

High Resolution Esophageal Manometry (HREM)

Location: Beebe Gastroenterology Office
33663 Bayview Medical Drive, Unit 2, Lewes, DE 19958

Test Preparation:

- DO NOT EAT OR DRINK AFTER MIDNIGHT THE NIGHT BEFORE THE TEST.

Failure to follow the food and drink restrictions may cause your procedure to be rescheduled.

- Medications that need to be taken regularly, such as high blood pressure, heart medication and diabetes, can be taken with small sips of water when you awaken in the morning.
- If you have diabetes, skipping breakfast may affect your need for diabetic medication. This should be reviewed with your physician or health care provider.
- Other medications that are not essential should not be taken on the day of the test until after the test is completed.

Please bring the following items with you:

- Insurance card
- Picture ID

If you arrive more than 15 minutes late, your procedure may be rescheduled or delayed

***If you need to cancel or reschedule your procedure,
please call (302) 645-9325 at least 24 hours in advance***

High Resolution Esophageal Manometry (HREM) (con't)

You are scheduled for an esophageal manometry. This is a test that measures the movement and pressures (or motility) within your esophagus. Esophageal manometry is performed by trained nursing staff and generally takes about 30-40 minutes. You will be able to swallow, talk, and breathe without any difficulty during the test.

This test may be used for people who have:

- Trouble or pain when swallowing
- Heartburn
- Non-cardiac chest pain
- Gastroesophageal reflux disease (GERD)

In addition, this test may be used in pre-operative evaluation if you are being considered for anti-reflux surgery.

Before starting the procedure, a member of our team will ask you to sign an informed consent indicating that you understand the procedure, its benefits and risks, and the alternatives for an esophageal manometry.

How is the test performed?

The nurses will guide you with instructions during the test on what to do. Your nose will be numbed with a topical anesthetic to minimize some discomfort. A small catheter will then be inserted through your nose and into your stomach-this step may still include mild discomfort and/or gagging but will pass once the tube is in place.

With the catheter in place, the test will begin. You will be asked to take deep breaths and swallow a number of times with normal saline (a salt and water solution) both laying down on your back and sitting up.

There will be times when you will be asked NOT to swallow at all. This can be somewhat difficult but maneuvers such as keeping your mouth open or sticking out your tongue can be helpful.

The nurse will then remove the catheter prior to you leaving the testing center. The recording will then be transferred to a report for review and interpretation by the doctor.

After the test

Patients can usually resume regular activity, eating, and medicines immediately after the test. Since there is no sedation required, you may drive yourself home after the procedure. If you experience a sore throat, taking lozenges or gargling with salt water may alleviate your discomfort.

Risk Information

This is a low-risk test. Potential complications/risks of catheter insertion into the nasal passage include: discomfort, nasal pain, minor bleeding, runny nose, throat discomfort, irregular heartbeat with dizziness, and perforation. In rare instances, during insertion the catheter may be inserted into the larynx (or windpipe) and causes choking. When this happens, the problem usually is recognized immediately, and the tube is rapidly removed.