



PACIFIC COAST CARDIOLOGY & RESEARCH

PATIENT PRE-TEST INSTRUCTIONS:

Transesophageal Echocardiogram

1. Nothing to eat or drink for 6 hours prior to the exam
2. If you have dentures or dental prostheses, you may need to remove them before the test.
3. You will not be able to drive for at least 12 hours after the procedure.
4. Be sure to make arrangements in advance for someone to pick you up after the test.

***YOU SHOULD NOT STOP ANY MEDICATIONS WITHOUT CONTACTING YOUR PRESCRIBING DOCTOR. USE THE FOLLOWING LIST IN ORDER TO SPEAK WITH YOUR DOCTOR:

Commonly Used Beta Blockers: Blocadren (timolol), Coreg (carvedilol), Inderal (propranolol), Lopressor (metoprolol), Tenormin (atenolol), Toprol –XL (metoprolol), Trandate (labetalol), Visken (pindolol), Bystolic.

Caffeinated Food and Beverages: Coffee including “decaffeinated”, teas, cocoa and any food containing cocoa (chocolate), and soft drinks.

Transesophageal Echocardiogram

An echocardiogram (also called an echo) is a type of ultrasound test that uses high-pitched sound waves that are sent through a device called a transducer. The device picks up echoes of the sound waves as they bounce off the different parts of your heart. These echoes are turned into moving pictures of your heart that can be seen on a video screen.

For this test, the probe is passed down the esophagus instead of being moved over the outside of the chest wall. TEE shows clearer pictures of your heart, because the probe is located closer to the heart and because the lungs and bones of the chest wall do not block the sound waves produced by the probe. A sedative and an anesthetic applied to the throat are used to make you comfortable during this test.

Why It Is Done

Transesophageal echocardiogram (TEE) may be done to:

Monitor heart function during surgery.

Check how well an artificial heart valve works.

Look for masses or blood clots in the upper left chamber (left atrium) of the heart.

Identify abnormal blood flow between the chambers of the heart (cardiac shunt).

Help find out if you have endocarditis.

Guide procedures done during cardiac catheterization.

Help find out if you have a tear in the aorta (aortic dissection).

How to Prepare

Do not eat or drink for at least 6 hours before the TEE.

If you have dentures or dental prostheses, you may need to remove them before the test.

Before TEE, you will be given a sedative. You will not be able to drive for at least 12 hours after the procedure. Be sure to make arrangements in advance for someone to pick you up after the test.

Before an echocardiogram, you will typically be asked to sign a consent form. Talk to your doctor about any concerns you have regarding the need for the test, its risks, how it will be done, or what the results will indicate.

How is it Done

Your throat may be numbed with an anesthetic spray, gargle, or lozenge to relax your gag reflex and to ease insertion of the probe. Shortly before the procedure begins, an IV line will be placed in a vein in your arm. Medicine to decrease saliva and stomach secretions may be given through the IV. A pain medicine and sedative will be given to you through the IV in your arm during the procedure. You should feel relaxed and drowsy but still alert enough to cooperate.

Your heart rate, breathing rate, and blood pressure will be monitored throughout the procedure. Also, a small device used to measure the amount of oxygen in your blood (pulse oximeter) may be attached to your finger or earlobe.

You will be asked to lie on your left side with your head tilted slightly forward. A mouth guard may be inserted to protect your teeth from the probe. Then the lubricated tip of the probe will be guided into your mouth while your doctor gently presses your tongue out of the way. You may be asked to swallow to help move the tube along. It may be helpful to remember that the instrument is no thicker than many foods you swallow. When the probe is in your esophagus, it will be moved down gently to the level of your upper right heart chamber (atrium), and ultrasound images will be taken. You will not feel or hear the sound waves during the test. You

may receive an IV injection of saline or contrast dye to help your doctor assess your heart function.

During the procedure, try not to swallow unless requested. An assistant may remove the saliva from your mouth with a suction device, or you can just let the saliva drain from the side of your mouth. A transesophageal echo is generally painless, though you may feel nauseated and uncomfortable while the probe is in your throat.

The test takes about 2 hours. The probe will be in place in your esophagus for about 10 to 20 minutes.

During the test:

You may notice a brief, sharp pain when the intravenous (IV) needle is placed in a vein in your arm.

The anesthetic sprayed into your throat may taste bitter and will make your tongue and throat feel numb and swollen. Some people report that they feel as if they cannot breathe at times because of the probe in their throat, but this is a false sensation caused by the anesthetic. There is always plenty of breathing space around the probe in your mouth and throat. Remember to relax and take slow, deep breaths.

You may gag and feel nauseous, bloated, or have mild belly cramps when the probe is moved. If the discomfort is severe, alert your doctor with an agreed-upon signal or a tap on the arm. Even though you won't be able to talk during the procedure, you can still communicate.

The IV medicines will make you feel sleepy. Other side effects-such as heavy eyelids, trouble speaking, a dry mouth, or blurred vision-may last for several hours after the test. You probably will not be able to remember much of the test.

After the test:

You may have a tickling, dry throat; slight hoarseness; or a mild sore throat. These symptoms may last for 2 to 3 days. Throat lozenges and warm saltwater gargles can help relieve these symptoms.

Do not drink alcohol for 24 hours.

Contact your doctor immediately if you have:

Difficulty swallowing or talking.

Shortness of breath or a fast heartbeat.

Chest pain.

Risks

A transesophageal echocardiogram (TEE) can sometimes cause:

Nausea.

Mouth and throat discomfort.

Minor bleeding.

Trouble breathing.

Slow or abnormal heartbeats.

Insertion of the probe may tear or puncture your esophagus. This is rare.

This test is not recommended if you have:

Had recent radiation treatment to your neck or chest.

Serious problems with your esophagus, such as a very narrow esophagus, dilated (engorged) veins in the esophagus that could rupture and bleed (esophageal varices), or severe arthritis of your neck.

Trouble swallowing.

A bleeding disorder, such as hemophilia.

Results

Results are usually available within 48 hours.