Preparation for Balloon-Assisted Upper Endoscopy

What is the purpose of a Balloon-Assisted Upper Endoscopy?
This procedure allows us to carefully inspect your small intestine, which can help diagnosis and treat many conditions that affect the small intestine.

Planning for the procedure
- **You must have a driver** who is 18 years or older present at check in and discharge. If you do not have a driver with you at check in, we will need to reschedule your appointment. This person must remain in the unit during your entire visit so that they are available as soon as you are ready to be discharged. You will not be discharged unless this person is in the unit. Because your judgment may be impaired after this procedure, you will not be released to take public transportation, a taxicab, or even walk home without another responsible adult present to accompany you.
- The entire procedure appointment may take at least 3 to 4 hours to complete. Please advise your driver that they must remain in the unit 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 not received a bowel prep, call the Endoscopy Call Center at 734-936-9250 or toll-free 877-758-2626.
- If you have diabetes, ask your health care provider for diet and medicine instructions.
- If you must cancel or reschedule your appointment, please call the Endoscopy Call Center as soon as possible at 734-936-9250 or toll-free at 877-758-2626.
What supplies do I need to prepare in advance?

- Fill your prescription for PEG/Electrolyte-Generic, NuLYTELY, GoLYTELY, or CoLyte at your local pharmacy.
- **Additional clear liquids include:** water, apple juice, white grape juice, black coffee, tea, lemon/lime Kool-Aid Jell-O, soda pop (colas, 7-UP, Sprite), lemon/lime Jell-O.
- **Do not drink** red, orange, blue, or purple liquids, including Jell-O.

7 days before your procedure balloon-assisted upper endoscopy:

- If you take aspirin or 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®, ask your health care provider for specific instructions.
- Stop taking iron supplements: ferrous sulfate or polysaccharide iron complex.
- Stop taking Phentermine (Adipex-P, Lomira, Fastin, Phentercot) Phentermine+ topiramate (Qsymia). This is a weight loss medication.

1 day before your balloon-assisted upper endoscopy:

- **Stop eating solid food.** Clear liquids are acceptable to drink.

<table>
<thead>
<tr>
<th>Clear Liquids - Allowed:</th>
<th>Non-Clear Liquids – Not Allowed:</th>
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<tbody>
<tr>
<td>Gatorade, Pedialyte or Powerade</td>
<td>Red or purple items of any kind</td>
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<tr>
<td>Coffee or tea (no milk or non-dairy creamer)</td>
<td>Alcohol</td>
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<tr>
<td>Carbonated and non-carbonated soft drinks</td>
<td>Milk or non-dairy creamers</td>
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<tr>
<td>Kool-Aid or other fruit-flavored drinks</td>
<td>Juice with pulp</td>
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<tr>
<td>Apple juice, white cranberry, or white grape juice</td>
<td>Hard candy</td>
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<tr>
<td>Jell-O (gelatin) or popsicles</td>
<td>Any liquid you cannot see through</td>
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<td>Broth</td>
<td>Broth</td>
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</tbody>
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● Begin a clear liquid diet. Drink at least 8 glasses of water during the day to avoid dehydration. See above for a list of liquids and drinks that are allowed on a clear liquid diet.

● **By 7 pm,** drink one 8 oz. glass of PEG/Electrolyte-Generic, NuLYTELY, GoLYTELY, or CoLyte solution and continue drinking one 8 oz. glass every 15 minutes over the next 2 hours until the 2 liters (64 oz.) of the prep solution are gone.

● You may drink as many glasses of clear liquids as you like during the afternoon and evening on the day before the procedure (see examples above). Remain close to a bathroom because drinking this prep will give you diarrhea, usually within an hour of starting. The goal is for your stools to be clear or light yellow water.

### The day of your balloon-assisted upper endoscopy (starting at 12 am midnight):

● No solid foods, broth, or Jell-O

### The morning of your balloon-assisted upper endoscopy:

- **2 hours before the procedure:**
  - Stop chewing gum.
  - Stop drinking all clear liquids.

- You may take all your morning medicines (except for oral diabetes medicine) as usual with 4 oz. of water up to 4 hours before your procedure.

### When should I call the call center?

If you have been ill 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
- Productive cough (where your cough is producing phlegm)
- Diarrhea
- Vomiting (not related to taking the bowel prep)
What are the Benefits, Risks, and Alternatives for Balloon-Assisted Upper Endoscopy?

Before starting the procedure, a member of our team will ask you to sign an informed consent indicating that you understand the procedure, its benefits and risks, and the alternatives for Balloon-Assisted Upper Endoscopy. Read this handout or view the video at: [https://tinyurl.com/2kkwanfp](https://tinyurl.com/2kkwanfp) understand your informed consent.

What are the benefits of a Balloon-Assisted Upper Endoscopy?
The endoscopy allows for a deep inspection of the small intestine to diagnose or treat many conditions including:

- Sources of intestinal bleeding
- Ulcers
- Inflammation such as Crohn’s disease
- Small Bowel Polyps
- Narrowing of the small bowel
- Celiac Disease
- Retrieval of foreign objects

What are the risks of a Balloon-Assisted Upper Endoscopy?
The risks of having a balloon-assisted endoscopy are low but may include:

- Reaction to the sedation medication, including breathing or heart problems
- Bleeding, which can occur in less than 1 in 100 people
- Perforation, meaning a tear or hole in the bowel, which can occur in less than 1 in 100 people
- Infection, which occurs in less than 1 in 100 people
• Aspiration, where the contents of the stomach get into the lungs, which may lead to a lung infection called pneumonia. This occurs in less than 1 in 100 people.
• Pancreatitis, which is inflammation of the pancreas. This happens very rarely.
• Blood transfusion or surgery may be needed to treat the conditions above, but this is rare.

Is there anything that increases my risk?
• Risks are higher if you are taking steroids or blood thinners, or if you have certain serious diseases such as heart failure or severe lung disease.
• Risks may also be higher when the procedure involves removing or expanding tissue.

What are the alternatives to a Balloon-Assisted Upper Endoscopy?
• Surgery, which is more invasive
• Other imaging tests such as x-rays or CT scans