

QUESTIONS?: PROCEDURE SCHEDULING: 352-331-8902 x 206

Esophageal Manometry Instructions

Use this guide to help you prepare for your procedure appointment. Read the entire guide before beginning.

Procedure Date:_____

Physician:_____

Arrival Time:_____

Procedure Time:

Procedure scheduled at:

Endoscopy Center at North Florida Regional Medical Center 6500 W. Newberry Road, 3rd Floor You must call to pre-register 888-821-1632

How do I use this guide?

Read the entire guide at least one week before your procedure. Some steps in this guide begin up to one week before your appointment. If you haven't read through the guide at least one week in advance, call your physician. Preparing for your procedure is very importaint. If you have questions, remember that we're here to help.

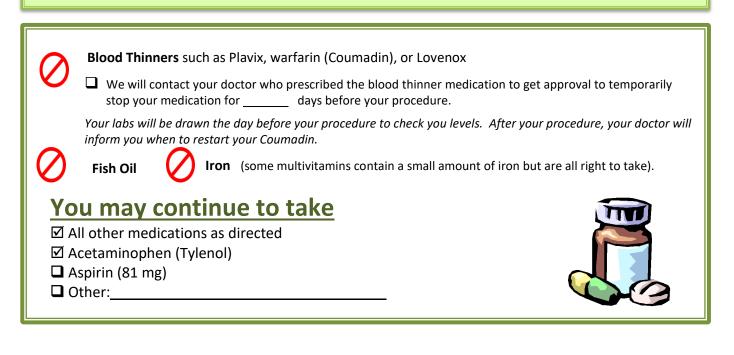
If you don't follow all the steps listed here, your procedure may be cancelled.

What does this guide cover?

Five days before your procedure	. page 2
The day of your procedure	page 3
What to expect, procedure charges and cancellation/missed appointment	. page 4
Esophageal Manometry Information	page 5

5 days before your procedure

Follow instruction for medications and conditions below. Fill out the check-boxes below to help you keep track of your progress.



Follow special instructions if you have any of these conditions:

Diabetes Patients

Continue medication as prescribed

Implanted cardio defibrillator patients

- We will contact your cardiologist for a letter stating your defibrillator has been checked within the last 12 months.
- If you have not had a visit with your cardiologist in the last 12 months, you will need to be seen prior to your procedure.

Pacemaker Patients

- We will contact your cardiologist for a letter stating your pacemaker has been checked within the last 12 months.
- If you have not had a visit with your cardiologist in the last 12 months, you will need to be seen prior to your procedure.

Cardiology

■ If you have been seen by a cardiologist in the last 6 months, notify procedure scheduling at 352-331-8902 x 206.

Follow instruction for medications and conditions below.

DO NOT EAT OR DRINK 4 HOURS BEFORE YOUR PROCEDURE

DO NOT TAKE the morning of your procedure as these medications may affect your test results

- Nitroglycerine (Isordil, Nitro-Bid, etc.)
- Calcium channel blockers (Procardia, Adalat, Calan, Cardizem, etc.)
- Beta Blockers (Inderal, Corgard, etc)
- Reglan (metoclopramide)
- Erythromycin
- Donnatal
- Bentyl (Dicyclomine)
- Librax
- Levsin



Diabetic patients: Do not take your morning dose of insulin or antidiabetic pills today. Bring ALL medication with you to your procedure.

If you take medication for your heart, stomach, seizure, depression, or nerves, take your normal dose with a sip of water at least 4 hours before your scheduled time.

Bring any prescribed respiratory inhaler with you.

Checklist

Use this checklist to help you remember everything you need to bring with you today.

After your procedure has been completed, you should be able to resume your normal activities and this includes driving yourself home.

Photo identification (license or other form of ID)

Insurance cards

Funds for deductible or co-payments (credit card, check etc.)

Remove ALL piercings

All medications in Rx bottle with label

Other

PROCEDURE CHARGES:

In addition to the facility fee, you will receive a bill from Digestive Disease Associates (a section of SIMEDHealth) – this will include:

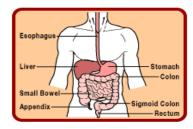
- Anesthesia Fee
- Procedure Fee
- Pathology Fee (if biopsies are taken)

All insurance questions should be directed to our billing department (352-331-8902 X 202).

CANCELLATION OR MISSED APPOINTMENTS:

Should you have to cancel and reschedule your procedure, a 48-hour (minimum) advance notice is required. Those that cancel with less than a 48-hour notice will be charged a \$100 missed procedure fee.

Esophageal Manometry





The esophagus is the tube that carries food and liquid from the throat to the stomach. Although it seems like a simple organ, the esophagus is not a rigid tube. The wall of the esophagus contains muscle that rhythmically contracts whenever a person swallows. This contraction occurs as a sweeping wave (peristalsis) carrying food down the esophagus. It literally strips the food or liquid from the throat to the stomach.

Another important part of the esophagus is the lower valve muscle. This is a specialized muscle that remains closed most of the time, only opening when swallowed food or liquid is moved down the esophagus or when a person belches or vomits. This muscle protects the lower esophagus from caustic stomach acid and bile. These substances, of course, cause of heartburn and/or chest pain and in time can lead to damage and scarring in the esophagus. At times, everyone has heartburn, especially after a large or fatty meal.

Manometry is the recording of muscle pressures within an organ. So esophageal manometry measures the pressure within the esophagus. It can evaluate the action of the stripping muscle waves in the main portion of the esophagus as well as the muscle valve at the end of it.

A thin, soft tube with pressure sensors at various locations is passed gently through the nose (or mouth) into the esophagus. The tube is then advanced through the length of the esophagus, into the stomach. Complications are rare but could be associated with placement of the soft tube such as aspiration, perforation, bleeding, sore throat or nosebleed. Slight gagging is normal during the examination and a temporary sore throat may occur after the procedure.

Some patients have expressed the concern that they might contract AIDS through this examination. All of our instruments are thoroughly sterilized after each use. Techniques known to kill all disease-causing bacteria and viruses, including the hepatitis and AIDS viruses, are employed in this process.

All of the above complications are rare.

Alternative methods for evaluation of the gastrointestinal tract are x-ray scans and radiological studies. These involve drinking a contrast agent or direct visualization with intravenous sedation. These alternatives do not really take the place of manometry, which records the muscle pressures within the esophagus.

Manometry enables the physician to have documentation of the function of the muscles in the esophagus. This will help establish your diagnosis and plan treatment.

Equipment

The equipment for manometry consists of thin tubing with openings at various locations. When this tube is positioned in the esophagus, these openings sense the pressure in various parts of the esophagus. As the esophagus squeezes on the tube, these pressures are transmitted to a computer analyzer that records the pressures on moving graph paper. It is much like an electrocardiogram. The physician can evaluate these wave patterns to determine if they are normal or abnormal.

Manometer Manometry Probe Openings Esophageal pH

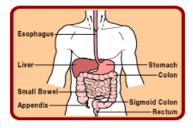
Reasons for the Exam

There are a number of symptoms that originate in the esophagus. These include difficulty swallowing food or liquid, heartburn, and chest pain. Additionally, an x-ray (barium swallow or upper GI series) or

endoscopy may show abnormalities that need studied further by manometry. The exam is often done before and after medical or surgical treatment of the esophagus. Esophageal manometry is very effective in evaluating the contraction function of the esophagus in many situations.

My signature below indicates that I have read and understand the handouts "DIGESTIVE DISEASE ASSOCIATES INFORMATION REGARDING ESOPHAGEAL MANOMETRY" and "ESOPHAGEAL MANOMETRY". I have had the opportunity to ask questions about the procedure and my questions, if any, have been answered to my satisfaction.

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Manometry Tracing	
Esophageal pH	

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Print Patient's Name

Patient's Signature

Date

Witness' Signature

DDA Pt. #_____

Procedure Date

Page | 7