Transnasal endoscopy (TNE)
Information for patients

This information leaflet answers some of the questions you may have about having a TNE. It explains the risks and the benefits of the test and what you can expect when you come to hospital. If you have any more questions, please do not hesitate to contact a member of staff.

Endoscopy Unit

King’s College Hospital Nurses’ Station 020 3299 4079
King’s College Hospital Pre-assessment clinic 020 3299 2775
King’s College Hospital Reception 020 3299 3599
Princess Royal University Hospital (PRUH) Nurses’ Station 01689 864028
PRUH Reception (male) 01689 864120
PRUH Reception (female) 01689 864723

Confirming your identity

Before you have a treatment or procedure, our staff will ask you your name and date of birth and check your ID band. If you do not have an ID band we will also ask you to confirm your address. If we do not ask these questions, then please ask us to check. Ensuring your safety is our primary concern.

www.kch.nhs.uk
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What is a transnasal endoscopy (TNE)?

A transnasal endoscopy (TNE) is a procedure we use to examine the inside of your gullet (food pipe), stomach and upper part of your small intestine. It is also known as a gastroscopy or an upper GI endoscopy.

We put a long, thin flexible tube (endoscope) into your nostril and pass it down into your stomach and upper small intestine. The endoscope is just under 6mm in diameter (like a wooden pencil) and has a camera in its tip which sends video images of the inside of your stomach and intestine to a monitor screen.

Please note that TNE is not intended to diagnose problems in your nasal passages, it is purely a route of inserting the camera.

Why do I need this test?

Your GP (home doctor) or hospital specialist has recommended you have this test to investigate the cause of your symptoms. Sometimes biopsies are taken at the same time to help with diagnosis. These are tiny pieces (samples) of tissue that we can look at in a laboratory.

It is important that you understand why you are having the procedure.

If you are not clear about the reasons, please check with your doctor (hospital specialist) beforehand, or the endoscopist who sees you on the day of your test.
What are the benefits?

A normal test result can reassure you that all is well.

A TNE can also help us to make a diagnosis (sometimes by taking biopsies) and to make sure you are on the best treatment.

A TNE can help us review the findings of a previous gastroscopy.

What are the risks?

A TNE is an extremely safe procedure and complications are very rare. Complications can include the following.

- **Nosebleeds.** Nosebleeds are common. They last no more than a few minutes and rarely require packing or consultation with ear, nose and throat doctors to stop the bleeding.
- **Bleeding.** It is common to have bleeding after a biopsy. This lasts no more than a few seconds and rarely requires blood transfusion. We will let you know what to expect after your test.
- **Perforation** (a hole in the gut wall) which may require admission to hospital and possible surgery. Perforation happens in less than 1 case in 3,000.
- **Aspiration** (inhalation of stomach contents) which may lead to pneumonia occurs rarely.
- **Drug reactions** occur very rarely. If you do have a reaction, we will give you medication to reverse the effects.
- **Missed lesions.** If the stomach is not clear of food or you can’t hold the air we place in your stomach to inflate it, there is a small risk of abnormalities not being seen. If the endoscopist feels the views were unclear, they may request that you have a repeat gastroscopy at a later date. Abnormalities are rarely missed.
- **Failure to complete examination.** If you need to have alternative examinations, our endoscopist will explain the reason why and how this will be managed.
- **Discomfort.** Nasal discomfort, sore throat, gagging, bloating, burping and the sensation of pressure within the gut is common. Please see the section ‘Will it hurt?’ on page 5.
- **Other.** Mucous discharge, short-lasting light-headedness, dizziness and headaches may occur rarely.

If any of the above complications happen, you may be admitted to the hospital for observation or further treatment.

Are there any alternatives?

You can have a barium swallow test which allows us to get x-ray images of the same areas inside your body or a capsule endoscopy. However, we get better pictures from a TNE and can take biopsies at the same time, both of which help with your diagnosis. If we find an abnormality during any other test, you will then need to have a TNE or gastroscopy through the mouth to examine or treat it.
A traditional oral gastroscopy (known as OGD, passing the camera through your mouth into the stomach) can be performed. A TNE has advantages over an OGD. A TNE can be more comfortable as the camera bypasses the area that can cause gagging. Patients can still talk to the doctor or nurse while the camera is in the stomach. There is no need for sedation which leads to a faster recovery afterwards and means you do not need an escort to go home.

The other alternative is to not have the test at all. This would result in no biopsies being taken, no diagnosis being made, and no endoscopic treatment being performed.

**Do I need to have a sedative?**

Transnasal endoscopy is performed without a sedative.

**Will it hurt?**
- We will give you a local anaesthetic spray into your nostrils to numb the nasal passages. This reduces discomfort.
- Air is put in your stomach to inflate it. You may feel bloated and might burp.
- You may also feel mild pressure as the tube is passed from your stomach to your small intestine.
- If the endoscopist takes biopsies, you may notice a mild pulling sensation or some discomfort.

**Do I need to prepare for the test?**
- Your stomach must be empty to allow us clear views and reduce the risk of aspiration (please see What are the risks? on page 4).
- You must not have anything to eat for 6 hours before your procedure time.
- You may continue to drink clear fluids up to two hours before your procedure time.

**Do I need to stop taking my medication?**

If you are taking any medication which you have been told may thin your blood, please contact the Endoscopy Pre-assessment Clinic on the telephone number on the front of this leaflet and speak with a nurse. You may need to stop taking them for a short time.

If you are taking any other medications, including for diabetes, in general you can take these as usual, unless your doctor has advised you otherwise.

**What will I need on the day of the test?**
- Please wear comfortable, loose clothing.
- Please bring a list of any medications that you are currently taking.
- Please bring your reading glasses as you will need to read and sign your consent form.
- You may want to bring something to read while you wait or headphones to listen to music or a podcast.
- Please bring your appointment letter.
- You may need to change into a hospital gown for your test, so you may want to bring a dressing gown and slippers to wear for walking to the toilet.
• Please bring a reusable bag to put your belongings in while you are having your test or procedure.
• Please consider walking or using public transport if you can, to reduce the carbon footprint of your appointment.
• If you use a NIPPY ventilator at home for sleep apnoea, please remember to bring it with you.
• There is no general public car parking at King’s College Hospital, Denmark Hill site. Please see the following website for further information: https://www.kch.nhs.uk/patientsvisitors/getting-to-kings/parking

Things to remember
• Your appointment time is the time you are expected to arrive in the department. However, you should plan to be in the Endoscopy Unit for the whole morning or afternoon. The department has 5 rooms running at the same time and also accommodates emergencies. Someone with a later appointment than you may be seen before you. If you have any concerns, please ask a member of staff.
• Please do not bring children with you unless there is someone to look after them. We do not have any childcare facilities in the unit.
• We cannot take responsibility for any valuables, but your things will be kept with you at all times (on a shelf on the examination trolley).
• The waiting room has limited seating, please be aware that only one escort can remain in the waiting room throughout your stay. Escorts will not be allowed into clinical areas.

What happens when I arrive for my test?
When you arrive, a nurse will complete the health assessment with you, if you have not already done so. A member of the clinical team will come and explain the procedure to you.

Consent
We must by law obtain your written consent to any procedures beforehand. Staff will explain all the risks, benefits and alternatives before they ask you to sign a consent form. If you are unsure about any aspect of the treatment proposed, please do not hesitate to ask to speak with a senior member of staff.

What happens before the test?
At least 30 minutes before the test, you will be asked to drink 50mls of liquid to break up any bubbles and provide better views of the stomach.

At least 10 minutes before the test we will spray the nostrils with a local anaesthetic spray to reduce discomfort and widen the nasal passages.
You will be taken into the endoscopy room where you will be given more spray to the nostrils. The nurse will attach a monitor to your finger to measure your oxygen levels during the test.

You will then be asked to lie down.

**What happens during the test?**

A nurse will be with you at all times during your procedure to reassure you, talk you through what is happening and clear saliva (spit) from your mouth. The endoscopist will gently put the endoscope into your nostril and pass it down into your stomach. They will view images of your oesophagus (food pipe), stomach and the upper part of your small intestine on a screen. Even with the endoscope down your throat, there will be plenty of room for you to breathe. You may be asked to concentrate on your breathing during the procedure.

Photographs and videos will be taken during the procedure for the purpose of adding clinical information to your medical notes. Additional consent is required for these images to be used for any other purpose.

Trainees often attend the department to gain skilled supervised training. You have the right to refuse being treated by a trainee. Your treatment will not be affected by your decision.

**How long does the test take?**

It usually takes between 5 to 10 minutes.

**What happens after the test?**

You should plan to spend the whole morning or afternoon of the test in the Endoscopy Unit.

Once your test is complete and you have received your report, you can leave the department.

We will make sure you have all the documentation and instructions you need. We will also send a copy of the report to your GP.

**What happens when I go home?**

If you had an anaesthetic spray to numb your throat before the procedure, this will take about 45 to 60 minutes to wear off, so please do not eat or drink anything for one hour after your procedure. When the time comes, start by taking sips of cool water. If you swallow these easily, you can eat and drink normally and continue to take your regular medication unless advised otherwise.
Please contact your GP if you have any of the following symptoms:

• severe or continuous pain in your neck, chest or abdomen (tummy)
• prolonged nose bleeds
• persistent nausea or vomiting
• pooing black (tarry) stools
• temperature of 37.4°C and higher
• shivers or chills

**When will I get my results?**

Before you leave, we will give you a copy of your test report and any instructions you need. We will also send a copy of the test report to your GP (home doctor).

**Who can I contact with queries and concerns?**

If you have any questions, such as what to do about medication, before or after your procedure, contact the relevant Endoscopy Unit, 9am to 5pm, Monday to Sunday.

- King’s College Hospital Endoscopy Pre-assessment Clinic, tel: 020 3299 2775
- PRUH Nurses’ Station, tel: 01689 864028

If you want to change your appointment or need another information leaflet, contact the relevant Endoscopy Unit Reception, 9am to 5pm, Monday to Sunday.

- King’s College Hospital Reception, tel: 020 3299 3599
- PRUH Reception, tel: 01689 864120 (male)
- PRUH Reception, tel: 01689 864723 (female)

Out of the hours above, for urgent worries or queries, you may contact NHS Direct on telephone number 111 or go to your nearest Emergency (A&E) Department and take a copy of the report with you.

**The Endoscopy Department is working hard to reduce the impact of its service on the environment, to find out more please see www.kch.nhs.uk/services/services-a-to-z/endoscopy/**

**Sharing your information**

King’s College Hospital NHS Foundation Trust has partnered with Guy's and St Thomas' NHS Foundation Trust through the King’s Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas' hospitals. King’s College Hospital and Guy’s and St Thomas’ NHS Foundation Trusts share an electronic patient record system, which means information about your health record can be accessed safely and securely by health and care staff at both Trusts. For more information visit www.kch.nhs.uk.
Care provided by students

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams.

PALS at King’s College Hospital, Denmark Hill, London SE5 9RS
Tel: 020 3299 3601
Email: kch-tr.palsdh@nhs.net

PALS at Princess Royal University Hospital, Farnborough Common, Orpington, Kent BR6 8ND
Tel: 01689 863252
Email: kch-tr.palspruh@nhs.net

If you would like the information in this leaflet in a different language or format, please contact our Communications and Interpreting telephone line on 020 3299 4826 or email kch-tr.accessibility@nhs.net