Endoscopic Retrograde Cholangiopancreatography

You have been scheduled for an ERCP. This stands for endoscopic retrograde cholangiopancreatography. This procedure is used for the *diagnosis* (learning what is wrong) of many diseases of the pancreas, bile ducts, liver and gallbladder.

WHAT IS ERCP?

A long flexible tube (*endoscope*), slightly thinner than an index finger, is used. It is passed through the mouth and back of the throat into the upper part of the intestine (*duodenum*). A small plastic tube (*cannula*) is then passed through the endoscope. It is directed into the bile duct and/or pancreatic duct. Dye is then injected and X-rays are taken to study the biliary and pancreatic passageways (*ducts*).

BEFORE THE PROCEDURE

For the best possible examination, your stomach must be completely empty. You should not eat or drink anything, including water, after 12 midnight the evening before the examination, or for at least 6 hours before your procedure is scheduled. If you take medications, check with your caregiver as to which medications to withhold, or when and how they should be taken.

LET YOUR CAREGIVER KNOW ABOUT THE FOLLOWING:

- Allergies, specifically to iodine dyes.
- Medications taken including herbs, eye drops, over the counter medications, and creams, specifically *anticoagulants* (blood thinners) or aspirin products.
- Antibiotics you have been told to take prior to diagnostic tests.
- Use of steroids (by mouth or creams).
- Previous problems with anesthetics or novocaine.
- Possibility of pregnancy, if this applies.
- History of blood clots (*thrombophlebitis*).
- History of bleeding or blood problems.
- Any barium X-rays during the past week.
- Previous surgery.
- Other health problems or concerns.

IF YOU ARE AN OUTPATIENT:

- Make arrangements for someone to drive you home. You will be given medication during the procedure to help you relax. You will not be permitted to drive for several hours afterwards.
- Report to the outpatient registration desk at least 30 minutes before your scheduled procedure.

DURING THE PROCEDURE:

- You will be given medication through a vein to make you relaxed and sleepy.
- Your throat may be sprayed with local anesthetic.
- You will lie on your left side. The endoscope will be inserted through your mouth and into the duodenum. The tube will not interfere with your breathing. Gagging is usually prevented by the local anesthesia.
- While X-rays are being taken, you will be asked to lie on your stomach.
- You may feel bloated during the procedure due to the air used to inflate the intestine. There may be some discomfort when X-ray dye is injected into the duct.

WHAT IS A BILIARY STENT?

During the ERCP, the person performing the procedure (your *endoscopist*) may identify a blockage or narrowed opening to the bile duct. A small thin plastic tube (*stent*) will be positioned inside your bile duct. This is to allow fluid secreted by the liver (*bile*) to flow more easily through the narrowed opening.

AFTER YOUR ERCP

After the procedure, you will be moved to a recovery area. You will stay there until most of the effects of the

medication have worn off. Your caregiver will discuss the test results with you. He/she will give you specific instructions for caring for yourself after the procedure.

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