

NORTON GASTROENTEROLOGY CONSULTANTS OF LOUISVILLE

3999 Dutchmans Lane, Medical Plaza 1, Suite 7B, Louisville, KY 40207

Phone: (502) 896-4711 Fax: (502) 896-4791

GASTROENTEROLOGY

HEPATOLOGY

DIAGNOSTIC & THERAPEUTIC ENDOSCOPY

PATIENT NAME: _____

DATE: _____

ERCP (ENDOSCOPIC RETROGRADE CHOLANGIOPANCREATOGRAPHY) EDUCATION AND CONSENT FORM

DESCRIPTION OF PROCEDURE:

An ERCP is a procedure in which your doctor will examine the biliary and pancreatic ducts. The exam is done with a flexible tube (scope) which is passed through your mouth into your stomach and into the duodenum. X-ray is used to visualize the ducts. Your doctor watches the exam on a TV screen and X-ray screen. A needle for IV medicines will be placed in the arm prior to the procedure. Medicines will be injected through the needle that will make you sleepy and relaxed. Your blood pressure, pulse, respirations, and oxygen level will be monitored by a nurse throughout the procedure. Your doctor may spray your throat with a numbing medicine to prevent you from gagging. As you lie on your left side, a small mouthpiece will be placed between your teeth. As your doctor gently passes the scope through your mouth into your esophagus (food tube) and into your stomach and small intestine, he will be examining the linings for any abnormalities. Once your doctor has identified the ampulla of Vater (site of drainage from the gallbladder and pancreas), a small instrument will be passed through the scope. This instrument will be advanced through the ducts and contrast dye injected. X-ray pictures will be taken and examined for abnormalities. Please inform your doctor and nurse if there is any chance that you may be pregnant. You may experience some cramping and gas due to the air your doctor puts in during the procedure. Therapies/treatments may be performed during an ERCP include, but are not limited to:

1. Sphincterotomy – incision made in the ampulla of Vater by passing a special instrument through the scope.
2. Stent placement – placing a special plastic-like tube in the duct to help it drain.
3. Stone extraction – removing the stones from the duct by passing a special instrument through the scope.
4. Dilatation – stretching narrowed areas by passing special instruments through the scope.

WHAT ARE THE RISKS OF THIS PROCEDURE?

The risks of an ERCP include, but are not limited to, risks of sedation, bleeding which may require transfusions, perforation (puncture, tear or hole in the stomach, esophagus, duodenum or ampulla) which may require surgery, cholangitis (infection), pancreatitis (which may occur in 10 to 15% of procedures and may be mild, moderate, severe, or potentially life threatening). There is a very small (less than 1%) potential mortality associated with this procedure.

WHAT ARE THE BENEFITS OF THIS PROCEDURE?

The benefit of an ERCP is that it is a nonsurgical procedure for direct visualization of the biliary and pancreatic ducts that gives us the ability to perform necessary therapies/treatments as outlined above.

WHAT ARE THE ALTERNATIVES?

A possible alternative to an ERCP is a MRCP (magnetic resonance cholangiopancreatography) where pictures of your biliary and pancreatic ducts are taken and checked for abnormalities and is performed in the radiology department by an X-ray technologist. A needle for IV contrast will be placed in your arm prior to the procedure. The contrast is injected in the needle and then the X-ray pictures are taken. A radiologist (a doctor who specializes in interpreting X-rays) will study and interpret your MRCP and will send a report to your doctor.

WHAT ARE THE RISKS OF THE ALTERNATIVES?

The risk of an MRCP includes the fact that this is only a diagnostic study with potential limited information with regard to the pancreas. The therapies/treatments outlined above cannot be performed with MRCP.

WHAT ARE THE BENEFITS OF THE ALTERNATIVES?

The benefits of an MRCP is that it is a diagnostic test which requires no sedation, does not carry the risk of ERCP and you are able to leave shortly after the scan has been completed.

I have read, or had read to me, this education & consent form.

Patient/Authorized Signature

Relationship

Date

Witness Signature

Title

Date