Endoscopic Ultrasound

Areas Examined & Treated	
Areas	• Esophagus • Stomach • Duodenum • Pancreas • Bile ducts • Gallbladder • Lymph nodes • Rectum, if lower EUS is performed

The Procedure	
Endoscopic Ultrasound	
Diagnostic	• This is an internal ultrasound examination using an endoscope • The endoscope has a small ultrasound device at the tip • It allows detailed imaging of the digestive tract and nearby organs • Biopsies may be taken using fine needle aspiration or fine needle biopsy
Therapeutic	• Various therapeutic maneuvers can be performed when needed • Fluid collections may be drained in selected cases • Treatment planning may be based on EUS findings

Phone: 832-632-4070 | Fax: 832-688-9496
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GastroDoxs
defenders of the digestive system

Before Your Procedure	
Schedule Your Procedure	
Appointment	Schedule your Endoscopic Ultrasound appointment with GastroDoxs by phone @ 832-632-4070 or in the office
Location	• A procedure location will be suggested based on your insurance & geographic area • Please refer to the locations page on our website
Insurance	Our team will obtain the required insurance prior authorization, if needed
Financial	GastroDoxs provider fees will be collected upon scheduling your procedure
Orders	Our team will send your procedure orders to the hospital or surgery center
Transportation	• Do not plan to drive after your procedure • You must have someone 18 years old or above to drive you home • No Uber | Lyft | Cab

Changes	To cancel or reschedule, call or text GastroDoxs @ 832-632-4070
Register with the Surgery Center	
General	• The procedure time slot that GastroDoxs has given to you is an approximate time slot. The final time slot will be determined and communicated by the Endoscopy/Surgery Center. Please arrive at the time the center has instructed you to do so. • A representative from the hospital or surgery center will call you to discuss the registration process, time & location of your procedure
Clinical	The pre-assessment testing team will discuss the following: • Medications • Clearance if necessary • Medical History • Blood thinner use • Diabetes history • Pre-anesthesia questionnaire • Surgical history

Financial	• Hospital, anesthesia & pathology fees are independent from GastroDoxs • The other fees not related to GastroDoxs are to be discussed directly with the other providers, hospital or surgery center • If you have not heard from the financial representative 24 hours before your procedure, call them at that time
Clearance	

Cardiac
Hematology
Neurology
Pulmonary
	• You may need a clearance if you have high risk conditions requiring clearance
	• You may need a follow-up with your Doctor or Provider before they can issue a clearance
	• Our team will send your Doctor or Provider a clearance request from our office
	• Once our team has your clearance on file, we will call you to schedule your procedure
	• You may need a clearance if you are on blood thinners or these medications
	  ○ Apixaban | Eliquis
	  ○ Clopidogrel | Plavix
	  ○ Dabigatran | Pradaxa
	  ○ Edoxaban | Savaysa
	  ○ Prasugrel | Effient
	  ○ Rivaroxaban | Xarelto
	  ○ Ticagrelor | Brilinta
	  ○ Warfarin | Coumadin & Jantoven

Medications	

1 Week Before	• Blood thinners may need special instructions
	• Hold > blood thinners only if instructed by your provider
	• Hold > iron tablets if instructed
	• Hold > multivitamins if instructed
	• Hold > GLP1 Agonist Medication:
	  ○ Exenatide (Byetta)
	  ○ Dulaglutide (Trulicity)
	  ○ Exenatide Extended Release (Bydureon BCise)
	  ○ Liraglutide (Victoza)
	  ○ Lixisenatide (Adlyxin)
	  ○ Semaglutide (Ozempic, Wegovy, Rybelsus)
	  ○ Tirzepatide (Mounjaro)

1 Day Before	• Hold > Oral Diabetes Medication, if instructed • Insulin > Take 1/2 the dose, if instructed by the pre-assessment team
Procedure Day	• Blood Pressure Medication > as instructed by the pre-assessment team • Insulin > Hold, unless instructed otherwise • Others > Hold, unless instructed otherwise

Other	• Continue to take your medications unless specified below • Blood thinners will require a clearance on file before scheduling when needed • The pre-assessment team (PAT) will review your medications & may make other recommendations also
Diet Instructions	
2 Weeks Before	
Foods	No change unless instructed by your provider
Liquids	Drink plenty of water
1 Week Before	
Foods	• No change for most upper EUS procedures • If lower EUS is planned, bowel preparation may be required • Follow the facility instructions carefully

Liquids	Drink plenty of water
1 Day Before	
Foods	• For upper EUS, stop all food after 12am - midnight unless instructed otherwise • For lower EUS, follow bowel preparation instructions if provided • Clear liquid diet may be required for lower EUS
Liquids	• Drink plenty of water until the allowed cutoff time • No alcohol • Stop all liquids after 12am - midnight unless instructed otherwise
Procedure Day	
Procedure Day	• No food or liquids on the procedure day unless instructed otherwise • Blood Pressure Medication > as instructed by the pre-assessment team • Insulin > Hold unless instructed otherwise • Others > Hold unless instructed otherwise

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Bowel Preparation Instructions	
Bowel Preparation Instructions	Upper EUS - bowel preparation is usually not required • Lower EUS - bowel preparation may be required • The facility will provide specific bowel prep instructions • Follow all timing instructions exactly • Clear liquids may be required the day before • Do not eat solid food once bowel prep has started

Procedure Day	
Diet	No food or liquids on the procedure day unless instructed otherwise
Arrival	• Please ensure you arrive 1-1.5 hours before your procedure • You will check in at registration when you arrive

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Pre-Procedure	• The clinical team will go through the clinical assessment as well as risks & benefits of the procedure • The anesthesia team will explain all aspects before the procedure • Consent forms for the procedure will need to be signed
Sedation	• An intravenous line will be inserted into your arm to administer medication • You will be given intravenous sedation medication during the procedure
Position	• For upper EUS, you will usually lie on your left side • For lower EUS, you will be positioned as instructed by the clinical team
Visualization	• The endoscope is gently passed into the digestive tract • Ultrasound images are created from inside the body • The provider examines the digestive wall and nearby organs • Images help evaluate deeper layers and nearby structures

Post-Procedure	• It will take approximately 30 minutes to 1 hour to recover from the anesthesia • The clinical team will observe for throat pain, abdominal pain, vomiting, dizziness, blood pressure issues, heart rate issue, fever, or breathing issues • If you are doing well & have woken up from anesthesia, you will likely be discharged to go home 1 hour after the procedure
Diagnostic	• If diagnostic tissue samples or fluid samples are required, they may be obtained through the endoscope during the procedure • Fine needle aspiration or fine needle biopsy may be performed when needed
Therapeutic	• If intervention is required, it may be done during the procedure • Fluid drainage or other advanced EUS-guided treatment may be performed only when appropriate
Pathologist	• Biopsies are tissue samples that are reviewed by a Pathologist under the microscope • The Pathologist will determine the nature of the tissue samples

Follow-Up	• Our providers will review the report in detail • The findings will be reviewed with you in detail upon follow-up

After Your Procedure	
Recovery	• You will be under observation for 30 minutes to monitor for any symptoms • You will be awake within 30 minutes but may still be groggy for 12-24 hours • Do not plan to drive the remainder of the day after your procedure
Transportation	• Do not plan to drive after your procedure • You must have someone 18 years old or above to drive you home • No Uber | Lyft | Cab

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Symptoms	Normal post procedure symptoms: • Mild bloating or gas • Mild sore throat after upper EUS • Mild abdominal discomfort • Grogginess from sedation • Slight bowel habit change after lower EUS Abnormal post procedure symptoms • Fever > 100 • Severe abdominal pain or chest pain • Trouble breathing or swallowing • Persistent vomiting or vomiting blood • Black tarry stool or heavy rectal bleeding • Any other severe or unusual symptoms • Please call 911 & go to the nearest emergency room
Appointment	Ensure that you have a follow-up 2-3 weeks after the procedure
Results	• Treatment recommendations will be given • Your results will be discussed in detail
Questions	Call or text GastroDoxs @ 832-632-4070