

Central Adelaide Local Health Network

Royal Adelaide Hospital

Consumer Information

Oesophageal Motility

Oesophageal pH Monitoring

| | |
|------|--|
| Name | |
| URN | |

Your appointment:

| | |
|--|--|
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| | |

Please present to Day Surgery & Procedures

**Lift B or C to Level 4
Please bring your Medicare Card**

If this appointment is not convenient, it is essential that you phone 08 70741707 at least 1 week in advance

OESOPHAGEAL STUDIES

Oesophageal studies examine how your oesophagus (gullet) works and are used to investigate problems with swallowing, reflux (heartburn) and chest pain.

This leaflet will help to acquaint you with the tests that your doctor has arranged for you. It contains:

- a brief description of each test
- the risks and complications
- instructions about preparation for the test
- information about registration.

We strongly recommend that you read the information contained in this booklet as it is important that you understand the procedures before signing the Consent Form.

YOUR TESTS

The tests that have been arranged for you are:

Oesophageal Motility

Oesophageal pH Monitoring

Oesophageal Impedance Monitoring

OESOPHAGEAL MOTILITY

- This test measures how the muscles of your gullet work.
- You will be required to swallow a thin (3-4mm) soft rubber tube about as thick as a drinking straw. This will be passed down through your nose which will be sprayed with a topical anaesthetic.
- Your oesophagus will be tested by swallowing small (5ml) sips of water from a syringe. You may also be asked to swallow some bread.
- This test takes about 45 mins.

OESOPHAGEAL pH MONITORING

This test measures the amount of acid that refluxes into your oesophagus from your stomach.

- The purpose of the test is to determine:
 - if excessive acid is present
 - if your symptoms are due to acid reflux.
- A fine (1mm) plastic coated wire that senses the acid is passed into your oesophagus through your nose. This wire is taped to the side of your face. A second plastic tab is taped to your chest. The wires are connected to a portable recorder, that you wear on a belt which stores the information.
- During the test you will be required to avoid acid drinks such as fruit juice, cordial, soft drinks and coffee which will cause false readings. You will also be asked to keep a diary of your activities, meals and symptoms.
- The next day you will return to the laboratory where the wires will be removed and the information in the recorder loaded into a computer for analysis.
- The test takes about 15 minutes on each day.

OESOPHAGEAL IMPEDANCE MONITORING

- This test measures the amount of acid and non-acid fluid/gas etc that refluxes into your oesophagus from your stomach. Generally it is performed with you taking your anti-reflux medication, you will be informed regarding this.
- The purpose of the test is to determine:
 - if your anti reflux medication is working
 - if your symptoms are due to acid/non acid reflux.
- A fine (1mm) plastic coated wire that senses the acid/non-acid fluid/gas, is passed into your oesophagus through your nose. This wire is taped to the side of your face. A second plastic tab is taped to your chest. The wires are connected to a portable recorder, that you wear on a belt which stores the information.
- During the test you will be required to avoid acid drinks such as fruit juice, cordial, soft drinks and coffee which will cause false readings. You will also be asked to keep a diary of your activities, meals and symptoms.
- The next day you will return to the laboratory where the wires will be removed and the information in the recorder loaded into a computer for analysis.
- The test takes about 15 minutes on each day.

RISKS AND DISCOMFORTS

- Swallowing the tubes may be a little uncomfortable. This discomfort is minimised by spraying your nose with a topical anaesthetic.
- After the tubes are removed there may be some residual soreness. This usually settles quickly.

PREPARATION FOR ALL TESTS

Fasting

- If your test is in the morning, have nothing to eat or drink after midnight. If it is a warm day you may have small sips of water.
- If your test is in the afternoon, have nothing to eat or drink after a light breakfast (e.g. tea and toast) taken before 8.00am. . If it is a warm day you may have small sips of water.

Medications

- Your doctor will advise you about which medications you can take and which must be stopped before the test (see below).
- If you are in doubt, call **Marcus Tippett**.

Please stop these medications;

| | |
|--------------|----------------|
| Nexium | Ranitidine |
| Somac | Famotidine |
| Pariet | Domperidone |
| Zoton | Metaclopramide |
| Losec/Acimax | |

AFTER THE TEST

You may drive yourself home if you wish. The tests do not involve any sedation.

FOR MORE INFORMATION

**Marcus Tippett - Technical Day
Surgery & Procedures
Gastrointestinal Investigations Unit Patient
Admissions Level 4
Royal Adelaide Hospital**

**Telephone: 08 70741707
08 70741708**



The information contained within this publication does not constitute medical advice, and is for general information only. Readers should always seek independent, professional advice where appropriate

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|-------------|------------|-------------|
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Royal Adelaide Hospital - Gut Function Laboratory Sympton Questionnaire

Please fill in this questionnaire carefully and bring it with you on the day of your appointment. The information you provide here will be used to decide on selecting the appropriate type of investigations for you.

Surname: _____ **First name:** _____

URN: _____ **DOB:** _____

Height: _____ **Weight:** _____

What is your main sympton?

YES NO PLEASE TICK RELEVANT BOX (YES/NO) AND ANSWER ALL QUESTIONS

- Do you have any **allergies** to medications, food, or skin sensitivities?

| Allergy to (please list) | Reaction |
|--------------------------|----------|
| | |
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| | |

- Epigastric pain:** Do you get pain on the top of your stomach?
 For how long:..... How Often: Daily.....Weekly.....Monthly.....
 Does this sympton get worse or better by eating or drinking? Details:.....
- Retrosternal Pain:** Do you get pain in your chest?
 For how long:..... How Often: Daily.....Weekly.....Monthly.....
 Does this sympton get worse or better by eating or drinking?.....
- Heartburn:** Do you get a burning sensation in your chest?
 For how long:..... How Often: Daily.....Weekly.....Monthly.....
 Does this sympton get worse or better by eating or drinking?.....
- Regurgitation:** Do you get a burning sensation in your chest?
 For how long:..... How Often: Daily.....Weekly.....Monthly.....
 Does this sympton get worse or better by eating or drinking?.....
- Dysphagia:** Do you feel that food sticks in your gullet and not go to your stomach?
 How long for:..... How Often: Daily.....Weekly.....Monthly.....
 Does this sympton get worse or better by eating or drinking?.....
- Do you have difficulty in swallowing juices or soup?**

Do you have, or have you ever had: (if YES, please give details):

- Burping or belching?
- Feel bloated?
- Feel pain when swallowing food?
- Vomit without having illness?
- Feel nauseated or sick without having illness?
- Previous operations on your gullet? Details:.....
- Had an Endoscopy? Details:.....
- Had a Barium Meal or Barium Swallow? Details:.....

Other medical conditions and or symptoms:

- Diabetes?.....Blood pressure?....Asthma?....Heart condition?....Seizures?....Other?.....
 Details:.....
-
-
- Do you smoke? If so, how may per day?.....
- Do you drink? If so, how much per week?.....

Signature:..... Date:.....