



# CAPSULE PROCEDURES

THE TRICKS OF THE TRADE, PITFALLS AND LESSONS LEARNED

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# INFORMED CONSENT NOT FULLY UNDERSTOOD

- Verify patient understanding about capsule procedure
- Call physicians to further explained procedure to patient.
- Further explanation of the procedure, if needed, and to answer patient's concerns and questions.



## REFUSED TO SWALLOW CAPSULE OR CAN'T SWALLOW CAPSULE

- Encourage the patient to explore why they are concerned
- Identify if there is a real medical reason for their concern (Known or suspected stricture, dysphagia)
- Fear of the unknown because the capsule is going where no man has gone before.
- Educate, briefly explain why they are doing the test, comfort and motivate them positively
- Call MD, schedule endoscopy if the concern is valid such as diagnosed dysphagia.





# CAPSULE STAYS IN ESOPHAGUS

- Pill complains they feel the capsule is stuck in esophagus.
  - Confirm location of capsule with the Live Video feed
  - If needed have the patient swallow big gulp water
  - Have patient relax and concentrate breath in and out.
  - Chest stretching (spread your wing and closed arm to chest)





## PATIENT HAS HAIRY CHEST AND DECLINES TO CLIP HAIR.

- Explain the need along with the benefits of the study to potentially provide answers needed to complete their health picture.
- No shave sensor may not pick-up capsule data (we don't want you to have to do this test twice).
- Capsule data examination provides your physician with the additional Information above and beyond your EGD and Colonoscopy to complete the visualization of your GI tract to hopefully find the source of your symptoms.



## DURING THE 2 HOUR VIDEO STATUS CHECK, YOU IDENTIFY THE PILLCAM IS STILL IN STOMACH.

- Asks another experienced capsule nurse to recheck/confirm capsule location
- Position patient on their **right side** for 30 minutes to 1 hour.
- Call MD if there is a need for Erythromycin or Reglan (contraindicated in patient with **heart problems**).
- For outpatient procedures, they can go home with data recorder and return next **morning**.
- For inpatient procedures, data recorder should remain on patient until procedure has ended. In certain cases, it may include overnight.





# MOVING/WALKING FOR 2 HOURS AFTER SWALLOW (DIABETIC AND FRAIL PATIENT)

- Positively encourage movement and walking as much as possible as a way of ensuring the capsule moves through the GI tract for a successful study.
- Alternate sit/walk to promote increase Motility/Movement
- If they have been previously diagnosed with Gastroparesis, encourage them to move often
- As a patient with diabetes they may be concerned about not eating
- Educate the patient on what's acceptable during the study, encourage their full cooperation for a successful study, monitor their success

## NOTES TO KEEP IN MIND FOR IN-PATIENTS:

- Golytely is given to rinse small bowel to achieve optimal viewing of the lumen.
- Capsule is disposable and capsule nurses DO NOT need it back – you don't want it back!