

# Department of Gastroenterology & Hepatology



## Criteria for Urgent Endoscopy

- 1) Evaluation of an imaging abnormality that is likely to be clinically significant
- 2) Alarming symptoms and/or findings:
  - a. Overt upper and/or lower GI bleeding WITHOUT symptoms and/or anemia (i.e. the presence of symptoms and/or anemia should prompt clinician to refer patient for hospital admission)
  - b. Iron deficiency anemia [require ferritin  $\leq$  45 ng/mL (not ferritin  $\leq$  15 ng/mL) per AGA guidelines, see Gastroenterology 2018; 154: 1096-101, as this increases sensitivity without only a small change in specificity]. Patients with chronic inflammatory conditions, hemochromatosis, or chronic kidney disease will require additional iron studies including serum iron, transferrin saturation, soluble transferrin receptor and CRP to assess for iron deficiency anemia.
  - c. Dysphagia significantly impairing oral intake
  - d. Unintentional weight loss (loss of  $\geq$ 5% of body weight over a 6-12 month period)
  - e. Bloody diarrhea (however, if dehydration, anemia and/or electrolyte abnormalities are also present, clinician should refer patients for hospital admission)
- 3) Cases where endoscopic evaluation will lead to an urgent and clear change in clinical management:
  - a. Concern for malignancy in a patient with a known pre-malignant condition (e.g. Barrett's esophagus, IBD)
  - b. Concern for graft versus host disease (GVHD) in a patient with a history of bone marrow transplantation
  - c. Concern for immunotherapy associated colitis
  - d. Evaluation required prior to solid organ transplantation (liver, kidney, heart)
  - e. Evaluation required prior to cardiovascular intervention where the administration of antiplatelet and/or anticoagulants could result in GI bleeding
  - f. Evaluation required prior to surgical resection (e.g. patient with known colon cancer who requires that a synchronous lesion be excluded prior to surgery)
  - g. Evaluation of a recent post-surgical patient who has any of the above alarm symptoms and/or findings
- 4) If a patient with a positive FIT or positive Cologuard test has any of the alarm symptoms listed above