

Consent information for Gastroscopy

Please read information, sign the consent form and bring it to the clinic on the appointment day.

<Purpose, Method>

A gastroscopy is where the doctor uses an instrument called an endoscope to look at the inside lining of your esophagus (food pipe), stomach and duodenum (first part of the small intestine).

An endoscope is a long, thin, flexible tube with a small camera and light attached which allows doctors to see the inside of your gut on a video screen. Sample biopsy may be performed if we find any polyp, ulcer or tumor. We will apply a local anesthesia to your throat. If requested or as necessary, we will use sedatives by dripping infusion. We may not be able to follow your requested method depending on your condition and medications.

<Notes>

Unintended side effects (such as: perforations, bleedings) may occur due to the biopsy. It happens to about 1 in 14406 people. About 1 in 866591 such cases lead to death. Throat anesthesia and sedatives may cause dyspnea (shortness of breath) and other side effects. If any accidental events happen during the procedure, we will provide the best treatment but may require hospitalization or emergency operation.

Please inform the medical staff if the statements below apply to you before the procedure.

- ① Unwell after given local anesthesia or allergy to local anesthesia at dentist. (We use Xylocaine as local anesthesia to your throat).
- ② Currently under medical treatment or has history of hospitalization.
- ③ Taking antithrombotic medicine (anticoagulant, antiplatelet agent). Please refer to the information for "For those who take antithrombotic".

If ② or ③ applies, follow the instructions given by our nurse or doctor on how to take your medication when you make the appointment. For those who are taking antithrombotic, you must consult your physician prior to the examination on your medication.

We may not perform biopsy by the decision of the examiner or by your request.

The sedatives may cause drowsiness, lowered vision, and amnesia. Do not drive and cycle for the day. Do not make any critical decision on the day.

I acknowledge the needs, contents and risks of the gastroscopy.

Please circle your choice.

I (consent do not consent) to perform this examination.

Name _____

(Signature) _____ Date of consent _____ y/ _____ m/ _____ d

(If substitution, please state relationship with patient _____)

Address _____

contact number _____

If patient lack capacity to provide consent, consent must be obtained from substitute decision maker (spouse, guardian, parental authority) and sign the consent form.

Kaijo Building Clinic

TOKYO TORCH Tokiwabashi Tower 10F 6-4,Otemachi 2-chome,Chiyoda-ku, Tokyo Tel : 03-6636-6111

2022.4 改訂 二次検胃同意書

Information for Gastroscopy

Date of Appointment _____ m/ _____ d/(_____) _____ :

Arrive 15 mins before appointment

Diet instructions

- ① Eat a light dinner by 9:00PM the day before. After dinner, only drink water or plain tea without milk.
- ② No breakfast on the examination day.
- ③ Drink a glass of water more than an hour before the examination to remove mucus in the stomach.

Important notice

- ① Take your regular medications for hypertension, heart disease more than 2 hours before the examination.
- ② For those who take diabetes medications, consult your physician prior to the procedure. It may be required to hold off the medication for the day.
- ③ No smoking from the examination morning up to an hour after procedure.
- ④ No driving and cycling for the day.
- ⑤ We cannot perform gastroscopy for expecting mothers or those who might be pregnant. We may limit the medicine for mothers who are breastfeeding.
- ⑥ Remove any nail manicures. If not, we may not perform the gastroscopy with sedatives.
- ⑦ Refer the leaflet for those who take any regular medications.
- ⑧ Stop taking any commercially –available dietary supplement or functional food that does not require a prescription one week before the examination.

The examination takes about 15 mins. It takes about an hour including reception, preparations and payment. (When using sedatives, another 50 mins is required to recover.)

Post-examination

- ① Due to the local anesthesia to throat, no eating, drinking, smoking for an hour after the examination.
- ② For those who had biopsy, no eating, drinking and smoking for 2 hours after the examination. No alcohol and spicy foods for the day.

Note

- ★ Gastroscopy is done by Reservations only. We may not perform the gastroscopy if you are late or with no prior notice.
- ★ Inform us if you need your appointment rescheduled as soon as possible.
- ★ We may delay your examination's starting time due to various reasons.

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For those who take antithrombotic medicine

Managing of antithrombotic medicine in endoscopy

In principle, we will perform endoscopy for those who are taking antithrombotic medicine.

Depend on the type of medicine you are taking, we may not perform the biopsy.

You must consult your physician prior to the procedure. Your physician will decide if you can continue taking your antithrombotic medicine or not.

Kaijo Building Clinic, Director

Lists of medicine might affect endoscopy on reverse side.

内視鏡検査に影響のあるお薬一覧 Affects endoscopy drug List 2022.1

※休薬の可否については、必ず主治医にご確認ください。You have to check with your doctor about whether or not you can take medication.

成分名 Ingredient name	製品名 product name	後発医薬品(ジェネリック)・同成分薬 Generic drug・Same component drug
アスピリン aspirin	バイアスピリン Bayaspirin	アスピリン Aspirin
アスピリン・ダイアルミニウム配合 aspirin・dialuminate	バファリン Bufferin	アスファネート , ニトキス , バッサミン , ファモター Asphanate , Nitogis , Bassamin , Famoter
アスピリン・ボノプラザンフマル酸塩配合 aspirin・vonoprazan humarate combined drug	キャブピリン配合錠 Cabpirin	
アスピリン・ランソプラゾール配合 aspirin・lansoprazole combined drug	タケルダ配合錠 Takelda	
アピキサバン apixaban	エリキウス Eliquis	
イコサペント酸エチル ethyl icosapentate	エパデールS Epadel S エパデール Epadel	イコサペント酸エチル Ethyl icosapentate
エドキサバンチル硫酸塩水和物 edoxaban tosilate hydrate	リクシアナ Lixiana	
オメガ-3脂肪酸エチル Anti-hyperlipidemic Agents	ロトリガ Lotriga	
クロピドグレル硫酸塩 clopidogrel sulfate	プラビックス Plavix	クロピドグレル Clopidogrel
クロピドグレル硫酸塩・アスピリン配合 clopidogrel sulfate・aspirin	コンプラビン配合錠 Complavin	ロレアス LoreAce
サルボグレレート塩酸塩 sarpogrelate hydrochloride	アンブラーグ Anplag	サルボグレレート塩酸塩 Sarpogrelate hydrochloride
ジピリダモール dipyridamole	ベルサンチン Persantin	ジピリダモール(+散) Dipyridamole
ジラゼプ塩酸塩水和物 dilazep dihydrochloride hydrate	コメリアン Gomellian	ジラゼプ塩酸塩 Dilazep dihydrochloride
シロスタゾール cilostazol	プレタール Pletaal	シロスタゾール(+錠,OD錠,内服ゼリー) Cilostazol
ダビカトランエテキシラートメタンサルホン酸塩 dabigatran etexilate methanesulfonate	プラザキサ Praxaxa	
チカグレロル ticagrelor	ブリリント Brillinta	
チクロピジン塩酸塩 ticlopidine hydrochloride	パナルジン Panaldine	チクロピジン塩酸塩 Ticlopidine hydrochloride
prasugrel hydrochloride	エフィエント Efient	
ベラプロストナトリウム beraprost sodium	ケアロードLA Careload LA ドルナー Dorner プロサイリン Procylin ベラサスLA Berasus LA	ベラプロストNa , ベラプロストナトリウム Beraprost Na , Beraprost sodium
リバーロキサバン rivaroxaban	イグザレルト Xarelto	
リマプロストアルファデクス limaprost alfadex	オパルモン Opalmon プロレナール Prorenal	リマプロストアルファデクス Limaprost alfadex
ワルファリンカリウム warfarin potassium	ワーファリン Warfarin	ワルファリンK Warfarin K

※上記は、「今日の治療薬2022年版」を参照し作成しております。

The above reference and create "Today's remedy 2022 edition".

記載されていない後発医薬品(ジェネリック)が存在する場合がありますので、ご了承願います。

Please note, in some cases Generic drugs not listed.

※院内採用薬品は青字で表記しております。ご不明な場合はお問い合わせください。

Drugs used in hospitals are shown in blue.If you are unsure, please contact us.