



How to Prepare for the pH Bravo Capsule

Patient should not have an MRI within 30 days following the Bravo Capsule placement.

In case of pain, the patient may take over-the-counter pain relievers of the doctor's choice.

The Bravo study takes 48 hours. Patients should return the receiver and their diary promptly after the end of the study.

Patients should, at the physician's discretion, HAVE AS NORMAL A DAY AS POSSIBLE. They can eat, exercise, work and sleep as they normally would, but should keep the Bravo receiver on (or within a yard of) their body. They should limit their drinks to those taken during meals, and not chew gum or eat hard candy for the duration of the study.

PATIENTS SHOULD CAREFULLY KEEP TRACK OF THE FOLLOWING:

- Start/end time of meals and snacks (write down in diary).
- Start/end time of sleeping and naps (write down in diary).
- All symptoms believed to be related to reflux (i.e. heartburn, regurgitation, chest pain, nausea, vomiting, bitter/sour taste, burping, coughing, pain, etc.).
- The appropriate button should be pushed on the receiver and/or the symptom should be written down in the diary as soon as it occurs.
- Patients should carefully handle the receiver: keep it dry and do not drop it.
- If the patient showers, keep the receiver in a dry place outside the shower.
- At the end of the study, return the receiver and diary promptly.

Appointment Date: _____ Time: _____

Discontinue PPI four days prior to the placement of the Bravo Capsule.

Bravo Esophageal pH Monitoring System Study

Description:

Bravo Esophageal pH Monitoring Study allows your physician to analyze how often acid from the stomach backs up or refluxes into the esophagus. For this study, the physician performs an Upper Endoscopy to assist in the Bravo Capsule placement. Upper Endoscopy uses an endoscope: a flexible tube about the thickness of your little finger with a tiny light and camera on the end. Once the endoscope is in the esophagus, the physician attaches the Bravo Capsule to the lining of the esophagus.

Over a 48-hour period, the Bravo Capsule is able to continuously measure the acid level in the lower esophagus.

These measurements are recorded for 48 hours into the Bravo Receiver, which is a small box that can be clipped to your waist or belt. The study can evaluate symptoms of persistent upper abdominal/chest pain or burning, and tightness in the chest, frequently known as heartburn.

During the Test:

Before the Upper Endoscopy to place the Bravo Capsule, you will be given pain & sedative medication through an IV (intravenous) line. You may also have your throat sprayed with a local anesthetic to numb it. You will lie on your side on an examining table. Throughout the procedure, your blood pressure, heart/respiratory rate, and oxygen level will be monitored.

Once you are sedated, the physician will insert the endoscope into your mouth and then gently advance it down the throat and esophagus into the stomach and duodenum. The endoscope is able to transmit an image of the inside of the digestive tract on a TV monitor so that the physician may carefully examine the digestive lining and attach the small Bravo Capsule to the lining of the esophagus. The capsule will remain here for the next 48 hours; transmitting acid levels to a portable data receiver.

The Upper Endoscopy and placement of the Bravo Capsule takes about **15 to 20 minutes**. Due to the sedatives and pain medications, most patients report little discomfort. Some patients do experience a gagging feeling or bloating/pressure feeling in the stomach. With the Bravo Capsule in place, a few patients may have a mild feeling of discomfort, as if something is caught in their esophagus or chest. The Bravo Capsule study lasts **48 hours**.

After the Test:

You will be monitored after the procedure in the recovery area for **at least _ hour** after the placement of the Bravo Capsule, until the effects of the sedative medications have worn off. Because you received sedative medication, your judgment and reflexes will be slow for the rest of the day. You are advised to:

- Avoid driving or operating machinery until the next day.
- Avoid making important decisions or legal decisions.
- Have an adult accompany you home.

Before being discharged from the GI Lab, you will be instructed on how to operate the Bravo Data Receiver. For the most part, you will push one of the three buttons on the receiver to mark the time that you experience a gastric symptom. You will be instructed on how to fill out a diary-activity sheet to keep

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track of your symptoms, food intake, when you lie down, and sleeping or awake times. Unless otherwise instructed, you will be able to resume your diet and take your routine medication after you leave the GI Lab. You should be able to resume your normal activities after the placement of the Bravo Capsule.

Once home, it is important for you to recognize signs and symptoms that need to be reported to your physician. The symptoms are: difficulty swallowing, worsening throat pain (a mild sore throat is normal), chest pains, severe abdominal pain, fevers (above 100.5°), chills or dark stools.

Test Results:

At the completion of 48 hours, you must plan to return to the GI Lab with the Bravo Receiver and your diary-activity sheets. The receiver may be returned to the GI Lab reception desk. The acid measurements will be taken from the monitor, summarized by a computer, and evaluated by your physician. You may then arrange a time to meet with your physician to discuss test results.

After a few days, the Bravo Capsule should fall off of the lining of the esophagus, pass through your stomach and be expelled in a bowel movement. The passing of the Bravo Capsule should be uneventful and without discomfort.

Bravo pH Patient Diary:

The purpose of pH monitoring is to register the frequency and duration of gastroesophageal reflux during a normal day. It is important that you eat, drink, work and exercise as you normally would. Changes in your daily routine may inaccurately reflect your esophageal pH study. **Do not take any Antacid Medications During the Study** (for example: Maalox, Mylanta, Tums, Roloids, Zantac, Tagamet, Pepcid, Axid, Prilosec, Omeprazole, Nexium, Prevacid, Aciphex or Protonix) unless specifically instructed by your physician. Your physician will instruct you on when to resume these medications.

Using the Patient Diary:

Record events in the patient diary using the time on the receiver display. **Meals and sleep/resting times require two entries: a *start time* and an *end time*.** Give us an idea of what you ate and drank during the study. **All other activities require only one time entry.**

Data Transmission:

To ensure reliable, uninterrupted transmission of data, you must ensure that the receiver is always within 3 feet of the Bravo Capsule. Do not allow the receiver to become wet or sustain any heavy impacts.

Do not remove the battery for any reason. Once the power is removed, the study is stopped and must be manually restarted by a GI nurse.

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Additional Information:

The study automatically stops at the end of 48 hours and the receiver shuts down. You may feel the Bravo Capsule in the middle of your chest when you swallow. This is a normal sensation. It is recommended that you chew your food thoroughly and drink fluids with your meals to minimize this sensation. The Bravo Capsule will spontaneously detach and pass out of your system within the next 5 – 14 days.

You are restricted from undergoing a Magnetic Resonance Imaging (MRI) study within 30 days following a Bravo procedure.

Return the receiver and your diary to the GI Lab at the end of the study.

If you have any problems or questions, call the Digestive Disease Consultants office at 904-388-8686.