Triple Scope

How do we prepare for a Triple Scope?

8 hours before the procedure, your child **must not** eat any solid food, or drink any liquids that are not clear (see-through). **No red or purple colored liquids**. These can stain the tube from your mouth to your stomach called the esophagus and the stomach making it look bloody. See list of clear liquids below.

2 hours before the procedure stop all clear liquids. Your child should not eat or drink anything until after the procedure.

Clear liquids include:

- Water
- Gatorade®

- White grape juice
 Kool-Aid®
- Apple juice
- Popsicle®

Jell-O[®] (no pieces of fruit or other food in it)

No milk or dairy products. You can't see through these.

Please note: It is important that you follow these special instructions. If your child eats or

drinks anything after the times listed above, the test may be cancelled.

What is a Triple Scope?

After your Aerodigestive clinic visit, your child may need more testing. Testing may be one or more endoscopies. We call these coordinated tests a Triple Scope.

An endoscopy lets the doctor look inside your child's body. The doctor will use a small camera that goes through the mouth or the nose. Your child will not be awake during any painful procedures. To keep your child comfortable, they will be given general anesthesia or sedation medicine.

A triple scope means your child will have more than one area looked at during this visit. More than one provider will be looking to get the information needed to best help your child.

What endoscopies are included?

- Endoscopy (EGD). A doctor called a gastroenterologist uses a flexible endoscope to look inside the body. They see the esophagus, stomach, and small intestine. The doctor often takes small samples of tissue called biopsies.
- Flexible bronchoscopy and bronchoalveolar lavage (BAL). This is a test that lets your doctor look at the airways and lungs. It is done using a thin tube called a bronchoscope. Sometimes samples of mucus are taken from the small airways. A small amount of salt water, called saline, is put through the bronchoscope. This rinses the airway. The saline and mucus are suctioned back through the tube. They are sent for testing and cultures.
- Laryngoscopy and rigid bronchoscopy. An ear, nose and throat doctor may use a flexible endoscope to see the upper airway. This may be done awake or asleep. It will depend on your child's comfort. This test looks at the nose, palate, adenoids, tonsils, back of the tongue and voice box. A rigid bronchoscopy is a steel endoscope that is used through the mouth to examine the trachea (windpipe) and branches of the airway.





Before the tests

A nurse from Day Surgery will call you 2 to 3 days before the test to:

- Ask you about your child's medical problems, medicines, and allergies.
- Make sure your child does not have a fever, cold or other illness.
- Provide a specific times your child must stop eating and drinking. Be sure to write this down.
- Tell you what time to come to the hospital. Please remember, the time you were given when the test was scheduled is only an approximate one. The schedule can change at any time.

If your child has diabetes or other health problems, please contact your doctor or clinic to let them know your child is having a procedure.

After the tests

When the triple scope is done, your child will go to the Recovery Room for a short time. Your child may need some oxygen for a while right after the scope. This sometimes happens because of general anesthesia.

Your doctors will tell you if your child can go home the same day or need to stay overnight.

If your child can be discharged home the same day, then your child will return to Day Surgery. Your child may go home once they are awake and alert. This may take several hours.

If your doctors recommend that your child stay overnight, they will discuss this plan with you. Sometimes, your doctors may recommend that your child stay overnight in an intensive care unit. This is so your child can be closely watched.

Each child feels different after these tests but there are some common side effects. Your child may have a sore throat. They may also have a hard time swallowing. This will go away within 24 to 48 hours after the test. Acetaminophen may be given.

Your child may develop a cough after the test. If a BAL was done, your child may have fever for 1 to 2 days after the procedure.

The results of the biopsies will be ready in about 7 days. A member of your child's health care team will call you with results. Call after one week if you have not heard from them.

Possible risks

- An allergic reaction to anesthesia or medicine can happen.
- The endoscopy could injure the structures being looked at during the procedure. There is a risk for bleeding. Rarely, a hole is made in the esophagus, intestine, or airway. More surgery may be needed.
- Infections like pneumonia may happen after anesthesia.



Other information:

- If you need to cancel the test, call the GI Clinic at (414)266-3690, Monday through Friday.
- If it is the day of the test and you have questions about the time of the test or your child's health, please call Day Surgery at (414)266-3536, Mon through Friday.

Other helpful resources

- <u>http://moviegi.com</u> This web page has videos in English or Spanish that explain different digestive problems and procedures.
- <u>https://childrenswi.org/patients-and-families/milwaukee-campus/guide-to-</u> <u>surgery/preparing-for-surgery</u> This is a guide to prepare for surgery.

For other health and wellness information check out this resource: https://kidshealth.org/ChildrensWi/en/parents

This sheet was created to help you care for your child or family member. It does not take the place of medical care. Talk with your healthcare provider for diagnosis, treatment, and follow-up.