

**ENDOSCOPIC ULTRASOUND (EUS) - MORNING INSTRUCTIONS**

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

**WHAT IS AN EUS?**

* An **endoscopic ultrasound (EUS)** is where the doctor uses an instrument called an endoscope, which has an ultrasound probe at its tip to examine the wall layers (inside and outside) of the upper gastrointestinal tract .
* The procedure is performed under sedation or anaesthetic administered by a specialist Anaesthetist
* It also provides detailed pictures of **your ampulla, pancreas, bile ducts and organs in your chest**.
* The EUS allows a fine needle aspiration (FNA) of tissue to be taken inside or outside the wall of the gut. This needle is passed through the scope, and using the ultrasound as a guide, it is passed into the tissue of concern
* The EUS and FNA are safe procedures. Complications are rare and include:
* **Infection**: If a fine needle aspirate (FNA) biopsy is performed, less than 1 in 100 people can develop an infection (especially if sample is taken from a cyst). The risk is reduced substantially with the administration of antibiotics.
* **Bleeding** occurs in less than 1 in 200 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.
* **Pancreatitis:** Less than 1 in 200 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 for observation. Rarely, it may be more severe requiring a longer hospital stay.
* **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