

Patient/Legal guardian's informed consent

to a medical procedure pursuant to Section 34 and Section 35 of Act No. 372/2011 Coll., on Healthcare Services, as amended

GASTROSCOPY

Patient's name and surname:

Birth registration number:

Patient's legal guardian (name and surname, date of birth):

Relationship to the patient:

Objective, nature and intended benefit of the procedure:

Gastroscopy is an examination of the oesophagus, stomach and duodenum to rule out pathological findings using a gastroscope, which is a thin flexible optical tube that enables imaging of the examined area. If a pathological finding is suspected, it is possible to take small (microscopic) mucosal samples for histological examination using this device. The collection of samples is painless. Some interventions can also be performed during the procedure - see explanation in the paragraph "Description of the procedure".

The examination process will be as follows:

Before the procedure: Preparation prior to this examination is not difficult. You can have a light dinner the evening before the examination, but you can no longer eat or drink on the day of the procedure. If you take any regular medication, only take them after the examination, unless your doctor tells you otherwise, such as in case of anti-hypertensives (medicines used to lower blood pressure). If you have any doubts or questions about "skipping" your regular medication, contact the physician who prescribed your medication.

The course of the examination: Just before the start of the procedure, your throat may be numbed with a local anaesthetic spray (at the physician's discretion). Premedication (a sedative) may also be administered intravenously to calm and relax you. Lying on your left side, an endoscopic device will be inserted into your oesophagus, stomach and duodenum through a mouthpiece, which you will hold in your mouth throughout the procedure (your airways remain unobstructed throughout the examination). If necessary, mucosal samples will be collected during the examination, or minor painless procedures may be performed. You may temporarily feel nausea, gagging or abdominal pressure during the procedure. These problems are normal and will pass after the procedure. The procedure takes approximately 5-10 minutes.

After the procedure: If necessary, sit in the waiting room and wait for the effects of the administered medication to subside. The local anaesthetic (sprayed into your throat) affects swallowing, so you should only eat and drink after the anaesthetic has worn off – about 1 hour.

Restrictions and recommendations to the patient's way of life with regard to his/her state of health and possible changes in medical fitness after the performance of the medical procedure:

If you were given premedication for sedation, avoid driving and other activities that require extra attention on the day of the examination. Otherwise follow the advice of the attending physician.

Risks and complications of the procedure:

Gastroscopy can lead to certain complications, such as an allergic reaction to the administered drug, perforation of the examined part of the digestive tract or bleeding. These complications are rare, but may require acute treatment or even surgery. Tissue sampling only leads to minor negligible bleeding, unless you have an increased tendency to bleed.

Alternative treatment options:

At present, there is no alternative procedure enabling an examination of the oesophagus, stomach and duodenum, while taking mucosal samples for further examination or possible intervention in one medical procedure.

Healthcare professional declaration:

I hereby declare that I have informed the above patient (legal representative) in an understandable manner about his/her health condition (the health condition of the person represented by him/her) as well as about all the facts mentioned above, the planned procedure, the treatment procedure, including the warning of possible complications.

In Prague, on

Healthcare Professional name and signature

Patient's (Legal Representative's) informed consent:

By signing below, I declare that the health care professional has clearly informed me about the procedure's purpose, nature and course and have been informed about the possible risks of the procedure. I have asked the healthcare professional additional questions*, and my questions have been answered. Based on the information provided and after due consideration, I give my consent to the procedure.

In Prague, on

Patient's (Legal Representative's) signature

If the patient (legal representative) cannot sign, a witness who was present when the consent was given shall sign:

Witness's name and surname:

Reason for not signing consent:

The way in which the patient has expressed his/her will:

In Prague, on

Witness's signature