Endoscopy: Preparing your Child

An endoscopy is a way to look inside the body using a thin, flexible tube with a camera and light on the end. In an endoscopy, the tube goes down the throat (esophagus). This test is done by a gastroenterologist (a doctor who specializes in stomach problems). It is done to diagnose and, in some cases, treat problems with the upper digestive system. The upper digestive system includes the esophagus (food tube), stomach and the duodenum (beginning of the small bowel).

The doctor looks at pictures taken from the camera on a monitor. These pictures give a clear view of the upper digestive system.

In many cases the doctor will take biopsies from these areas. Biopsies are tiny samples of tissue that are looked at under the microscope by a pathologist. A pathologist is a doctor who looks at tissue to see if there are any diseases. Your child will not have pain from the biopsies.

To Learn More
• Ask your child’s nurse or doctor or call the clinic where your child usually receives their GI (gastrointestinal) care.
• If your child is sick on the day of the procedure, call 206-987-2045.
• For questions about the time and date of this procedure call the GI procedure scheduler at 206-987-2521, choose option 2.
• seattlechildrens.org

Free Interpreter Services
• In the hospital, ask your nurse.
• From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.
What can we expect on the day of the endoscopy?

1. Park
This procedure is done in the Surgery Center at Children’s main hospital. To get to this area, park in the Ocean parking garage and check in at the main registration desk on level 6. This is a day procedure. You should plan to be at the hospital for most of the day.

2. Check in
After checking in, a nurse will take your child into an exam room. Your child will change into a hospital gown. They can keep their underwear and pants on. The nurse will take your child’s temperature, heart rate, and blood pressure and orient you and your child to the GI procedure area.

3. Talk with the anesthesia doctor
The anesthesiologist will speak with you about your child’s health history and examine your child. They will explain the type of anesthesia recommended to keep your child comfortable and asleep during the procedure.

Most children are under general anesthesia, where they are completely asleep, for the procedure. A few children will have lighter sedation so that they aren’t fully asleep.

4. Begin the procedure
Before the test your child will have several monitors attached to them:

- Electrodes (sticker like patches) placed on the chest to check heart rate and breathing.
- A small probe taped to the toe or finger to watch the oxygen level during the procedure.
- A blood pressure cuff on the arm or leg.

In most cases, you may hold your child or sit next to them while they go to sleep. After your child is asleep, you will be shown to the waiting room while your child goes into the GI procedure room. This is a comfortable, child-friendly room.

The procedure takes about 30 minutes including the time it takes to get your child ready in the room. After the procedure your child will go to the recovery room. Your child will be in recovery room for about 30 to 60 minutes. As soon as they are awake, they will be brought to you in a Phase II recovery room.

Your child will be given clear liquids and watched for about 1 hour. When your child is fully awake and able to keep liquids down you will be able to go home.

How soon will I know the test results?

Your child’s gastroenterologist will meet with you right after the procedure to discuss the findings.

Most likely, you will be asked to return for an appointment in 2 weeks to make a new plan of care based on your child’s symptoms and results of the biopsies.
Preparation Instructions

Taking medicine before the procedure

- For the 7 days before and after your child’s endoscopy, do not give your child aspirin, Aleve or ibuprofen (such as Advil or Motrin). These can cause bleeding. If your child needs pain or fever medicine, ask your child’s healthcare provider if it’s OK to give acetaminophen (Tylenol).
- If your child has diabetes and takes insulin, please ask their doctor about changes to insulin doses needed before and after the day of the procedure.
- Your child may take medications up until the time that they are not allowed anything by mouth. (see below)

Eating instructions:

Your child must have an empty stomach for this procedure. Please follow the eating instructions highlighted or checked below:

- For a child older than 12 months: Your child can eat normally up until 8 hours before the start time of their procedure. Then give your child only clear liquids. Stop all clear liquids 4 hours before the start time of their procedure. Do not give your child anything to eat or drink at this time – not even gum. (see below for details on clear liquid diet).
- For a baby under 12 months: Your child can eat normally up until 6 hours before the start time of their procedure and can have breast milk up until 4 hours before the start time of their procedure. Then give your child only clear liquids. Stop all clear liquids 2 hours before the start time of their procedure. Do not give your child anything to eat or drink at this time.

If your child has any special dietary needs, please talk to your nurse or doctor when you schedule the procedure. Please let us know if your child is ill on the day of the procedure. Call 206-987-2045.

What are clear liquids?

- Clear liquids are fluids with color but are transparent. You can see clearly through them – they are not foggy liquids.
- Clear liquids include water, popsicles, transparent juices, and Gatorade. (For babies: Pedialyte and breast milk are OK, but not formula.)