

# Endoscopy Center of Inland Empire

## Patient Consent

### 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, you will receive medication defined as Moderate or Deep Sedation.

### Brief Description of Endoscopic Procedures

1. **EGD (Esophagogastroduodenoscopy):** Examination of the Esophagus, stomach, and duodenum. If active bleeding is found, coagulation by heat may be performed.
2. **Esophageal Dilation:** Dilating tubes or balloons are used to stretch narrow areas of the esophagus.
3. **Dilation:** Dilating tubes or balloons are used to stretch narrow areas of the esophagus or colon
4. **Variceal Banding:** Placement of a latex (rubber) band around the varices to reduce the flow of blood to the vein, thus preventing further bleeding.
5. **Flexible Sigmoidoscopy:** Examination of the anus, rectum and left side of the colon, usually to a depth of 60 cm.
6. **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. Colonoscopy, like any other tests, is not perfect and polyps or tumors can be missed. The accuracy of the test varies with the quality of the preparation and the size of any polyp or tumor that could be present. The smaller the polyp the more likely it is to be missed. Therefore, after your Colonoscopy, if you develop any recurring or new symptoms of the lower gastrointestinal tract, such as lower GI bleeding, you should bring them to the attention of your physician immediately.

### 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.**

**1. Perforation:** Passage of the instrument may result in an injury to the gastrointestinal tract wall with possible leakage of gastrointestinal contents into the body cavity. If this occurs, surgery to close the leak and/or drain the region is usually required.

**2. Bleeding:** Bleeding, if it occurs, is usually a complication of biopsy, Polypectomy or dilation. Management of this complication may consist only of careful observation, or may require transfusions, repeat endoscopy to stop the bleeding or possibly a surgical operation.

**3. Sedation/Medicine Reaction:** I understand that sedation involves additional risks and hazards but request the use of sedation for the relief and protection from pain during the procedure(s). I understand that certain complications may result from the use of sedation including respiratory problems or drug reactions. This procedure may be uncomfortable; we will make every attempt to sedate you. We however cannot guarantee that you will be pain free. Medications given may also irritate the vein in which they are injected. I acknowledge that I am not to drive a motor vehicle before tomorrow.

**4. Other Risks:** These include drug reactions, and complications from other diseases you may already have. Damage to teeth or dental work: This may occur when instruments are inserted through the mouth; this rarely occurs. Serious or fatal complications from endoscopy are extremely rare. You must inform your physician of all your allergic tendencies and medical problems.

**Alternatives to Gastrointestinal Endoscopy:** Although GI endoscopy is an extremely safe and effective means of examining the gastrointestinal tract, it is not 100 percent accurate in diagnosis. In a small percentage of cases, a failure of diagnosis or misdiagnosis may result. Other diagnostic 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.

**ADVANCED MEDICAL DIRECTIVES:** Please note that Advanced Medical Directives will not be honored within the Center and that in the event of a life threatening event, emergency medical procedures will be implemented; the patient stabilized and transferred to an acute health care facility where the decision to continue or terminate emergency measures can be made by the attending physician and family.

**OTHER CONSENTS:** In the event the physician or staff is exposed to my blood, body fluids or contaminated materials, I agree to allow testing that will determine the presence of HIV and Hepatitis. An accredited laboratory, at no cost to me, will perform all required laboratory tests.

**PHYSICIAN OWNERSHIP:** I am aware that Dr. Ardigo, Dr. Hurwitz and Dr. Dinh have an ownership interest in The Endoscopy Center. If I choose to go to another health care facility for this procedure, it will have no effect upon my relationship with my doctor.

I certify that I understand the information regarding gastrointestinal Endoscopy procedure(s). I have been fully informed of the risks and possible complications of my procedure(s). I hereby authorize and permit  Dr. G. Ardigo  Dr. L. Hurwitz  Dr. J. Dinh to perform the following:  ESOPHAGOGASTRODUODENOSCOPY with Possible biopsy, polypectomy, and/or dilation  COLONOSCOPY with possible biopsy, polypectomy  FLEXIBLE SIGMOIDOSCOPY with possible biopsy  EGD with Percutaneous Endoscopic Gastrostomy Tube Placement  Other, \_\_\_\_\_

If any unforeseen condition arises during this procedure calling for additional procedures in the physician's judgment, treatments or operations, I authorize him to do whatever he deems advisable. I am aware that the practice of medicine is not an exact science, and I acknowledge that no guarantees have been made to me concerning the result of this procedure.

**THIS IS A COPY OF THE CONSENT YOU WILL BE ASKED TO SIGN UPON ADMISSION TO THE ENDOSCOPY CENTER. IN THE EVENT YOU HAVE QUESTIONS PLEASE INFORM THE NURSE PRIOR TO SIGNING THE CONSENT.**