

# Endoscopic Retrograde Cholangiopancreatography (ERCP)

## An examination of the bile duct, gallbladder and pancreas

This leaflet provides essential information to prepare you for your forthcoming procedure. You have been advised to have an **ERCP** to help find the cause of your symptoms. An ERCP is a procedure that can assist to diagnose and treat disorders of the pancreas, pancreatic duct and bile ducts. This leaflet covers frequently asked questions.

## What is an Endoscopic Retrograde Cholangiopancreatography (ERCP)?

An ERCP allows the endoscopist to look at the bile ducts, gallbladder, and pancreas using a flexible tube called a video endoscope which is about as wide as a finger. On the end of the endoscope is a light and a tiny camera which allows the endoscopist to see inside you. The endoscopist steers the endoscope through your mouth, down the oesophagus, into the stomach and into the duodenum (the beginning of the small bowel). This is where the endoscopist can see the opening where the bile and pancreatic juices empty into the duodenum, this is called the ampulla.

During the procedure the endoscopist will also take detailed X-ray pictures. This is done by passing a thin plastic tube (less than two millimetres wide) down the endoscope and into the ampulla, through which dye is injected into the ducts to identify any abnormalities, such as gallstones or strictures (narrowing). Sometimes patients need to stay in hospital following ERCP depending on the treatment they have had.

## Preparation

Your stomach must be empty to allow a clear view of the gastrointestinal tract, therefore you **must not** eat for **6 hours** before the procedure and have only clear fluids up to **2 hours** before the test.

### Patient with diabetes, please follow the instructions below:

- **Insulin dependent diabetic patients** should contact the diabetic specialist nurses before the procedure - see the 'useful contacts' at the end of this information sheet.
- **Tablet controlled diabetic patients**, please ring the endoscopy nurse's enquiry line for advice - see the 'useful contacts' at the end of this information sheet.
- You will need a blood test prior to this procedure
- If there is a possibility of pregnancy, please contact the Endoscopy Unit

## On the day of the procedure

- Please leave your valuables at home.
- Please bring any inhalers or heart medication with you
- Bring an exemption certificate in case you are prescribed medication, if this applies.
- Bring a book or a magazine to read. You may be in the unit for two to three hours. Please check with your nurse the time for your friend/relative to collect you.
- The waiting areas in the Endoscopy centre are mixed sex facilities. However, when patients are required to undress, same sex facilities are provided to maintain your privacy and dignity.
- Please do not wear nail varnish on your fingers.

## Admission to the Endoscopy Unit

On arrival to the department, you will be asked to take a seat in the waiting room. If a relative has come with you, they can go home and wait to be contacted when you are ready. You will be required to stay within the unit for 4 hours post-procedure for IV fluids to help prevent the risk of pancreatitis.

A nurse will escort you to an admitting room. They will record your medical details and vital signs and then explain the procedure. You will need to undress and change into a hospital gown for this procedure. You will be asked to sign the consent form on admission if you have not already done so. The consent form is a legal document which confirms your agreement to the procedure and your understanding of its benefits and potential risks and complications.

## What happens during the procedure?

In the examination room, you will meet the endoscopist and two other nurses. Your nurse will introduce you, settle you on a couch and attach a monitoring device to your finger. Your throat will be sprayed with a local anaesthetic to numb it and any dentures will be removed. You will then lie on your left-hand side for the procedure. A cannula (small needle) will be inserted into the back of your other hand to administer sedation and painkiller. Oxygen will be administered via nasal catheter just inside your nose. A mouthguard will be placed between your teeth to support the endoscope. Throughout the test, air will be used to inflate your stomach and the nurse looking after you will suction any saliva from your mouth.

The procedure should not compromise your breathing but may make you retch a little and can be associated with mild to severe discomfort. It takes approximately 45 minutes. X-ray equipment will be beside the trolley and staff will be wearing X-ray protective aprons. The amount of X-ray you receive will be strictly controlled for your safety. Further X-rays may be taken after the procedure is completed. When the examination is finished, the endoscopist will remove the air and withdraw the endoscope.

### Endoscopic sphincterotomy

If the X-ray shows common bile duct stones, the endoscopist will enlarge the opening performing a sphincterotomy. This is done by using diathermy (an electrically heated wire) and a sticky pad attached to your leg. Dye will be injected into the bile duct and the stones removed using a special balloon or basket. If it is not possible to clear the common bile duct totally, a small plastic tube (stent) may be placed to allow drainage of bile. The procedure may be repeated at a later date.

## After the procedure

Just before you leave the procedure room you may be given an anti-inflammatory suppository (medicine into your bottom). You will be taken from the room on a trolley to the recovery bay and monitored. When your nurse has assessed you, you will be offered something to eat and drink. Your visit to the unit will last between 3-4 hours but, due to unforeseen circumstances, there may be delays.

**In some patients, the sedation may make you forget the procedure.**

## Discharge

**If you choose to have sedation, a responsible adult will need to collect you from inside the Endoscopy Unit and remain with you for the rest of the day. You will NOT be allowed to drive for up to 24 hours.**

- You will not be able to drive or use public transport for your journey home.
- At home you will need to be in the company of others for the rest of the day, due to the effects of the drugs.
- A nurse will explain the outcome of your endoscopy and provide written details of your aftercare and any follow-up needed.
- If you require an outpatient appointment, this will be sent by post.

## What are the possible risks with the procedure?

All procedures of this nature carry a small risk of:

- Bleeding or perforation to the mucosal lining, inflammation of the pancreas, infection, pain, and reaction to sedation.
- Minimal risk to crowned teeth or dental bridgework from the endoscope.
- There is also a risk of not being able to access the ampulla, making it impossible to carry out the procedure, so please do not hesitate to ask any questions.

## Benefits

- Avoids surgery
- Relieves symptoms

## Medical questionnaire

This next section (on pages 4 and 5) is for you to complete prior to arriving at the Endoscopy Unit. **Please bring this with you on the day of the procedure.**

It is important that you fill it in accurately so that the nursing staff can provide you with the best care possible. If you have any concerns or questions, please call the nurses' enquiry line - see the 'useful contacts' at the end of this information sheet.

# Medical questionnaire

<b>HEART</b>	Yes	No
Heart disease		
Valve surgery, angina, heart attack		
When did you last have chest pain.....		
High blood pressure		
Rheumatic Fever		
Stroke		
Circulation (e.g.) thrombosis)		
Other		
Did any of above require anticoagulants		
Nursing notes		

<b>LUNG</b>	Yes	No
Lung Condition (e.g. emphysema, asthma)		
Coughing up blood		
Other		
Nursing notes		

<b>LIVER/KIDNEY/URINARY TRACT</b>	Yes	No
Liver Condition (e.g. jaundice, cirrhosis)		
Kidney (e.g. kidney stones, infection)		
Urinary Tract (e.g. infection, blood in urine)		
Nursing notes		

<b>INFECTIOUS DISEASES</b>	Yes	No
TB		
Hepatitis (B or C)		
HIV/AIDS		
MRSA/ Other		
Have you ever been notified that you are at risk of CJD or vCJD for public health service		

<b>GASTROINTESTINAL TRACT</b>	Yes	No
Stomach (e.g. ulcers, hiatus hernia)		
Bowel (irritable bowel, polyps, cancer)		
Nursing notes		

<b>OTHER CONDITIONS</b>	Yes	No
Diabetes		
Epilepsy		
Anaemia		
Glaucoma		
Addison's disease		
Nursing notes		

<b>OTHER DETAILS</b>	Yes	No
Dentures		
Hearing Aid		
Glasses/contact lenses		
Body piercing		
Metal joints or any bones pinned		
Are you sensitive/allergic to anything? (e.g. antibiotics/latex/foods/adhesive etc)		
Nursing notes		

<b>LIFESTYLE</b>	Yes	No
Do you smoke		
Do you take any illegal substances?		
Do you drink alcohol (If yes – how many units/week – 21 male/ 14 female)		
Nursing notes		

Nursing notes
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Have you had any operations? Please give details:

Name of medicine	Dosage (amount)	Number of times taken per day

- Endoscopist has been informed of relevant conditions and medication    Yes / No
- Transferred to care plan    Yes / No

Next of kin name and address:	Telephone details:

**Valuables disclaimer**

You are advised not to bring valuables into the hospital. We cannot accept responsibility for lost items.

Patient signature ..... Print ..... Date.....

Primary nurse signature ..... Print ..... Date.....



**To ensure that your examination is a success, please follow all the instructions carefully:**

- **Please read** this information sheet and complete the medical questionnaire on pages 4 and 5 before you arrive for your procedure.
- **Drinks** - You can have clear fluids up to **2 hours** before your appointment time. This includes water, squash, black tea or coffee (without milk).
- **Diet** – you can eat a light snack up to **6 hours** before your appointment time.
- Please wear loose, comfortable and washable clothing.
- If you are taking **any anti-coagulation therapy** (medicine to thin your blood), please ring the nurses' line (see 'useful contacts'), unless you have been given specific instructions in your appointment letter or by phone.

**Please tick the checklist below to ensure you have read all the information and are ready for your procedure:**

- |   |                          |
|---|--------------------------|
| I have read this patient information sheet                              | <input type="checkbox"/> |
| I have understood the information provided                              | <input type="checkbox"/> |
| I have read the consent form (if given/sent one)                        | <input type="checkbox"/> |
| I have arranged transport (if having sedation)                          | <input type="checkbox"/> |
| I am aware of when I should stop eating and drinking                    | <input type="checkbox"/> |
| I have contacted the diabetes nurse (if required)                       | <input type="checkbox"/> |
| I have contacted the anticoagulant clinic (if required)                 | <input type="checkbox"/> |
| I have contacted the BCSP office about my pacemaker check (if relevant) | <input type="checkbox"/> |
| I have completed the medical questionnaire on pages 4 and 5             | <input type="checkbox"/> |

**If you are unsure about anything, please contact us.**

**Your procedure could be cancelled if you have not followed the instructions properly.**

## Additional information

To view the Lister and New QEII site maps for navigating your way around our hospitals, please visit our Trust website - [www.enherts-tr.nhs.uk](http://www.enherts-tr.nhs.uk)

## Useful contact details

### East and North Hertfordshire NHS Trust:

- Website [www.enherts-tr.nhs.uk](http://www.enherts-tr.nhs.uk)
- Telephone 01438 314333

### Endoscopy Unit - Lister and New QEII:

- Lister: Telephone 01438 288603 - Option 1
- New QEII: Telephone 01707 247728

### Anticoagulation Clinic:

- Lister: Telephone 01438 285335
- New QEII: Telephone 01707 224032

### Nurses' Enquiry Line:

- Telephone 01438 288603 (please ring between 8am - 10am and 4pm - 6pm) - Option 2

### Diabetic Specialist Nurses:

- Telephone 01438 284560
- Telephone 01438 284645
- Telephone 01438 284615

**This is not an emergency service. Messages left on the answerphone may not be answered for 24-48hrs.**



**You can request this information in a different format or another language; please speak to your doctor or nurse.**

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