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Local Transoesophageal Echocardiogram (page 1 of 2)

We have arranged for you to have a Transoesophageal Echocardiogram. This leaflet gives you some information about the procedure and what you can expect before, during and after your hospital visit. The test will be performed in the cardiac suite on level 4.

What is a transoesophageal echocardiogram?

It is a scan of the heart using ultrasound. An ultrasound probe mounted on a thin flexible tube will be passed through your mouth into your gullet. Like a transthoracic echocardiogram (an ultrasound from the front of the chest) which you may have had, it produces moving pictures of the heart as it is beating and shows the blood flowing through the heart valves. Clearer and more accurate pictures can be obtained via the oesophagus. This is because the oesophagus lies immediately behind the heart and there is no interference from the ribs or lungs.

Why am I having it?

The pictures of the beating heart show up on a monitor and the doctor can tell in more detail if the heart muscle is contracting normally, and establish the severity of any heart valve problem. Other structural valve abnormalities may be identified such as Endocarditis or a cardiac cause for a stroke.

Special preparations

Before your procedure

- you must not eat or drink anything for at least 4 hours before the test
- if you are on Warfarin please let your consultant know. You must not stop taking any of your medications unless instructed to do so by the doctor
- bring into hospital a list of any medications you are taking
- please do not wear jewellery, make up or nail varnish, or bring any valuables with you.

On the day of the procedure

- before the test you will be asked to sign a consent form
- the test is normally performed as a day case unless otherwise discussed with you
- you will be asked if you want a sedative. If you do, a small needle will be put into your arm

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- you will be given a hospital gown to change into
- the nurse will complete a checklist and ask you about things such as allergies, swallowing problems or loose teeth. Your blood pressure and pulse will be taken. If you are on warfarin you may have a blood test to check your INR level
- you will be taken in the cardiac laboratory where the test will take place.

What does it involve?

- a cardiologist will perform the test, helped by a cardiac physiologist and a nurse
- an anaesthetic spray is used to numb the back of the throat and you will be asked to swallow
- you will be asked to lie on your left side. When you are ready a mouth guard is placed between your teeth. This protects the probe and your mouth
- if you require a sedative it will be given through the needle in your arm. When you are sufficiently sleepy the probe is gently passed through the guard and over the tongue. At this stage you will be asked to swallow. This allows the probe to pass down into the oesophagus
- your oxygen levels will be monitored with a 'clip' lightly attached to your finger
- the probe is moved around and a series of pictures are taken. You may feel slight discomfort during the test. The test usually takes no more than 30 minutes.

After the procedure:

- after the pictures have been taken the probe is removed and you will be taken back to the recovery area and allowed to rest
- the nurses will check your blood pressure and pulse at regular intervals until the sedation wears off
- when the throat spray has worn off and you are able to swallow normally you will be offered something to drink
- the results and any treatment will be discussed with you before you go home
- if you had the sedative injection you will need to stay in hospital for 1-2 hours before you can be discharged. It is essential that someone comes to collect you and that you have someone stay with you overnight. You must not drive, make any important decisions or sign any important documents, operate machinery or drink alcohol for 24 hours
- if you did not have a sedative injection you can get dressed again and go home. You should not have anything to eat or drink for 30 minutes and nothing hot for 1½ hours until the spray used to numb your throat has worn off.

What are the possible complications?

This is a safe procedure and complications are rare.

There is a small risk of damage to the gullet but this rarely causes any major problems. Dental damage could occur but you will be asked about vulnerable teeth beforehand.

The most common complaint is a sore throat.

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