

## GASTROSCOPY

### Patient Information

Informed Consent Form for Diagnostic Procedure  
or Therapeutic Procedure that Poses an Increased Risk to the Patient

PATIENT'S FULL NAME: .....

Personal Identification Number (PESEL): \_ \_ \_ \_ \_

MEDICAL HISTORY NUMBER: .....

Each medical procedure must be preceded by the informed consent of the patient, informed about the indications, contraindications, advantages and risks associated with the examination / procedure.

This information is intended to provide you with an overview of the aforementioned examination.

If you still have any doubts or questions, please ask your physician during the interview immediately before the examination.

### Indications:

Gastroscopy is an examination of the inside of the upper digestive tract (oesophagus, stomach and duodenum) using a flexible endoscope inserted through the mouth. This method allows tissue samples (biopsies) to be taken for additional tests (e.g. urease test for *Helicobacter Pylori*, histopathological examination). It is also possible to treat some diseases without the need for surgery, e.g. ligation of oesophageal varices, removal of polyps, arrest of haemorrhage.

### The basic indications for gastroscopy include:

- epigastric pain, heartburn, or eructation that persists or recurs despite treatment,
- chest pain after excluding cardiac causes
- difficulty swallowing,
- recurrent nausea and vomiting,
- suspected gastrointestinal bleeding
- unjustified weight loss, - diagnosis of anaemia
- as a follow-up examination in people diagnosed with chronic gastric/duodenal ulcer disease,
- follow-up after gastrointestinal bleeding / gastrointestinal perforation, - periodic follow-up in patients with Barrett's oesophagus, oesophageal varices, cirrhosis, and after gastric resection surgery.

**Preparation:**

Before gastroscopy, the patient should not eat anything for at least 6 h and not drink for at least 3 h. Due to that the examined section of the digestive tract will be free of food residues, which ensures a safe and accurate examination. This does not apply to medications taken on a permanent basis. They should be taken at the usual time with a small amount of still water. Each examination is preceded by an interview with the physician, during which you should inform about any medications you are taking, allergies or other test results. If you have had any endoscopic studies in the past, please bring the results with you. This will enable the comparison of the course of possible gastrointestinal diseases. For patient safety reasons, any removable dentures and glasses must be removed immediately prior to the examination.

**Course of the examination:**

The examination is performed in a left lateral recumbent position. Throughout the examination, the patient holds a special mouthpiece in his or her mouth through which the endoscope is inserted. A camera at the end of the camera makes it possible to see the inside of the organs being viewed and to document the images as photographs. If necessary, special instruments are inserted through the endoscope to take sections or perform other procedures (removal of polyps, "endoscopic tattoo" marking, control of bleeding site). If the examination is performed under local anaesthesia, immediately before the start the throat is anaesthetized with lignocaine solution. This results in the elimination of unpleasant reflexes. Throughout the examination, the patient should breathe deeply and calmly while refraining from swallowing saliva. Due to this, the examination is painless and the patient experiences only the sensation of bloating caused by the air blown into the stomach. During the examination under intravenous anaesthesia (analgo-sedation) the patient sleeps throughout the gastroscopy and does not feel any discomfort.

**After the examination:**

After gastroscopy, you may have some discomfort in your throat for a short time, which resolves spontaneously. The feeling of bloating caused by air in the stomach also resolves within a few hours. Once the anaesthesia has subsided, the patient can eat normally and return to normal activities. If the examination was performed under intravenous anaesthesia, the patient should not drive a car and/or operate machinery on that day and should be accompanied home

**Possible complications:**

Complications after gastroscopy are extremely rare (about 0.08%) and usually resolve spontaneously without requiring any treatment. These include: - bleeding from the site of the specimens taken, (0.1%) - minor mucosal damage - gastrointestinal perforation (less than 0.03%) Other complications include: - allergic reaction to medications, - cardiac symptoms (cardiac arrhythmia, coronary pain) - exacerbation of bronchial asthma. If severe abdominal pain persists several hours after the examination, report to the ED with the examination information sheet and notify the physician of the performed procedure.

IF THE INFORMATION PROVIDED ABOVE IS NOT SUFFICIENT FOR YOU, PLEASE ASK THE PHYSICIAN QUESTIONS BEFORE THE EXAMINATION.

STATEMENT I have fully understood the information on this form and the information provided to me during my interview with the physician. I was provided with unlimited opportunities to ask questions and they were all answered and explained to me in a way that I could understand and not be confused. After reviewing the contents of this form and an explanatory interview with the physician, all my requirements for information about the foreseeable consequences of performing the above-mentioned examination or the possible consequences of not performing it for my condition have been met. I am aware of the possible complications related to the examination.

(date and legible signature of the patient)

CONSENT TO THE EXAMINATION I hereby give my informed consent to have A GASTROSCOPY performed on me

\_\_\_\_\_ (date and legible signature of the patient) I give my consent to have all additional procedures which, according to the current medical knowledge, should be performed during the examination/procedure

\_\_\_\_\_ (date and legible signature of the patient) If for any reason you do not agree to this, please mark it in the attached questionnaire and inform the physician before the examination