

**What is the purpose of an Endoscopic Mucosal Resection (EMR)?**

This type of endoscopy is performed to remove abnormal, precancerous, and early cancerous growths or lesions from the gastrointestinal (GI) tract. The GI tract includes the esophagus, stomach, small intestine, large intestine, and rectum.

**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 will need to remain in the facility for the duration of the procedure.
- **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, ask your health care provider for diet and medicine instructions.
- If you must cancel or reschedule your appointment, please call the Medical Procedures Unit Call Center as soon as possible at 734-936-9250 or toll-free 877-758-2626.

## **What are the instructions for taking medication and preparing for my EMR?**

Follow the instructions included below carefully to ensure a successful procedure.

### **7 days before your EMR:**

- 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 Phentermine (Adipex-P, Lomira, Fastin, Phentercot) Phentermine + topiramate (Qsymia). This is a weight loss medication.

### **1 day before your EMR:**

You may follow your normal diet the day before the procedure.

### **The day of your EMR:**

**Stop eating all solid foods 8 hours before your procedure.** Clear liquids are okay to drink.

<b>Clear Liquids – Allowed:</b>	<b>Non-Clear Liquids – Not Allowed:</b>
<ul style="list-style-type: none"><li>• Gatorade, Pedialyte or Powerade</li><li>• Coffee or tea (no milk or non-dairy creamer)</li><li>• Carbonated and non-carbonated soft drinks</li><li>• Kool-Aid or other fruit-flavored drinks</li><li>• Apple, white cranberry, or white grape juice</li><li>• Jell-O (gelatin) or popsicles</li></ul>	<ul style="list-style-type: none"><li>• Chicken, beef, or vegetable broth</li><li>• Red or purple items of any kind</li><li>• Alcohol</li><li>• Milk or non-dairy creamers</li><li>• Juice with pulp</li><li>• Hard candy</li><li>• Any liquid you cannot see through</li></ul>

- You may take all your morning medicines (except for oral diabetes pills) as usual with 4 oz. of water up to 4 hours before your procedure.
- If you take oral diabetes medicine (pills): **do not** take the medicine the morning of your test.

### **2 hours before your EMR:**

- Stop chewing gum
- Stop drinking all clear liquids

Bring a list of all your current medicines with you, including any over-the-counter medicines.

### **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)

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

## What are the Benefits, Risks, and Alternatives for an EMR?

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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 an EMR. Read this handout or view the video at: <https://tinyurl.com/mrdc3bec> to understand your informed consent.

### What are the benefits of an EMR?

This procedure allows the gastroenterologist to remove abnormal tissue without surgery or incisions through the skin. In most cases, an EMR is performed with admission to the hospital. People generally recover quickly and resume a normal diet either the same day or within a few days. For many people, this procedure helps them avoid surgery.

### What are the risks of an EMR?

An EMR is considered a safe procedure. The risks are low but may include:

- Reaction to the sedation medication, including breathing or heart problems.
- Bleeding, which can occur in less than 3 to 5 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.
- When the EMR is being performed in the esophagus, there is a risk that your esophagus may narrow during the healing phase. This could make it

difficult for you to swallow. This occurs in 3 to 8 out of 100 people. It sometimes requires another procedure called an esophageal dilation to relieve the narrowing.

- Blood transfusion or surgery may be needed to treat the conditions above, but this 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.

### **What are the alternatives to an EMR?**

In most cases, the only alternative to an EMR is surgery, which carries with it more risk.

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