

Esophageal manometry

Esophageal manometry is a test to examine the movement and pressures of your esophagus.

The test can be used to determine the cause for symptoms of difficulty swallowing or regurgitation. A common reason esophageal manometry is for planning surgery for treating gastroesophageal reflux disease (GERD).

During the test, a small catheter is placed through your nasal passage ie nostril and then swallowed into your esophagus with the help of drinking water. The catheter is about the width of a phone charger cord. The movement and pressures of your esophagus will be recorded as you drink small amounts of water. You will be able to swallow, talk and breathe without any difficulty during the test.

The EGD instructions below apply to this procedure.

PRE-PROCEDURE INSTRUCTIONS FOR UPPER GASTRO INTESTINAL ENDOSCOPY

Your appointment is scheduled for:

DAY: _____ **DATE:** _____

TIME: _____ **ARRIVE AT:** _____

Welcome to the Tufts Medical Center GI Endoscopy Unit. We would like to make your stay as pleasant and safe as possible. **Please read all instructions carefully** before your procedure as they are critical to your health and safety.

WHAT TO EXPECT

An upper endoscopy is an examination of the esophagus (swallowing tube), stomach, and duodenum (first part of the small intestine) under direct vision. The procedure is performed by passing a small flexible instrument (an endoscope) which has a light and a camera on the end through the mouth into the esophagus, stomach, and duodenum. An upper endoscopy is performed after giving you a medication to make you comfortable: most patients fall asleep and are not aware of the procedure.

GETTING HERE

We are located on the third floor in the Proger building.

Plan to spend about two to three hours in our unit for your procedure. We will do everything possible to avoid a delay, but emergencies may interrupt the schedule. Please arrive 30 minutes prior to the scheduled procedure time.

WHAT TO BRING

- Be sure you have an insurance referral, if required by your insurance company.
- Be prepared to pay any co-payment on the day of your procedure.
- Please bring the following items with you:
 - Photo ID
 - Loose, comfortable clothing
 - List of your current medications and allergies and your completed medical questionnaire
 - Insurance referral if required by your insurance company
 - Name, address, phone, and fax number of all the doctors you wish to receive a copy of the report.
 - Name and phone number of a responsible adult who will bring you home
 - **LEAVE ALL VALUABLES AT HOME. Only bring items that you need.**

Please arrange for an adult escort, 18 years or older, to take you home after the procedure. You will be receiving sedation and you should not drive until the next day. Your escort does not have to come with you when you check in but MUST meet you in the Endoscopy Unit on Proger 3 when you are ready to go home. You are still required to have an adult escort, 18 years or older, if you plan to take the T, taxi, ride sharing service, THE RIDE or are walking home. If you do not have an escort on the day of your procedure, your procedure will be CANCELLED and RESCHEDULED.

*If you are above 60 years of age and need an escort home, volunteer escorts may be available if scheduled 2 weeks in advance.

HOW TO PREPARE

FIVE DAYS before your procedure:

- Review and complete the medical questionnaire and medication list (see enclosed).
- If you have diabetes and take medication to control your blood sugar, contact your primary care physician or diabetes doctor for instruction on how to take your diabetes medication while preparing for this procedure.
- If you take any BLOOD THINNING MEDICATIONS OTHER THAN ASPIRIN (for example: Coumadin (Warfarin), Eliquis, Pradaxa, Xarelto, Plavix, Brillinta, Lovenox), contact your primary care physician or heart doctor for instructions on if and when to stop these medications prior to your procedure.
- ASPIRIN **should be continued** prior to the procedure.
- Continue to take your other daily medications

ONE DAY before your procedure:

- **PLEASE CONFIRM YOUR ARRANGEMENT FOR SOMEONE TO TAKE YOU HOME** (even if you are walking, taking public transportation, or a taxi).
- **You must NOT have anything to eat after midnight on the night before the procedure.**
- You may have clear liquids the night before the procedure which includes water, tea, black coffee, clear broth, apple juice, Gatorade, soda, and Jell-O.

For procedures scheduled AFTER NOON:

- If your procedure is scheduled in the **afternoon**, you may have a clear liquid breakfast as indicated above **UP TO FOUR HOURS BEFORE YOUR PROCEDURE.**

On the DAY OF your procedure:

- Take all of your usual medicines (except those indicated above) with a sip of water.
- **STOP CLEAR LIQUIDS 4 HOURS BEFORE YOUR ARRIVAL TIME. DO NOT EAT OR DRINK ANYTHING UNTIL AFTER YOUR PROCEDURE.**
- Please arrive 1 hour prior to the scheduled procedure time.
- Please leave all jewelry at home.

AFTER your procedure:

- You will be monitored in the Endoscopy Unit area for approximately one hour.
- You will receive diet and medication instructions after your procedure.
- You may return to work the day after the procedure.

**IF YOU ARE UNABLE TO KEEP YOUR APPOINTMENT, PLEASE CALL SCHEDULING AT (617) 636-0142
AT LEAST 48 HOURS AHEAD OF TIME TO RESCHEDULE.**

In addition to your enclosed Pre-Procedure Instructions, we also wanted to make you aware of a couple additional things to expect and be prepared for prior to your procedure. Again, please do not hesitate to contact us directly at 617-636-0142 if you have any questions or concerns about these items or any of your instructions enclosed.

- 1) Please be aware that all female patients between the ages of 12 and 50 who are receiving an anesthetic agent during their procedure will be offered a pre-procedure pregnancy test unless they meet certain exclusion criteria. Our nurse will discuss this with patients directly. Should a patient wish to waive this test they will be asked to sign a waiver form.
- 2) We encourage all patients to contact their insurance company in advance of any procedure to understand all potential financial obligations that might result from their visit. This includes understanding financial responsibility if the procedure is deemed “preventive” or “diagnostic.” Please note the coding of a preventive or diagnostic procedure is generally not determined till after the procedure is completed and it is best to have a conversation with your insurance company in advance.