INFORMED CONSENT FOR GASTROINTESTINAL ENDOSCOPY/PROCEDURE(S)

Explanation of Procedure

Direct visualization of the digestive tract with lighted instruments is referred to as gastrointestinal endoscopy. Your physician has advised you to have this type of examination. The following information is presented to help you understand the reasons for and the possible risks of these procedures. At the time of your examination, the lining of the digestive tract will be inspected thoroughly and possibly photographed. If an abnormality is seen or suspected, a small portion of tissue (biopsy) may be removed or the lining may be brushed. These samples are sent for laboratory study to determine if abnormal cells are present. Small growths (polyps), if seen, may be removed.

To keep you comfortable during the procedure, medication, defined as Deep Sedation, will be administered by an Anesthesiologist as defined in the anesthesia consent.

In the event an anesthesia provider is not utilized, your physician may administer medication defined as Conscious/Moderate Sedation.

Brief Description of Endoscopic Procedures

1. EGD (Esophagogastroduodenoscopy): Examination of the esophagus, stomach, and duodenum. Tissue samples (biopsies) may be removed if the physician deems necessary. If active bleeding is found, coagulation control by heat, medication, or mechanical clips may be performed.
2. Esophageal Dilation: Dilating tubes or balloons are used to stretch narrow areas of the esophagus.
3. EUS (Endoscopic Ultrasound): Ultrasound examination of the upper GI tract (through the mouth) or the lower GI tract (through the anus) using a special endoscopic or a probe through an ordinary endoscope. The ultrasound equipment allows the physician to inspect the lining of the GI tract below its surface as well as nearby organs such as the pancreas, liver and gallbladder systems. Biopsies into these deeper structures can be taken with a needle.
4. EIS (Endoscopic Injection Sclerotherapy): Injection of a chemical into varices (dilated varicose veins of the esophagus) to sclerose (harden) the veins to prevent further bleeding. Injection is done with a small needle probe through the endoscope.
5. Variceal Banding: The physician places a latex (rubber) band around the varices to reduce the flow of blood to the vein, thus preventing further bleeding.
6. Flexible Sigmodoscopy: Examination of the anus, rectum and left side of the colon, usually to a depth of 60 cm.
7. Colonoscopy: Examination of all or a portion of the colon. Older patients and those with extensive diverticulosis are more prone to complications. Polypectomy (removal of small growths called polyps) is performed, if necessary, by the use of a wire loop and electric current. If active bleeding is found, coagulation control by heat, medication, or mechanical clips may be performed.

Physician explaining procedure: <Performing MD>

Principal Risks and Complications of Gastrointestinal Endoscopy

Gastrointestinal endoscopy is generally a low risk procedure. However, all of the following complications are possible. Your physician will discuss their frequency with you, if you desire, with particular reference to your own indications for gastrointestinal endoscopy. YOU MUST ASK YOUR PHYSICIAN IF YOU HAVE ANY UNANSWERED QUESTIONS ABOUT YOUR TEST. ANY UNANSWERED QUESTIONS ABOUT YOUR TEST. I consent to the taking of any photographs during my procedure to assist in my care and for use in the advancement of medical education; for the discussion with you, if you desire, with particular reference to your own indications for gastrointestinal endoscopy. If you have any loose dental work, or easily removed bridges. Please inform your physician if you have any loose dental work, or easily removed bridges.

I consent to the taking of any photographs during my procedure to assist in my care and for use in the advancement of medical education; for the discussion with you, if you desire, with particular reference to your own indications for gastrointestinal endoscopy. Other diagnoses or therapeutic procedures, such as medical treatment, x-ray and surgery are available. Another option is to choose no diagnostic studies and/or treatment. Your physician will be happy to discuss these options with you.

I consent to the taking of any photographs during my procedure to assist in my care and for use in the advancement of medical education; for the discussion with you, if you desire, with particular reference to your own indications for gastrointestinal endoscopy. I consent to the taking of any photographs during my procedure to assist in my care and for use in the advancement of medical education; for the discussion with you, if you desire, with particular reference to your own indications for gastrointestinal endoscopy. I hereby authorize and permit <Performing MD>, and whomever he/she may designate as his/her assistant to perform the following: <Scheduled Procedures>

If any unforeseen condition arises during the procedure calling for, in the physician’s judgment, additional procedures, treatments, or operations, I authorize him/her to do whatever he/she deems advisable. I am aware that the practice of medicine and surgery is not an exact science. I acknowledge that no guarantees have been made to me concerning the result of this procedure. I hereby authorize and permit <Performing MD>, and whomever he/she may designate as his/her assistant to perform the following: <Scheduled Procedures>

☐ EGD  ☐ COLONOSCOPY  ☐ FLEX SIGMOIDOSCOPY  ☐ EUS  ☐ OTHER_________