

Procedure Date: 15/02/2024

Site: Box Hill - Endoscopy 1

Patient:	EVANS, Warren
URN:	2055617
DOB:	11/02/1964
Address:	11 Barton Ave Ferntree Gully 3156
Medicare:	30169468991

UPPER GI ENDOSCOPY REPORT

Endoscopist 1: DR VINNA AN

Endoscopist 2:

GP: DR Sybilla Maria Fievez

Anaesthetist: DR CHRIS KAY

Indication

Iron deficiency, Anorexia.

Findings & Interventions

The endoscope was inserted to the second part of the duodenum with ease.

Oesophagus: Z-line at 38 cm.**Stomach:** There was moderate gastritis in the antrum. There were two, medium-sized ulcers in the antrum. The ulceration appears to be at an advanced healing stage, with incomplete re-epithelialization.**Duodenum:** There was moderate erythematous duodenitis in the 1st part of the duodenum. There was a small ulcer in the 1st part of the duodenum. The ulceration appears to be at an advanced healing stage, with incomplete re-epithelialization.**Specimens for Pathology**

Biopsies taken from the antrum, body and 2nd part of the duodenum and the region of the gastro-oesophageal junction for histology.

Diagnosis

Gastritis.

Gastric ulcers.

Duodenitis.

Duodenal ulcer.

Post-procedure instructions

Routine post-anaesthetic obs.

Follow up / Discharge Plan

See colonoscopy report for follow up details.

Signed**DR VINNA AN**

Copies To:

DR Sybilla Maria Fievez

Procedure Date: 15/02/2024
Site: Box Hill - Endoscopy 1

Patient:	EVANS, Warren
URN:	2055617
DOB:	11/02/1984
Address:	11 Barton Ave Fernree Gully 3156
Medicare:	30169468991

COLONOSCOPY REPORT

Endoscopist 1: DR VINNA AN
Endoscopist 2:

GP: DR Sybilla Maria Fievez
Anaesthetist: DR CHRIS KAY

Indication

Iron deficiency.

Preparation

The bowel preparation was average. Lots of seeds impeding suction and lavage.

Findings & Interventions

The colonoscope was inserted to the terminal ileum. The caecum was identified by the ileo-caecal valve, appendiceal orifice and tri-radiate caecal folds.
The ileum appeared normal.

Moderate diverticulosis was evident in the sigmoid colon. There was a diminutive (<5mm) polyp in the transverse colon. This was completely resected using a cold snare and retrieved for histology. There was a diminutive (<5mm) polyp in the sigmoid colon. This was completely resected using a cold snare and retrieved for histology.

There were moderate sized, internal haemorrhoids noted.

Specimens for Pathology

Polyps taken as described in the findings above.

Diagnosis

Diverticular disease.

Colonic polyp(s).

Haemorrhoids.

Post-procedure instructions

Routine post-anaesthetic obs.

Follow up / Discharge Plan

Follow up in BHH - Colorectal Clinic - 30 days - Reg review via telephone.

Signed

DR VINNA AN

Copies To:
DR Sybilla Maria Fievez