

### Can anything go wrong?

Bronchoscopy is a safe procedure with little risk and complications are relatively rare. There is a small risk of infection and bleeding associated with the procedure, but every effort is made to prevent this from happening. Air can also sometimes leak into the space surrounding your lung during the procedure but this is not usually a problem and the air can be taken out with a needle and syringe or in some instances a drain (little plastic tube) needs to be inserted and left inside for a couple of hours to drain the air out.

Occasionally patients take a longer time to recover after the procedure and may need to be admitted to hospital for observation.

### What happens after the bronchoscopy?

You will be looked after by a nurse until you are awake enough to leave. Your breathing rate, pulse and blood pressure will be checked. You may have a chest X-ray. You may cough up small amounts of blood: inform the nurse if you cough up more than a tablespoon of blood, have chest pain or difficulty breathing. You should not eat or drink until the feeling in the back of your throat has returned, usually 2 hours.

It is common to experience a mild sore throat, hoarseness and cough after the procedure. It is important that you do not drive a car or operate machinery if you had sedation (medication in the vein to make you sleepy).

In some cases the doctor can give you some initial results of your bronchoscopy when you are awake before you leave.

### Important aspects of bronchoscopy

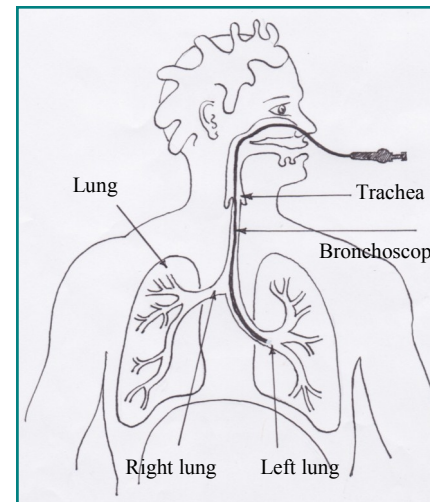
- ◆ Do not eat anything for 4 hours or drink liquids for 2 hours before your procedure
- ◆ Inform your doctor of all the medication you take and any medical conditions.
- ◆ Arrange for someone to take you to and fetch you home after the bronchoscopy. It may be necessary for someone to stay with you for a couple of hours after the procedure if you live by yourself.
- ◆ Do not eat or drink after the procedure until the numbness in your mouth/throat has completely worn off.
- ◆ For 24 hours after the bronchoscopy you can not drive, return to work, operate machinery, drink alcohol, sign legal documents or be responsible for small children.
- ◆ Contact your doctor if you are short of breath, have chest pain or cough up more than a tablespoon of blood.
- ◆ Contact phone number: \_\_\_\_\_  
Appointment Date: \_\_\_\_\_  
Appointment Time: \_\_\_\_\_



British Thoracic Society

# Bronchoscopy

## Patient Information Leaflet

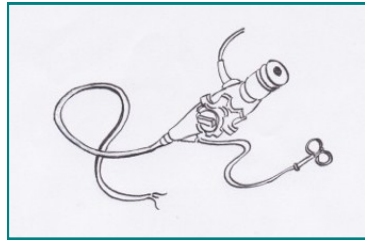


This leaflet explains the procedure called a **BRONCHOSCOPY**: it explains why we do bronchoscopies and what you can expect if you are having the procedure done. It also answers the most frequently asked questions about having a bronchoscopy.

If you have any further questions, please do not hesitate to ask a member of your medical team.

### What is a bronchoscopy?

A bronchoscopy is an examination of the breathing passages/tubes (airways) of your lungs. The bronchoscopy is done with a thin tube-like instrument with a mini camera at its tip, called a bronchoscope (see picture). The bronchoscope enables your doctor to see inside the breathing passages of your lungs and if needed take samples of mucus (phlegm) or tissue from inside your lungs.



A bronchoscope

### Why do I need a bronchoscopy?

Some of the common reasons why bronchoscopies are done include:

- **Infection**, specific samples from your lungs can help your doctor to find the causes of infections and give you appropriate treatment. Your doctor can also use the bronchoscope to clear some of the mucus from your breathing passages.
- **Bleeding**, your doctor can look inside your breathing passages to determine where the blood is coming from that you are coughing up.
- **An abnormal Chest X-ray**, there may be a narrowing of a breathing passage or a “spot” on your lung that your doctor wants to investigate with the bronchoscope and take small samples to find the cause.
- **Persistent cough**, samples taken during a bronchoscopy and an examination of the breathing passages can sometimes help to determine the cause for a cough that does not respond to usual medication.
- **Noisy breathing**, a bronchoscopy can help to see if narrowing of your breathing passages or erratic movement of your vocal cords (voice box) is causing additional breathing sounds.

Your doctor will explain why you need the bronchoscopy.

### Is there an alternative test that I can have instead of the bronchoscopy?

Your doctor can do breathing tests, X-rays and CT-scans of your lungs. These tests will give additional information about your lungs. A bronchoscopy gives very specific information to your doctor by looking inside your breathing passages and obtaining specific samples.

### How do I prepare for my bronchoscopy?

You will need to provide an up-to-date list of all your medication, allergies and any medical conditions. Your doctor will review this with you. It is important to let your doctor know if you are taking any blood thinning medication like Warfarin/Asprin etc or if you are diabetic. You can not eat for 4 hours or drink anything for 2 hours before the procedure. It is better not to smoke before the procedure.

### What will happen before the procedure?

The procedure will be explained to you again and you will have the opportunity to ask any questions. You will be asked to sign a consent form. In the room where you will have your bronchoscopy the oxygen levels in you blood and your heart rate is monitored with a probe (loose clip) on you finger. A cannula (tiny plastic tube) is inserted in one of your veins and you may be given medication in the vein to make you feel sleepy. You may be given some oxygen.

### What happens during a bronchoscopy?

A local anaesthetic will be applied to your nose and the back of your throat. This can be uncomfortable; the anaesthetic does not taste very good and you may have a sensation of numb ‘blocking’ in the back of your throat. It feels as if you can’t swallow, but you can: the back of your throat is just temporarily numb. Your doctor will then insert the bronchoscope via your nose/mouth to the back of your throat to numb your voice box with local anaesthetic. While your voice box and breathing passages are being numbed, you may cough: this usually settles down when the local anaesthetic takes effect. The coughing may however cause you some discomfort during the procedure. The doctor will look inside the breathing passages and take samples; you may be offered more anaesthetic or sedation to help address any discomfort you may experience.