



Sedation, and getting home safely

What you need to know before and after the test

PE-PROC-17

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Most endoscopy tests can be done in more than one way, and the choice affects the rest of your day far more than it affects the test itself. Read this before your appointment, because one of the options requires you to arrange for someone to take you home.

Before you come, whichever option you choose

- Have nothing to eat for six hours before your appointment, and clear fluids only up to two hours before. This applies to an unsedated test and to throat spray as well, because sedation may still be needed on the day.
- Take your regular medicines with a sip of water unless you have been told otherwise. If you take insulin or tablets for diabetes, telephone the endoscopy unit beforehand so the dose can be adjusted around the fast.

Your options

Option	What it means for you
Throat spray only (gastroscopy)	A local anaesthetic sprayed on the back of the throat. You stay fully awake and remember the test. No escort needed; you may drive home and go back to work – but have nothing to eat or drink for about an hour until your throat is no longer numb.
Gas and air (Entonox)	Breathed in during the test and wears off within minutes. No escort needed; you are fit to drive about 30 minutes afterwards.

No sedation at all	Many people have a colonoscopy or a short test this way, and most report little discomfort. No escort needed.
Sedation through a drip	A sedative, sometimes with a painkiller. You become drowsy and relaxed and usually remember little. An escort is required, and the 24-hour rules below apply.
General anaesthetic	Used for long or complex procedures. Arranged with the anaesthetic team, with its own instructions.

If you choose sedation

Sedation is not the same as a general anaesthetic. You will be sleepy and comfortable rather than unconscious, and you will be able to respond to the team. Most people remember little or nothing afterwards, which is why we go through your consent before any sedation is given, and why we give you written results to take home – anything explained to you in the recovery area may not stay in your memory. Bring someone with you if you would like them to hear the results too.

The escort rule

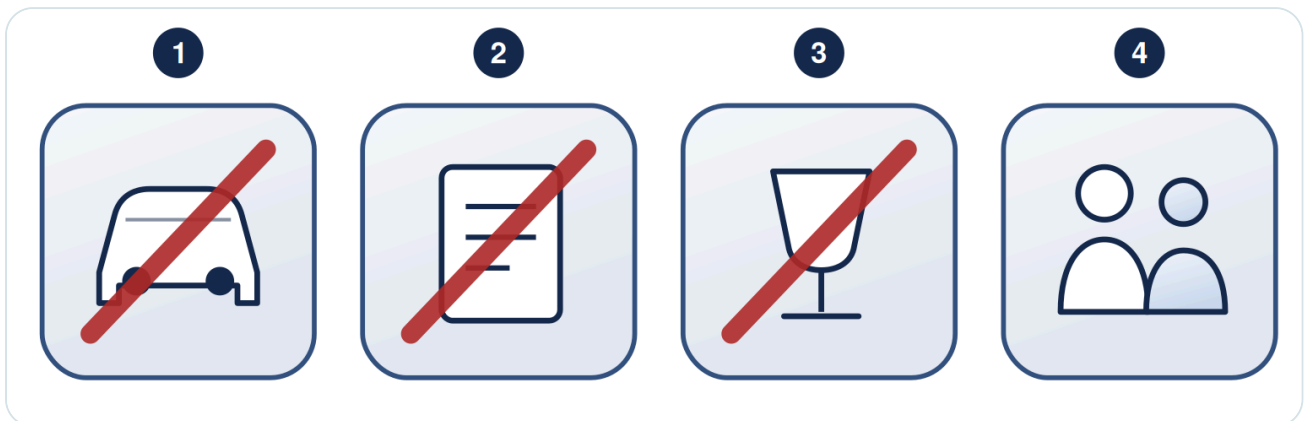
- A responsible adult aged 18 or over must take you home. You may go by car or taxi, but not alone.
- Someone should be available to support you for the next 24 hours. They do not have to sit with you the whole time, but you should not be entirely on your own.
- If you cannot arrange this, tell the endoscopy unit before the day rather than on the morning. We can often do the test with throat spray, with gas and air, or with no sedation, none of which need an escort – which is far better than cancelling.

For 24 hours after sedation, do not

- drive a car or ride a bicycle;
- operate machinery, cook, or use anything hot or sharp;
- sign legal documents or make important decisions;
- drink alcohol, or take sleeping tablets;
- be the only adult responsible for a young child or a dependent person.

The reason is not that you will feel drowsy – you may well feel perfectly normal. It is that sedative medicines affect judgement and reaction time for longer than they

affect how alert you feel, and you cannot reliably judge this in yourself. Driving while your reactions are impaired by medicines is an offence and you may not be covered by your insurance.



For 24 hours after sedation: 1 do not drive or cycle 2 do not sign documents or make important decisions 3 no alcohol 4 a responsible adult takes you home and stays within reach

The risks of sedation

Sedation is safe but not risk-free. Brief dips in oxygen level or blood pressure are common and are treated on the spot – this is why your breathing, pulse, blood pressure and oxygen are monitored throughout and why oxygen is given through the nose. Serious problems are rare. The risk is higher if you are elderly or frail, have significant heart or lung disease, sleep apnoea or a high body weight, or take regular strong painkillers. Tell the endoscopy unit about all of these beforehand. Medicines that reverse the effect of some sedatives are kept in the room and are used if they are needed, though not every sedative has one – which is why the monitoring, and not the reversal drug, is what keeps sedation safe.

Before you go home

You will be assessed formally to make sure you are fit to leave: back to your normal level of alertness, with pulse, blood pressure and breathing back to normal, and any discomfort dealt with. Your escort must be present before you are discharged. Ask for your findings in writing, and ask any question you have then – it is easier than trying to remember later.

At home, contact the endoscopy unit or go to the Emergency Department if you develop chest or abdominal pain, breathlessness, fever, or bleeding – do not put these down to the sedation.

For appointments and questions, contact the endoscopy unit using the numbers it has given you. If you are seriously unwell, or it is outside working hours, go to the Emergency Department rather than waiting for a reply. Version 1.0 · review date October 2028.

This leaflet is general information and does not replace advice from your own doctor.

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