

TNE Transnasal Endoscopy Endoscopy Unit

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For any queries, please contact the Endoscopy Booking Office on 01743 261064

Opening times

- 8.00am to 5.00pm Monday to Friday and
- 8.00am to 12.00pm Saturday and Sunday



Introduction

Your doctor has advised that you should have a test called a Transnasal Endoscopy.

This procedure is currently only undertaken at The Royal Shrewsbury Hospital. Your appointment may be at either site.

This leaflet tells you why you need the investigation and what to expect on the day and immediately afterwards. If you have any remaining concerns or queries when you have read this leaflet, please telephone the Endoscopy Booking Office.

What is a Transnasal Endoscopy?

A Transnasal Endoscopy is a test that allows the endoscopist (the person performing the test) to look into your Oesophagus (food pipe), stomach and the first part of the small bowel (duodenum).

The camera is a long flexible tube (thinner than a finger) with a bright light at the end. It is passed through your nose, down your oesophagus, into your stomach and duodenum.

During the test the endoscopist may need to obtain tiny pieces of tissue (biopsies) to help find the cause of your symptoms and/or assess the lining further.

All biopsies taken will be sent to the laboratories for analysis. Your endoscopist will advise you on how you will be informed of these results.

What are the risks and benefits of having a Transnasal Endoscopy?

The majority of these procedures are safe and uncomplicated. However, as with any procedure there is a small chance of complications or side effects. We have enclosed an example of our consent form for you to read at the end of this leaflet.

You may suffer from:

- A sore nose or throat
- Feel some wind in your stomach, this will settle in a few days

National studies have shown that serious complications are very rare. Such as:

- Drug reaction
- Bleeding
- Perforation
- Missed lesions (unable to see an abnormality)

Bleeding: occurs in less than 1 in 5000 cases

Perforation: (a hole or tear in the gullet or stomach) occurs in approximately 1 in 5000 cases.

• If a complication occurs it may be necessary to stay in hospital



What if I do not have a Transnasal Endoscopy?

An alternative test would be a Gastroscopy, this procedure is performed through the mouth.

Things you need to know before your test

If you need an interpreter, please contact the Endoscopy department before your appointment. They will make sure someone is there to interpret for you. Family members cannot do this.

If you are planning to fly or travel outside of the UK within two weeks after your test, please contact us.

You may need to attend the unit for a pre-assessment. If this is required, you will be contacted by a member of the team to arrange this.

How to prepare for your test

- **Do not eat or drink anything** in the 6 hours before your appointment.
- You can drink small sips of water only up to 2 hours before the test. This is to make sure your stomach is empty so we can have a clear view of your stomach.
- Please do not bring valuables to the hospital. We cannot accept any responsibility for the loss or damage to personal property during your time on these premises. Please remove all jewellery other than one wedding band.

Medicine

- If you are taking a Direct Oral Anticoagulant (DOAC) e.g. Rivaroxaban, Apixaban, Dabigatran and Edoxaban please do not take the morning dose on the day of your test. If you have been advised to stop this medicine for longer, then please follow the advice you have been given. If you have not been given any advice, contact the Endoscopy Booking Office.
- If you take **Aspirin**, this can be taken as normal before your test.
- If you are taking **Warfarin**, please make an appointment to get your INR checked at your GP surgery. This should be 2 to 3 days before the test. If your INR is too high, you may not be able to have the test. We decide on the day of your appointment. Please ensure you bring your current Warfarin record card.
- If you are a diabetic on tablets or Insulin, please contact the Endoscopy Booking Office as soon as possible to discuss your diabetic treatment before the test. We will ask you for the name of the medicine you are taking. Our pre-assessment team will contact you to give you advice. This will normally be a phone call.



• Keep taking all other medicines as normal (including blood pressure medicines). If you have any concerns, please contact the Endoscopy department.

Sedation

There is no option for sedation during a Transnasal Endoscopy.

What should I expect during my visit?

When you arrive at the Endoscopy Unit please report to reception and you will then be asked to take a seat in the waiting area. If you feel unwell at any time, please inform the receptionist.

A nurse will invite you into an assessment room to ask you questions about your health, explain about the procedure. You will have the chance to ask any questions that you may have.

Please bear in mind that your appointment time is not your procedure time and there may be a delay before you are taken through for your procedure. You may be in the department for up to 4 hours. The Endoscopy Unit sometimes has to deal with emergency cases which may cause delays to your appointment time.

Consent

The nurse will explain the procedure to you and discuss any potential risks related to the procedure. You will have the opportunity to ask any further questions. You will be asked to sign the consent form confirming you understand and agree to go ahead with the procedure. You can change your mind about having the procedure at any time.

On admission you will be required to drink pre-procedure anti-foaming drinks that have been prepared by the nurse. The purpose of these drinks is to clear any bubbles and mucous away from your oesophagus, stomach and small bowel, giving the Endoscopist improved views of the lining. Studies conducted have provided evidence of the benefits of these drinks in detecting abnormalities. However, the two medications used are not licensed for this purpose and you do have the option of declining the drink.

In the procedure room

Before the procedure is done you will be asked to remove your glasses (contact lenses can stay in) and to remove any false teeth (a denture pot is provided). Outer clothing i.e. coats and jumpers will need to be taken off.

Local anaesthetic spray

Prior to the procedure, two local anaesthetic sprays will be used to prepare you for the procedure. The first is used to numb the upper airway and expands the nostrils to help the endoscope pass through the nasal passage. The second spray is used to numb the back of your throat and has a slightly bitter taste. The effect lasts approximately 30 minutes.



Having the spray makes it more comfortable when the camera is passed down through your throat.

The Transnasal Endoscopy

The camera is gently inserted via your nose into your stomach. This is not painful and will not make breathing or swallowing difficult, but you may feel uncomfortable during the test. Careful continued slow breathing (through mouth or nose) may alleviate any discomfort. The nurse may need to clear saliva from your mouth using a small suction tube. If you gag you won't vomit as your stomach will be empty. The test takes approximately 10-15 minutes.

You may feel the camera move inside you and you may feel full of air and bloated. This is because air is blown into your stomach to ensure good views are seen.

Tissue samples (biopsies) may be taken painlessly during the Transnasal Endoscopy.

After the Transnasal Endoscopy

If you have had local anaesthetic throat spray, you will have to wait 1 hour before you can eat and drink.

When will I receive the results?

The nursing staff looking after you will speak to you prior to discharge. A report of the test will be given to yourself and a copy sent to your GP. Biopsy results will take a number of weeks to be available.

An aftercare sheet will be given to you which will contain all the relevant information.

Training

The Royal Shrewsbury and Princess Royal Hospitals are Regional Centre's for Endoscopy Training. Your examination may be performed by a trainee endoscopist. They are experienced healthcare professionals.

All trainees are under the direct supervision of an expert trainer until they are fully competent; the trainer is there to ensure your safety and comfort. With your help it will be possible to train the specialists of the future.

Clinical Photography

Clinical Photography is the visual recording of clinical conditions for use in your patient record. They are used by healthcare professionals to help monitor your clinical condition and are often used in the treatment planning process along with other tests such as x-rays, scans and blood tests, etc.

With your permission, clinical photographs can also be used for teaching Doctors, Nurses and other medical professionals, as well as research, audit and quality assurance purposes.



Example of Consent form

Please note this is a copy only and will be signed on the day of yo

ur	procedure			

Name of proposed procedure or course of treatment

Patient Agreement to Investigation or Treatment

Ple	ase	insert	patient	label
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Transnasal Endoscopy/gastroscopy

- Statement of health professional I have explained the procedure to the patient
 - **Reason for Procedure**

To help find the cause for your symptoms such as: persistent upper abdominal pain, indigestion, anaemia and difficulty in swallowing or follow-up of previous vomiting, findings.

The Intended Benefits

Diagnosis, treatment or surveillance of a variety of gastrointestinal disorders

- Serious or frequently occurring risks: -
 - Frequently occurring risks

Sore nose and throat Risk to teeth or dental work Abdominal discomfort due to bloating

Serious risks

Nose bleed (epistaxis) Perforation Bleeding Missed lesion Adverse reaction to nasal spray or local anaesthetic Death

- Extra procedures which may become necessary during the Endoscopy: -
 - Biopsy, Dilation, Therapeutic injections, Blood Transfusion, Other

> I have also discussed what the procedure is likely to involve, the benefits and risks of any available alternative treatments (including no treatment) and any particular concerns of this patient.

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➤ This procedure will involve: - □ Local anaesthesia



Patient Agreement to Investigation or Treatment: -

Transnasal Endoscopy/Gastroscopy

Please read this form carefully. If this treatment has been planned in advance, you should already have your own copy of page 1 which describes the risk and benefits of the proposed investigation. If not you will be offered a copy now.

Nam	e (PRINT)	confirm as follows:
	I understand that I am able to decide not to have this in	nvestigation.
	I have been provided with a patient information leaflet. understand it. I have had an opportunity to ask questio	
	I understand that there are risks associated with this in with me, I have had an opportunity to ask questions ab information into account in deciding to proceed.	•
	I understand that there are alternative options, includin the risks and benefits I wish to proceed with the investi	O O O
	I understand that the procedure will be undertaken by a under direct supervision but that no guarantee can other of that person.	
	I do not need any additional time to consider matters b	efore signing this form.
	I understand that any procedure in addition to those de out if it is necessary to save my life or prevent serious	•

Additional information is available from

If you are worried or have any questions, please do not hesitate to contact the Endoscopy Booking Office.

For further information, please refer to the link below:
 https://www.sath.nhs.uk/wards-services/endoscopy/

Other Sources of Information

NHS 111

A fast and easy way to get the right help, whatever the time. NHS 111 is available 24 hours a day, 365 days of the year.

Telephone: 111 (free from a landline or mobile)

Website: www.nhs.uk

Patient Advice and Liaison Service (PALS)

PALS will act on your behalf when handling patient and family concerns. They can also help you get support from other local or national agencies. PALS is a confidential service.

Royal Shrewsbury Hospital Tel: 01743 261000 Ext 1691 Princess Royal Hospital Tel: 01952 641222 Ext 4382

Disclaimer

This leaflet is provided for your information only. It must not be used as a substitute for professional medical care by a qualified doctor or other health care professional. Always check with your doctor if you have any concerns about your condition or treatment. This leaflet aims to direct you to quality websites: these are correct and active at the time of production. The Shrewsbury and Telford Hospital NHS Trust is not responsible or liable, directly or indirectly, for ANY form of damages whatsoever resulting from the use (or misuse) of information contained in this leaflet or found on web pages linked to by this leaflet.

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