Esophageal Manometry

Patient name: _	
Date of test:	
Time to arrive:	

Go to Cook Children's Medical Center **Pavilion Registration Area 2.**

After registering you go to the Special Procedure Waiting Area.

Esophageal manometry

Esophageal manometry shows us how well your esophagus muscle and sphincters are working.

The esophagus (e-sof-ah-gus) is a food tube connecting the mouth to the stomach.

A large muscle completely surrounds the esophagus. This muscle slowly squeezes and pushes swallowed food down into the stomach.

At the very top and bottom of the esophagus, the muscle is different. It is very strong. We call these sphincters (sfink-ters). Sphincters can tightly squeeze or they can relax. This causes the esophagus to close or open.

A closed top sphincter keeps swallowed food from going back into the mouth. A closed bottom sphincter keeps stomach food from going back into the esophagus.

Esophageal manometry measures how strong these muscles and sphincters are.

Preparing for the test

- No solid foods 8 hours before the test.
- You may drink clear liquids the first 4 hours.
- Nothing to eat or drink 4 hours before the test.

Clear liquids

- Water
- Clear broth
- Coffee or tea
- Gatorade®
- Kool-Aid®
- Clear Jello®
- Popsicles

How we do esophageal manometry

- We place a very small tube into your nose and gently guide it down into your esophagus.
 Sometimes this tickles and makes you sneeze.
- We connect the tube to a machine that records swallowing. You will take small sips of water during the test
- A nurse is with you at all times, talking to you and helping you be still.
- One parent can stay in the room during the test. No other children are allowed in the room during the test.

At home

- Return to regular activities when you feel ready.
- Your child's doctor will view the test. Your clinic nurse will call you with results, usually within 10 to 14 business days after the procedure.

These instructions are only general guidelines. Your doctors may give you special instructions. If you have any questions or concerns, please call your doctor.



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I have a copy of these home instructions, know what I need to do, and understand why they are important.

Parent/Legal Guardian's Signature

Date

Healthcare Provider's Signature



