

Simulated Endoscopy Procedure no.3

You have just finished performing a colonoscopy and gastroscopy on a **62-year old male patient** at **Toronto General Hospital** in the **Endoscopy Unit**. Prior to beginning the procedure, **you received consent from the patient after explaining to him the risks and benefits**. You also completed the **endoscopy safety checklist with members of the care team**.

The patient was seen because of **odynophagia, weight loss and possible indeterminate colitis**.

He had a prior **cholecystectomy** and receives treatment for **mild chronic renal failure**.

You asked the patient about their compliance with their prep and the patient told you they completed a **split PEG prep**.

Before beginning the colonoscopy, you completed an abdominal exam and digital rectal examination which were **unremarkable**. You then completed a perianal exam and **found an external hemorrhoid**. You asked the nurse to administer the following sedation; **VERSED 2mg and FENTANYL 50mcg intravenously**.

You instructed the patient to lay on their **left side** and to bend their legs. You introduced the adult colonoscope through the **anus** and you were able to navigate to the **terminal ileum without complication**. Overall, you thought the preparation quality was **adequate but required additional irrigation**.

You visualized mild colitis in the rectum and sigmoid colon, approximately 20cm in length. The tissue was friable and you could see erosions and erythema. You suspected it may be ulcerative colitis. You took 4 screening biopsies with cold forceps in the sigmoid colon approximately 2cm apart from each other. You did not observe any other abnormalities in the ascending, transverse, and descending colon.

Before withdrawing the colonoscope, you retroflexed and **did not observe anything remarkable**. You then fully withdrew the colonoscope and instructed the patient that their colonoscopy was complete.

While the nurse prepared for the gastroscopy, you asked the patient to move up on the bed and lay on their **left side**. The nurse administered **Lidocaine spray** to their pharynx and placed a mouth piece in the patient's mouth.

You slowly inserted the gastroscope into the patient's **mouth**. You were able to navigate to the **2nd portion of the duodenum without complication**. Overall, you thought the visualization was **excellent**.

You visualized 3 columns of esophageal varices that were small and straight in the distal esophagus. The varices were approximately 3cm in length and there were no signs of recent bleeding.

No esophagitis or Barrett's esophagus was observed. In the antrum of the stomach, there was mild gastritis with erythema. Retroflexion of the fundus and cardia **were normal**. The duodenum was normal as well.

Overall the patient tolerated the **procedure well** and was returned to the recovery room in **good condition**.

Based on what you observed from the findings, you will follow-up with pathology regarding the biopsies and communicate the results with the referring doctor. You will also schedule a follow-up gastroscopy to band the esophageal varices in 2 weeks.