

Having a Naso-Gastroscopy as an outpatient

Introduction

You have been advised to have a gastroscopy, which you may also have heard being called an endoscopy. A gastroscopy will help us to investigate the cause of your symptoms. We can offer this via the mouth (orally) or via the nose. This leaflet contains information about having a naso-gastroscopy (via the nose).

It is important that you read this leaflet before your appointment so that you understand this procedure and the preparation involved.

If you have diabetes and you are receiving treatment, please leave a message on the Medication Advice Line. The number is at the end of this leaflet. If you are using an insulin pump, we would like your BM to be 7mmol/L. Please call your local pump team if you need further advice.

If you are taking any medication that thins your blood **other than aspirin** (which you can continue to take) please contact the Medication Advice Line. **This is very important as your procedure may be delayed if you do not get advice.**

If you have broken your nose, had nasal surgery or have sinus concerns, then please call the department. This may mean that the nasal route is not suitable for you.

What is a Naso-gastroscopy?

Gastroscopy is an investigation to look directly at the lining of the oesophagus (gullet/food tube), the stomach and around the first bend of the small intestine (the duodenum). A naso-gastroscope is passed through one of your nostrils down into the back of your throat, into the oesophagus, then stomach and duodenum.

A naso-gastroscope is a long flexible tube, thinner than your little finger, and is a much smaller scope than a conventional gastroscopy. It has a bright light at the end (this is not hot), which is necessary to be able to see the lining of the stomach.

Reference No.

GHPI1673_07_23

Department

Endoscopy

Review due

July 2026

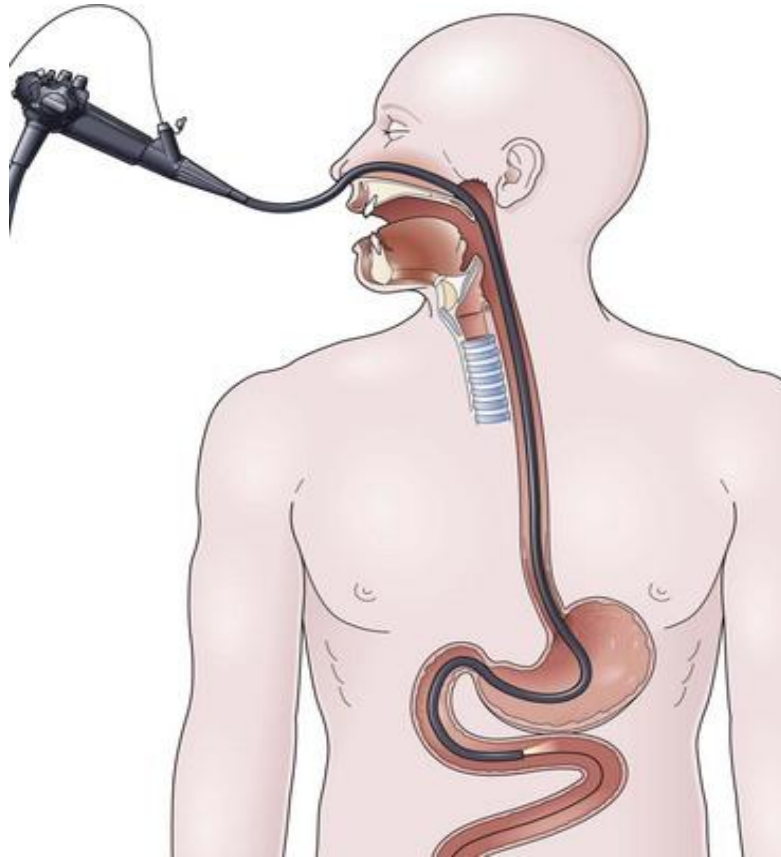
**Patient
Information**

Figure 1: Gastrointestinal tract

Pictures are transmitted on to a screen where any abnormalities can be seen. Unfortunately, you will not be able to see the screen as it will be behind you.

Biopsy

A biopsy is a small sample of tissue that may be taken from the lining of your gut or bowel for further examination in the laboratory. It is taken using sterile biopsy forceps through the scope. This will not be painful.

Alternative procedures

The main alternative to a gastroscopy is a barium meal X-ray. This can look at the stomach, but does not allow biopsies to be taken. Please note that an alternative procedure will not be available on the day.

**Patient
Information**

Preparing for your procedure

To allow a clear view during the procedure the stomach must be completely empty. You are therefore asked not to have anything to eat for at least 6 hours before your appointment time. You may drink water up to 2 hours before your appointment time.

The NHS, a major contributor of carbon emissions in the UK, has recently outlined ambitious targets to achieve net zero carbon emissions by 2040. The endoscopy team in Gloucestershire have carefully considered ways of adopting more sustainable care and waste reduction.

We would appreciate your support to help make our practice 'greener' by kindly bringing the following items along to your endoscopy appointment, so that single use alternatives are not required:

- Dressing gown
- Pair of slippers
- Clean underwear to change into after the procedure
- If applicable, your own denture pot, hearing aid case(s) and/or eye glasses case
- Water bottle
- Reusable cup with lid for a complimentary hot drink after the procedure
- Bag to place your clothes in during procedure

On admission

On arrival at the department, you will be seen by a nurse who will check your personal details.

You will be asked a series of questions about any operations or illness that you may have had or are presently suffering with. Please bring a list of all medications you are currently taking.

The nurse will also ask if you have any allergies or reactions to medicines or foods.

Sedation is not routinely needed or offered for this test because the naso-gastrosopes are much smaller and are generally well tolerated by patients. However, sedation can be given, if required.

Patient Information

If you are considering sedation, you will be asked to confirm that you have a responsible adult to escort you home when you are ready for discharge. You must also have a responsible adult with you at home for 24 hours following the procedure.

The test and possible complications will be explained so that you understand the procedure and any risks involved.

You will be asked to sign a consent form. By signing this form, you will have agreed to have the test performed and that you understand why it is needed. This does not take away your right to have the test stopped at any time.

For the time that you are in the department we want to provide a safe, supportive and pleasant environment. Please do not be afraid to ask if you have any worries or questions at this stage.

For this procedure you will not need to remove your clothes but ties may need to be loosened and shirts opened if tight at the neck.

Please remember that your appointment time is not the time you will have your procedure. There will be a wait between your admission and having your test done.

A nurse or doctor will escort you into the room where your procedure will take place. A nurse will stay with you throughout the test. You will be made comfortable on a patient trolley lying on your left side, with your knees slightly bent.

Anaesthetic throat spray

Nasal anaesthetic spray is a local anaesthetic spray used to numb the nasal passages and the throat.

As the naso-gastroscope is thinner than a normal gastroscope, most patients are happy for the procedure to be carried out without sedation. The nasal/throat spray has an effect very much like a dental injection and will reduce the feeling as the naso-gastroscope is passed through the nasal passage and throat during the test.

The benefit of having anaesthetic spray is that you are fully conscious (awake) and aware during the procedure. You will be able to go home unaccompanied almost straight away after the procedure.

Patient Information

You will also be allowed to drive after discharge and carry on with your normal routine.

The only restriction is that you must not have anything to eat or drink for about an hour after the procedure. This will allow for the sensation in your mouth and throat to return to normal.

It is strongly advised that your first drink after the procedure should be cold. This should be sipped slowly to make sure that you do not choke.

The procedure

In the examination room any dentures will be removed and local anaesthetic spray will be given via the nostrils to the back of your throat to numb it for the procedure.

You are able to talk throughout the procedure. The scope is inserted through either nostril. When it reaches the back of the throat you may be asked to swallow to help the tube go down into the stomach. This will not interfere with your breathing.

Some air will be passed through the instrument to inflate the stomach and allow a clearer view. You may feel wind like discomfort and belch some air up during the test. Please do not be embarrassed.

Any saliva in your mouth will be removed using a small suction tube. When the gastroscope is removed most of the remaining air in the stomach will be removed. The naso-gastroscopy will normally take about 10 minutes.

Complications

Abdominal discomfort

It is common to feel bloated and have some wind associated pains due to the air that is used to inflate your stomach during the procedure. This should settle after a few hours.

Sore nose and throat

It is very common to have some nasal soreness and a sore throat. You will be asked not to blow your nose for 24 hours. If you blow your nose there may be a few spots of blood or you may have a small nose bleed. If you had a biopsy taken you may cough or bring up a small amount of blood stained fluid. This is quite normal and will pass within 24 to 48 hours.

Patient Information

Complications:

If you experience any of the symptoms listed below, please contact the Endoscopy Unit for advice:

- Abdominal pain / severe tenderness (not caused by wind)
- A firm or swollen abdomen
- High temperature
- Vomiting
- A persisting and worsening nose-bleed that will not stop
- Pass blood red or black bowel movements

After the procedure

After the naso-gastroscopy is completed, the nurse caring for you during your test will take you from the endoscopy room to the recovery area.

Your pulse and blood pressure will be monitored as needed. This is called the recovery period. You may feel a little bloated or have some discomfort in your lower abdomen.

If you had throat spray you will be able to leave the department shortly after the test. You may experience sore nostrils and throat, and feel bloated due to the air in your stomach; both sensations are normal and will resolve quickly.

Normally you do not see the person who performed your procedure before going home.

Your nurse will tell you the results of the test before you are discharged.

If a sample (biopsy) has been taken, the result can take up to 5 weeks to process. You may be given an outpatient's appointment to return for review. Alternatively, the results will be forwarded to your GP and you will need to make an appointment to see him/her.

Please contact your GP or consultant directly for your test results as these are not disclosed to Endoscopy.

A report of the procedure will automatically be sent to your GP.

**Patient
Information**

Contact information

Appointment Enquiries

Cheltenham General Hospital

Tel: 0300 422 6899

Monday to Friday, 8:30am to 4:00pm

Gloucestershire Royal Hospital

Tel: 0300 422 6351

Monday to Friday, 8:30am to 4:00pm

Medication Advice Line (Answer Machine)

If you have any questions relating to your medication, please leave a message. A member of staff will return your call normally within 24 hours, week days only.

Cheltenham General Hospital

Tel: 0300 422 3370

Monday to Friday, 8:00am to 6:00pm

Gloucestershire Royal Hospital

Tel: 0300 422 8232

Monday to Friday, 8:00am to 6:00pm

Cirencester Hospital

Tel: 0300 421 6294

Monday to Friday, 8:00am to 4:00pm

Stroud General Hospital

Tel: 0300 421 8073

Monday to Friday, 8:00am to 6:00pm

Content reviewed: July 2023

Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85



<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>