

## Naval Medical Center Portsmouth Pediatric Gastroenterology General Procedure Instructions & Information

### Location: Pediatric ICU

- Your child's procedure will take place in the Pediatric ICU (PICU).
- The PICU is located on the 3rd floor of Building 2, (the same building as the Pediatric Clinic, but at the opposite end).
- You will be called by the PICU staff the evening prior to the procedure to confirm the appointment.
- If your child is female and is 10 years or older she will need to submit urine for a urine pregnancy test. This can be done no sooner than 24 hours prior to the procedure. This is the PICU's policy.
- Check-in with the PICU, 30 minutes prior to the procedure. **Please make allowances for road and highway traffic for your travel to the procedure.**
- If your child is sick with a fever, breathing difficulties, bad cold, vomiting or a diarrheal illness within 1-3 days of the procedure, please notify the pediatric GI clinic at 953-4529. If you need to call on a Sunday, please call 953-5008 and ask to be connected to the PICU. Then explain the situation to the PICU staff member. They will then contact the GI physician on call.
- Aspirin, Motrin, Ibuprofen, Advil, and other anti-inflammatory medications should be stopped one week prior to the procedure. Tylenol if needed is ok.
- Your child must not have anything by mouth for six hours prior to the procedure. This also includes: water, ice, gum, and hard candy.
- An intravenous line (i.v.) will be placed prior to the procedure to provide anesthesia medication. It will be removed at the end of the procedure.
- Parents will be allowed to stay with their child until he or she is asleep. You will then be asked to wait in the waiting room.
- When the procedure is complete, the doctor will meet you in the waiting room and discuss the outcome of the procedure with you.
- The analysis of any biopsies taken during the procedure generally takes up to seven days to return.
- A follow up appointment one week after the procedure to discuss results and further management should be made today.
- If your child has had any of the following, please discuss this with your doctor prior to the procedure:

- Difficulty with anesthesia in the past
- Recent steroid use for asthma
- Drug or food allergies especially EGG
- Heart murmur or prior heart surgery
- Loose teeth

## **Naval Medical Center Portsmouth, Pediatric Gastroenterology Upper Endoscopy (EGD) Information**

Upper endoscopy is an examination of the upper intestinal tract under general anesthesia. General anesthesia means that your child will be asleep during the entire exam with a tube in his or her upper airway to protect the airway and control breathing. An i.v. will be placed prior to the procedure to give the anesthesia medication. Your child will have his or her vital signs monitored during the entire procedure. An intensive care physician will be in the room the entire time, providing and monitoring the anesthesia. There will also be a nurse and respiratory therapy technician in the room. Your child will awaken from the procedure having little to no memory of the exam.

The endoscope is a flexible tube with a diameter less than that of an adult pinkie finger. This instrument transmits a live color image onto a television screen allowing the operator to navigate the esophagus, stomach and first portion of the small intestine (known as the duodenum). Biopsies are routinely obtained in pediatric endoscopy. Biopsies are small pieces of tissue that are removed from the lining of the upper GI tract by a grasping forceps. This process is painless both during and after the procedure. The biopsies are sent to the pathology lab for processing and application onto a microscope slide. They are examined under the microscope at 400X magnification. The processing and analysis takes 5-7 days.

- Your child can have nothing by mouth starting 6 hours before the procedure. As an example, for an 8 am procedure he or she can have nothing to eat or drink after 2 am. This includes: water, ice, gum, and hard candy.
- Daily medicines that are routinely given in the morning, should be discussed with you doctor well before the procedure.
- It is recommended that you make an appointment for 2 weeks after the procedure is completed in order to discuss the results in person and allow the doctor to re-evaluate your child. You should book this appt as soon as you know the procedure date.