis will settle within 2-3 days and may require a short stay in the hospital. Rarely, it may be more severe requiring a longer hospital stay.
* **Bleeding** occurs in less than 1 in 100 people. This usually will settle spontaneously or can be stopped at the time of the procedure. Rarely people require further intervention, such as a specialised x-ray procedure or surgery.
* **Infection**: Less than 1 in 200 people can develop an infection (especially if sample is taken from a cyst). The risk is reduced substantially with the administration of antibiotics.
* **Perforation:** Less than 1 in 1000 people will accidentally get a hole (perforation) to the bowel. If this was to occur, this may be repaired with small clips during the procedure, or rarely require an operation to repair it.

**THINGS TO CONSIDER:**

* ***Getting to the hospital & home***
  + On the day of your procedure you must **NOT DRIVE OR TRAVEL HOME ON ANY FORM OF PUBLIC TRANSPORT.** Please arrange for someone to drive you to and from your procedure.
* ***Fasting***
  + Please make sure that you have fasted (no food or fluids) according to the information above. Inadequate fasting increases the risk of complications and may cause your procedure to be delayed or rescheduled.
* ***Allergies***
  + Tell the nursing and medical staff if you are allergic or sensitive to any drug or other substance.
* ***Diabetic Patients***
  + Do **NOT** take your diabetic medications on the day of the procedure, but bring them with you. If you are taking **INSULIN**, please let us know before your procedure so we can provide instructions about managing your insulin on the day of the procedure.
* ***Blood Thinning Medications***
  + Please continue Aspirin. However, if you are taking any other blood thinners such as Clopidogrel (Plavix), Warfarin or Rivaroxaban (Xarelto), please discuss these with your GP as these medications need to be stopped prior to your procedure. In certain circumstances, such as with some coronary stents, they should not be stopped and you may need to see a Gastroenterologist in the rooms prior to your procedure to discuss this. If you are in doubt please contact the rooms prior to your procedure.
* ***Other Medications*** 
  + On the day of your procedure, please take all your usual other medications (e.g. blood pressure medications) with a sip of water only, at least 2 hours before you are due to attend the hospital.
* ***After the procedure:*** 
  + If you have any severe abdominal pain, vomiting, fever, or other symptoms that cause you concern, you should contact the Hospital where you had the procedure, the rooms (office hours only) or your Medical Practitioner. Patients with severe symptoms may need to attend their nearest emergency department.

If you have any queries please refer to our websit[e www.coastalgastro.com.au or](http://www.coastalgastro.com.au/) contact Coastal Gastro (08) 6389 0631