EUS (Endoscopic Ultrasound) of the Upper GI Tract: Preparation Instructions

What is the purpose of an EUS?

An **endoscopic ultrasound (EUS)** allows your doctor to look at the wall of your gut and the inside of some organs near your digestive tract. For this procedure, the doctor inserts a thin tube called an **endoscope** through your mouth, which then travels down into the stomach and first part of the intestine. In some cases, they may insert the endoscope through the rectum. The end of this tube has a small ultrasound probe that allows your doctor to see through the gut wall and find any abnormal tissues. If needed, your doctor can also take a sample of tissue with a needle biopsy.

Planning for your EUS (endoscopic ultrasound)

- ☐ You must have a driver with you at the procedure.
 - You must have a licensed driver who is **18 years or older** with you at your EUS appointment. If you do not have a driver with you at check in, we will reschedule your appointment.
 - Your entire procedure may take 3-4 hours to complete. Please tell your driver that they must stay at the appointment during your entire visit.
- ☐ Please leave all jewelry and personal items at home.
 - If you bring jewelry to your appointment, we may have to ask you to remove it.
 - Please do not wear contact lenses.
- ☐ If you have diabetes, you must contact your doctor.

•	People with diabetes have special diet and medication instructions.
	Call the doctor who ordered your procedure for your special diet and
	medication instructions.

☐ Watch the video describing the risks and benefits of an El
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- You can watch the video online at: bit.ly/MM-EUSVideo
- ☐ If you need to cancel or reschedule your appointment, please call us as soon as possible at **(734) 936-9250** or toll-free at (877) 758-2626.

What are my instructions for preparing for my EUS?

The timeline table below will help you figure out the days of the week for your prep. First, figure out what day of the week your appointment is. Then highlight or circle the correct row to see your other prep days.

• If you reschedule your appointment, you must redo the timeline table to match your new date.

My appointment is:	
	(Date, day, and time)

Timeline table:

My appointment is on:	7 days before is:	4 days before is:	3 days before is:
Monday	Monday	Thursday	Friday
Tuesday	Tuesday	Friday	Saturday
Wednesday	Wednesday	Saturday	Sunday
Thursday	Thursday	Sunday	Monday
Friday	Friday	Monday	Tuesday
Saturday	Saturday	Tuesday	Wednesday

Start your prep instructions as soon as you wake up on each day. Follow the instructions below carefully to ensure a successful procedure.

7 days before			
your EUS			

Day:							
(Fill in	the	day	accord	ding to	the	timeline	table)

- If you take aspirin, do not stop taking your aspirin. If you take NSAIDs, such as Advil®, Motrin®, Celebrex®, or ibuprofen, you may continue to take them as usual.
- If you take a blood thinner such as Plavix®, Pradaxa®, Clopidogrel®, Coumadin®, warfarin, Effient®, Prasugrel®, or Lovenox® and you do not have instructions for how to manage them before the procedure, ask the doctor who ordered your EUS. If you are unsure if you are taking blood thinners, contact your doctor.
- Stop taking phentermine (Adipex-P®, Lomaira™, Fastin®, Phentercot®) and phentermine and topiramate (Qsymia®). These are weight loss medications.
- If you take semaglutide (Ozempic[®], Wegovy[®]), dulaglutide (Trulicity[®]) or tirzepatide (Mounjaro[®]) once a week, stop taking it a week before your procedure.

4 days (96	hours)	before
your EUS		

Day:					
(Fill in	the day a	according to	the	timeline	table)

- 96 hours before your procedure, stop taking the following diabetic/weight loss medications: ertugliflozin (Steglatro®), ertugliflozin and metformin (Segluromet™), and ertugliflozin and sitagliptin (Steglujan®).
 - If you do not stop taking these medications exactly 96 hours before your EUS, your procedure may need to be cancelled and rescheduled.

3 days	(72	hours)	before
your EU	S		

Day:					
(Fill in	the day	according	to the	timeline	table)

- 72 hours before your procedure, stop taking the following diabetic/weight loss medications: bexagliflozin (Brenzavvy®), empagliflozin (Jardiance®), dapagliflozin (Farxiga®), canagliflozin (Invokana®), dapagliflozin and saxagliptin (Qtern®), dapagliflozin and metformin (Xigduo® XR), canagliflozin and metformin (Invokamet®, Invokamet® XR), empagliflozin and metformin (Synjardy®, Synjardy® XR), and empagliflozin and linagliptin (Glyxambi®).
 - If you do not stop taking these medications exactly 72 hours before your EUS, your procedure may need to be cancelled and rescheduled.

• Starting 8 hours before your appointment, don't eat any solid foods.

You may continue to have clear liquids until 2 hours before your appointment. Look at the table below to check which liquids are allowed on a clear liquid diet.

You may drink these liquids:	Do not drink these liquids:
• Water	Any red or purple liquids
• Gatorade®, Pedialyte®, or Powerade®	• Alcohol
• Coffee or tea (without milk, cream,	• Milk, cream, or non-dairy
or non-dairy creamer)	creamer
Carbonated or non-carbonated soda	Juice with pulp
Fruit-flavored drinks	Any liquid you cannot see
Apple juice, white cranberry juice, or	through

You may drink these liquids:	Do not drink these liquids:
white grape juice	• Broth
• Jell-O (gelatin) or popsicles	• Hard candy

- If you take semaglutide (Rybelsus®) or liraglutide (Saxenda®) every day, do not take it on the day of your procedure.
- You may take all your morning medicines (except for oral diabetes medicine) as usual with a small amount of water **up to 4 hours before your appointment time** (unless you have been told otherwise). If you take diabetes medications, follow your doctor's instructions.
- **2 hours before your procedure,** stop chewing gum, stop smoking, and stop drinking all liquids.

When should I call the call center?

If you have been sick and have had any of the following symptoms within 48 hours of your appointment, please call the call center at (734) 936-9250:

- Fever greater than 100.6° Fahrenheit
- Productive cough (your cough brings up a thick fluid)
- Diarrhea or vomiting (that is not related to taking the bowel prep)

If you have questions about your prep and your EUS is scheduled for the following day, call (734) 936-9250 or toll-free (877) 758-2626. After business hours, on weekends, or on holidays, call the paging operator at (734) 936-6267 and ask to speak with the GI doctor on call.

→ Turn the page to learn about the benefits, risks, and alternatives for an EUS.



What are the Benefits, Risks, and Alternatives for an EUS?

Before starting the procedure, a member of our team will ask you to sign a consent form. By signing this form, you are agreeing that we have given you information and you understand the procedure, its benefits and risks, and the alternatives (other options) for an EUS. Read this handout or watch the video at: bit.ly/MM-EUSVideo to understand your informed consent.

What are the benefits of an EUS?

With an EUS, we can diagnose different conditions affecting the esophagus, stomach, liver, gall bladder, bile duct, lymph nodes, rectum, and pancreas. The doctor can take samples of tissues located deeper than what we can access with the standard upper endoscopy (EGD).

What are the risks of an EUS?

Like any medical procedure, EUS has possible risks and complications. These are quite rare (occurring in about 1 in 2000 patients). They include:

- A reaction to the sedating medication, including breathing or heart problems
- A tear or a hole, called a **perforation**, in the bowel

There are more risks when a needle biopsy is also done during the EUS:

- Pancreatitis when the needle is inserted into the pancreas (occurs in 2 out of 100, or 2%, of people)
- Bleeding (occurs in 1-2 out of 100, or 1-2%, of people)
- Infection (occurs in 1 out of 100, or 1%, of people)

Risks are higher in people taking steroids or anti-coagulation medications (blood thinners), or in people that have certain serious diseases.

What are the alternatives to an EUS?

The only alternatives to EUS are other imaging procedures, such as CT or MRI scans taken from outside the body. If you need a biopsy, it would be an image-guided biopsy in Interventional Radiology, which would include a puncture through your skin.

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