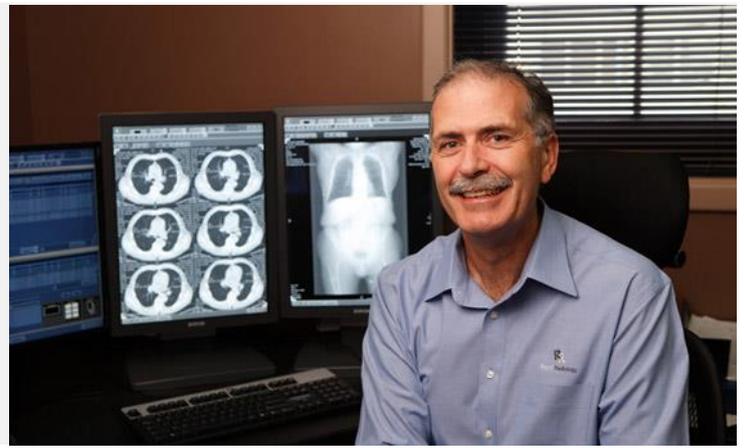


Name: \_\_\_\_\_

MRN: \_\_\_\_\_

Appointment Time: \_\_\_\_\_ AM / PM

Appointment Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_



## BARIUM SWALLOW PATIENT INFORMATION

### What is a Barium Swallow?

A Barium Swallow allows the radiologist to view the upper gastrointestinal tract (the pharynx and oesophagus). This is achieved by swallowing one to two cups of a barium solution, which coats the lining of the oesophagus making it visible on x-ray. The examination is performed in the main radiology department by a radiologist and a radiographer.

### What preparation is involved?

You are required to fast from food and fluids for 4 hours before your examination.

If you are a diabetic please inform reception staff when making your booking and we can ensure that you are given an appropriate appointment time.

### Can I take my medications as normal?

All your medications can be taken as normal. On the morning of your examination, these medications can be taken with small sips of water. If you have any concerns, please contact our nursing staff on 8275 1961 during business hours.

### What will happen during the examination?

You will be required to change into a hospital gown for the examination. You will be given a barium solution to drink. The radiologist will view x-ray images on a computer monitor as the barium passes down your oesophagus. A series of x-ray images will be taken and you may be asked to change positions several times so all of your swallowing action may be seen on x-ray.

### Please Note:

#### Please bring the following to your appointment:

- Request form (if referral from GP / Specialist)
- Medicare Card
- Any relevant previous x-rays

#### Obtaining your results:

Your images will be processed and then reported by a Radiologist. A copy of the report will be sent back to the doctor / specialist who referred you for the examination.

You will need to follow up the results of your examination with your referring doctor / specialist.

#### Repatriation General Hospital

Daws Road, Daw Park, South Australia 5041

Ph: 8275 1906 | F: 8275 1116

www.repatradiology.com.au | repat.radiology@health.sa.gov.au

Opening Hours: Monday—Friday, 8.30am—5pm

## BARIUM SWALLOW PATIENT INFORMATION

### How long will the examination take?

The Barium Swallow will take approximately 20-30 minutes.

### Are there any risks?

The examination will involve a small dose of x-ray radiation. The potential benefits of diagnosing a medical condition are believed to be greater than the risks from receiving a small dose of x-ray radiation.

**Before your x-ray please let the Radiographer know if you are, or think you may be pregnant.**

### What happens after the examination?

After the examination you will be able to eat and drink as normal.

You will be offered a drink and something to eat before you leave the department.

You are encouraged to drink plenty of fluids when you go home to avoid constipation.

### Can I drive after the examination?

You will be able to drive after the examination.

### Who can I contact if I am not sure about something?

If you have any questions at all, please do not hesitate to contact our reception staff on 8275 1906 during business hours and they will assist with your questions, or direct you to the most appropriate staff member to assist you.

### Patient written consent:

There is a patient consent form attached to this patient information sheet that you will be required to complete in the presence of a radiology staff member. Any questions or concerns can be raised with the radiology staff member at this time.

Version1 Created November 2017 (Review November 2018)

### Questions?

Please feel free to call us on 82751906 for any questions before or after the procedure and you will be directed to the appropriate health care professional.

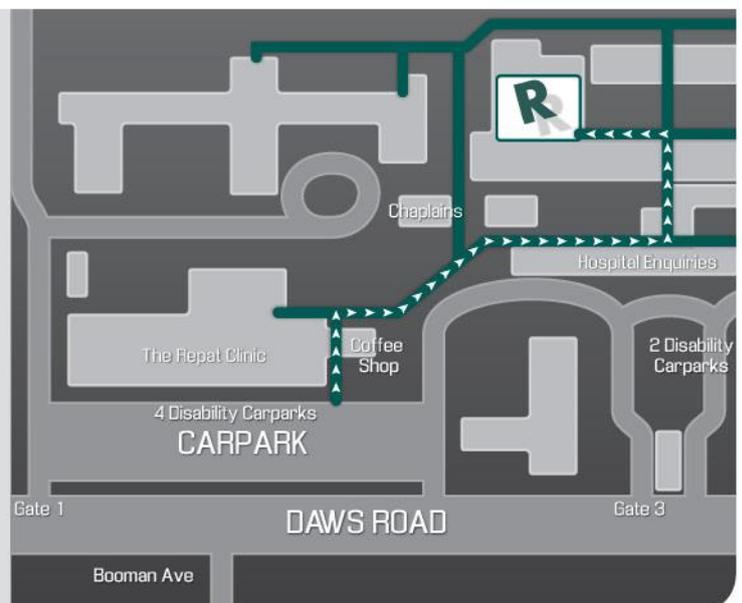
### Where can I park?

You may park your car on Daws Road, or in the "Clinics" outpatients car park, this is the first entrance on the left off Daws Road. Follow the walkway to Repat Radiology, it is well signposted.

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**Opening Hours:** Monday—Friday, 8.30am—5pm



Surname:
Given name(s):
Date of birth:
Sex:
MRN:

I \_\_\_\_\_ have been given the **Barium Swallow Patient Information Sheet**.

I have read or have had read to me the patient information sheet and consent to have the procedure.

- I have been informed of the risks and benefits of this procedure.
- I was able to ask questions and raise any concerns about the proposed procedure. My questions and concerns have been discussed and answered to my satisfaction.
- I understand I have the right to change my mind at any time including after I have signed this form.

My signature below is evidence that I give my consent to have this medical procedure performed.

Patient Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Radiologist/delegate statement**

I have explained to the patient the proposed procedure and confirm that the above named patient has read or has had read to them and understands the patient information sheet. The patient has consented to proceed with the procedure.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Designation: \_\_\_\_\_

**Additional information discussed with patient:**