

Bronchoscopy – A Guide to the Test



Name: _____

Who to contact and how: _____

Notes: _____

Diana, Princess of Wales
Scarcho Road
Grimsby
DN33 2BA
03033 306999
www.nlg.nhs.uk

Scunthorpe General Hospital
Cliff Gardens
Scunthorpe
DN15 7BH
03033 306999
www.nlg.nhs.uk

Goole & District Hospital
Woodland Avenue
Goole
DN14 6RX
03033 306999
www.nlg.nhs.uk

Information for patients

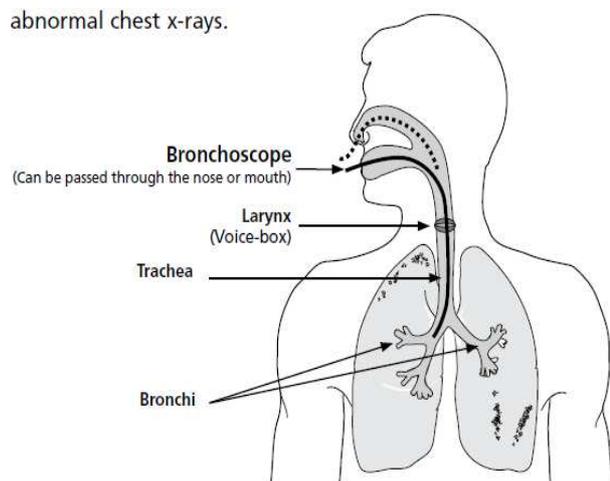
Introduction

A bronchoscopy is a test that allows the doctor to look directly at the trachea (the windpipe), bronchi (branches of the airways) and other areas of the lungs.

During the procedure a thin flexible 'fibre-optic' tube called a bronchoscope is passed through the nose or mouth, past the larynx (voice-box) down the trachea and into the bronchi. The bronchoscope is about the width of a small pencil. The end of the bronchoscope contains a light and conveys images to a viewing screen allowing the doctor a clear view of the lung lining. As well as looking at the lining, biopsies (small pieces of tissue samples for examination under microscope) can be taken. Areas that cannot be seen can be washed out to collect cells which can then be examined under a microscope.

The test is carried out to investigate chest symptoms such as hemoptysis (coughing up blood), persistent coughs and abnormal chest X-rays.

abnormal chest x-rays.



What do I need to know before admission?

You will be asked to attend the Endoscopy unit. You can expect to be in the Unit between 2 and 4 hours.

You will need to fast for 6 hours before the test. This is to ensure that your stomach is empty and therefore reduces the risk of vomiting whilst the procedure is taking place.

Please tell the nurse admitting you if you:

- **Are diabetic**
- **Have a heart disease or have had a valve replacement**
- **Are allergic to Latex**
- **Are taking any anticoagulant medication (medication to thin your blood) e.g. Warfarin or Aspirin**

Information for patients

What happens on admission?

Once you have arrived at the Endoscopy Unit a nurse will admit you and may ask you to put on a hospital gown. They will check your pulse, blood pressure and oxygen levels. They will also explain the procedure to you and answer any questions you may have.

The doctor will come and see you and ask you to sign the consent form for the procedure, once you have read it carefully and understood it completely. Please feel free to ask any questions at this time.

A doctor or nurse may insert a cannula (thin plastic tube) into a vein in your hand or arm. This provides a route for the sedative drug to be given during the procedure. Alternatively you may be given an intra-muscular injection before the procedure.

Dentures, glasses and contact lenses can be removed later on; the nurses will tell you when.

Cancellations or Delays

Please be aware that in some circumstances your procedure may have to be delayed or cancelled at short notice. If this occurs we apologise for any inconvenience caused and will aim to reschedule your appointment as soon as possible.

What happens during the Bronchoscopy?

You will be taken on the trolley to an examination room for the procedure. You will stay sat up and a soft plastic tube will be placed in one nostril to give you some extra oxygen and a plastic clip will be placed on a finger to monitor your pulse and oxygen levels throughout the procedure.

The procedure will be carried out as follows:

1. The doctor will spray your nose and throat with a local anaesthetic. The Doctor will also apply a local anaesthetic gel up one nostril. This also acts as a lubricant.
2. You will then be given the sedative injection; this will make you drowsy and relaxed, but will **not** send you to sleep.
3. The bronchoscope is passed either through your nose or mouth, this might make you cough a little but will not interfere with your breathing. Anaesthetic is sprayed via the bronchoscope to numb your vocal chords. This may make you cough but as the anaesthetic takes effect your throat will relax.
4. When the tube is in the bronchi each section of your lungs will be examined. This takes 10-15 minutes in total.

If the doctor finds any change in any tissue a tiny piece may be removed (biopsy) using instruments passed through the bronchoscope. Any samples of tissue removed are sent to the laboratory for specialist examination. It is also possible to wash areas that cannot be seen and collect samples via the bronchoscope.

Information for patients

What happens after the Bronchoscopy?

You will be taken into the recovery area where a nurse will always be present. The nurse will regularly monitor your pulse, blood pressure and oxygen levels during your recovery.

After a period of time you will be able to get up and dressed. Before you leave it is advisable to try a cold drink to ensure you can swallow properly.

Once ready to leave, the nurse or doctor will speak to you about your bronchoscopy, go through the results and answer any questions you may have; they will also explain the intended follow-up arrangements.

Discharge Advice

You will be allowed home the same day. **It is essential that you make arrangements for someone to come to the Endoscopy Unit to collect you and stay with you overnight.** Once home, rest quietly for the remainder of the day. Sedation can last longer than expected.

You may find that you cough up small streaks of blood especially if you have had biopsies taken. This should not persist or increase in amount. If this occurs or you start to feel unwell or develop any other worrying symptoms, you must contact the Endoscopy Unit, your General Practitioner (GP) or the GP Emergency Centre as soon as possible. You also may have a sore nose and throat, which should settle down within 24 - 48 hours.

Furthermore you should avoid the following activities for at least 24 hours after the procedure:

- going to work
- driving
- operating machinery
- drinking alcohol
- signing any legally binding documents
- carrying out any activities involving heights
- caring for young children (sole responsibility)

Benefits

This procedure enables us to have direct vision of the lining of the lungs, bronchi (airways) and trachea (windpipe) and to be able to take biopsies to aid diagnosis and treatment.

Information for patients

Risks

It is very important that you are aware of the potential risks and complications of bronchoscopy before giving your consent to the procedure. These include:

- **Internal Bleeding (Haemorrhage)**

This may occur at the site of a biopsy that has been removed. The bleeding is usually resolved without any treatment but in a minority of cases may be serious. The likelihood of serious bleeding is generally associated with the removal of larger polyps.

- **Perforation**

Damage to the lungs (perforation), this can be a potentially serious complication, although it usually settles without surgery being necessary.

- **Adverse Reaction to Sedation**

- **Infection**

Please seek medical attention if you develop any symptoms / signs of infection after the test.

Every effort is made to reduce the risk of these complications occurring. If you are concerned about any of these risks and complications, please discuss this with the consultant or member of their staff before the procedure.

Alternatives

There is another form of Bronchoscopy using a rigid rather than a flexible instrument. This however has to be done under a general anaesthetic and is not done at this hospital.

Reference Section

British Lung Foundation

British Lung Foundation,
73-75 Goswell Road,
London,
EC1V 7ER

Helpline 08458 50 50 20

www.lunguk.org

enquiries@blf-uk.org

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Information for patients

Contact Details for Further Information

If you have any questions or concerns, please contact:

- **The Endoscopy Unit at Diana Princess of Wales**

Normal Hours: 8am-7pm Monday to Friday and 8am-6pm Saturday

Endoscopy Pre-assessment Nurse: 03033 304343

Telephone the Unit direct on **03033 302799** between the hours of 8am until 6pm, Monday until Friday

Or Telephone Diana, Princess of Wales Hospital, Grimsby on **03033 306999** and ask for the Endoscopy Unit

Out of Hours:

After 6pm contact Ward C5 via the main switchboard on: **03033 302221** (Out of hours 6pm to 8am)

- **The Endoscopy Suite at Scunthorpe General Hospital**

Normal Hours: 8am-6pm Monday to Friday and 8am-6pm Saturday

Telephone the Unit direct on **03033 302186**

Or Telephone Scunthorpe General Hospital **03033 302221** and ask for the Endoscopy Unit

Out of Hours:

After 6pm contact your G.P. or phone the G.P. Emergency Centre (01724) 290444

- **Department of General Surgery and Endoscopy, Goole Hospital**

Telephone **03033 304119** or **03033 304123**

Any Comments, Compliments, Concerns or Complaints

If you have any other concerns please talk to your nurse, therapist or doctor. Our Patient Advice and Liaison Service (PALS) are available on 03033 306518 (Grimsby, Scunthorpe and Goole). You can also contact nlg-tr.PALS@nhs.net

As a Trust we value equality of access to our information and services, therefore alternative formats available on request at nlg-tr.interpreters@nhs.net

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