

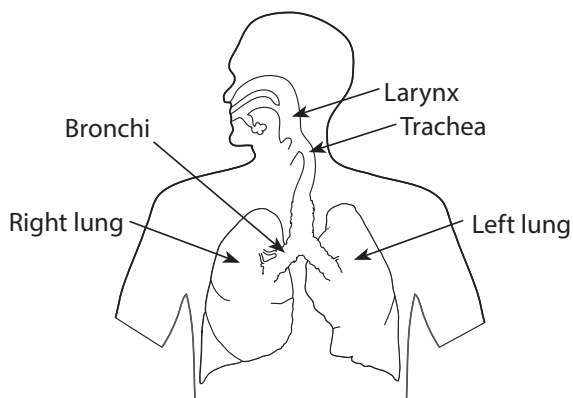
# Bronchoscopy

Bronchoscopy is usually done to find out the cause of chest symptoms. You may also be having the test to check the progress of your condition. This information sheet may not answer all your questions, so, if you have any worries please do not hesitate to ask. The staff will be available to answer any queries that you may have.

## What is a Bronchoscopy

A bronchoscopy is a test that allows the doctor to look directly at the main airways, known as the trachea (or 'windpipe') and the bronchi (breathing tubes). The bronchoscope is passed through your nose, or mouth through your larynx (voice box), and your trachea and into the bronchi.

The bronchoscope is a long, flexible tube, about the width of a thin pencil, with a bright light at the end. Looking down the tube, the doctor gets a clear view of the airways; this can help to make a diagnosis and can also help to rule out conditions. Various samples may be collected during the procedure. These are explained in more detail further on in the leaflet.



## What should I know before deciding?

The Bronchoscopist will ensure you know enough information about the procedure to enable you to decide about your treatment. They will write this on the consent form as well as discussing choices of treatments with you.

## Consent form

Before you can have the procedure, the bronchoscopist will need to gain your consent. This will be required in writing. This would have usually been carried out before you arrive at Endoscopy. The procedure will be further explained to you, as well as the risks and benefits. If you are yet to sign the consent form, this will be done here in the Endoscopy unit. If you later change your mind, you are entitled to withdraw consent, even after signing. A copy of the consent form will be offered to you. It is your decision whether or not to consent to the procedure.

Ask as many questions as you like and please express any concerns about medication, allergies or past medical history.

## On arrival to the Endoscopy Unit

When you arrive in the department you will be asked to wait in the waiting area. An admissions nurse will confirm all your personal details, check your weight and height, take your blood pressure, temperature and pulse and will check if you have any serious medical conditions. They will also check if you have any allergies and confirm your discharge arrangements with you. You will then be shown where to wait for your procedure.

## Preparation for the procedure

To allow clear views of the lungs please do not eat anything for **six hours**. You may drink clear fluids up to two hours prior to the procedure.

## Please bring with you to your appointment:

- Your pre-assessment questionnaire.
- Any letters you have received from the hospital.



- Any medications or a list of medications that you are currently taking. It is important to remember any asthma inhalers, angina sprays, blood pressure medication or diabetic medication.
- Bring a dressing gown and slippers
- Please remove any nail polish from your fingernails.

You should not bring valuables or large amounts of money into hospitals, as we cannot accept responsibility for them.

You may have sedation for the procedure, so it is important someone is able to collect you.

## Medication

You may continue to take your usual medication up to the day of your test. If you are taking any blood thinning medication such as **Warfarin, Rivaroxaban or Clopidogrel**, or any other blood thinning medication you should have already been informed of what to do. Please take any blood pressure tablets as usual.

## How long will I spend in the department

The time on your appointment letter is for your pre-procedure assessment and not your appointment time.

The procedure itself usually takes about 15-20 minutes. You will then recover for at least one hour.

Occasionally we have to deal with unexpected emergencies and this can prevent us seeing you as quickly as we would like. We apologise if this happens, and we will keep you fully informed and make sure you know the reasons for the delay.

## Is there an alternative procedure I could have?

A bronchoscopy gives very specific information by looking inside the airways and obtaining specific samples. If there was an alternative procedure this would have already been discussed with you.

## What happens during the procedure?

All your belongings will either stay with you or taken to a bed space in recovery. You will be taken to the procedure room.



The nursing staff will introduce themselves to you. You will need to remove any false teeth just before the test begins. These will be placed in a denture pot and labelled and will stay with you at all times.

The procedure usually takes about 15 to 20 minutes. Two nurses will be present in the treatment room, to assist you and the doctor doing the test. You will be made comfortable on a couch, either in a sitting or lying position.

A soft plastic tube may be placed just inside your nostril to give you some extra oxygen, and a plastic clip will be placed over a finger to monitor your pulse rate and the amount of oxygen in your blood.

A local anaesthetic spray and/or jelly will be applied to your nose and mouth. The anaesthetic initially tastes bitter although the tissues rapidly become numb.

The doctor will usually give you an injection of a sedative into a cannula you have in your arm or hand to make you feel relaxed and you may remember little of the test after this.

As the tube is passed through your nose or mouth, more local anaesthetic can be sprayed if needed through the bronchoscope to help numb your voice box or settle any coughing.

Different samples may be taken. These include samples of this tissues obtained with tiny forceps (biopsies) and cells recovered either by rubbing the wall of the bronchus with a brush (brushings) or by rinsing the bronchi with salty water (washings). All are painless and are taken through the bronchoscope

When the examination is finished the bronchoscope is gently removed, causing little discomfort.

### **What happens after the procedure?**

Once the procedure has finished and you have been made comfortable, you will be taken through to the recovery ward to rest. Male and female patients are nursed in separate areas to maintain privacy and dignity at all times.



You may notice slight bleeding from your nose following the procedure, and if you have had a biopsy taken you may find streaks of blood in your phlegm. This will usually pass within the next 24 hours and is nothing to worry about. If the bleeding is prolonged, you should seek medical advice. Any soreness in your throat or hoarseness of the voice will also ease within a day or so.

Once the nurses in the recovery area are satisfied that you have recovered, you will be offered refreshments. The cannula will be removed after you have had a drink.

If you have had sedation, it is important that you do not:

- Drive any vehicle
- Operate machinery or domestic appliances as your reactions may be slower.
- Drink alcohol
- Take any sleeping medications
- Make any important decisions or sign any legal paperwork.

The effects of the sedation can last for up to **24 hours**; although you may feel recovered, your judgement and reactions may be impaired during this time. It is essential you have someone to take you home and stay with you for the remainder of the day and overnight. It is recommended that you rest quietly for the remainder of the day.

## When can I get back to normal activities?

You should be ready to get back to your normal activities after 24 hours.

## Getting your results

Upon completion of your procedure and once you have recovered, the findings will be discussed with you. We will be able to tell you any visual findings, however, any biopsies will need to be sent to the laboratory for testing, and this can take up to two weeks.

## Can there be complications or risks?

As with most medical procedures, there are some risks involved. The endoscopist will have felt the benefits of this procedure outweigh the potential risks. The majority of procedures are straightforward. With any procedure there is a small chance of complications or risks.



These can include:

- The sedative can affect your breathing making it slow and shallow. If this were to happen you may need to stay in hospital overnight.
- Bleeding may occur, approximately 1 in 200 cases. This increases if biopsies are taken.
- If washings are taken, 1 in 10 may develop a fever post procedure, but this will usually settle down.

It is important to inform us if you have any persistent bleeding or pain in the hours or days after your procedure. If you are worried about the risks, please ask the endoscopist who will be performing the procedure for you.

## Students

Occasionally there may be students observing procedures in the department or the doctor may be a trainee under the supervision of an experienced endoscopist. In either case, you will be told of any student involvement beforehand. You do not have to let students be part of your care; please tell us if you do not want them involved.

## Frequently asked Questions and Answers

### 1. Will the procedure hurt?

You may feel some discomfort but the procedure should not be painful. You may also experience some coughing but this will settle.

### 2. Can my relatives / friends stay with?

Your relative or friends can stay with you until you go for the procedure or into the recovery ward. They will be shown where to wait for you on the department or they can go and get a drink in one of our coffee shops.

### 3. Can I drive home after the procedure if I choose to have sedation?

If you have sedation you will not be allowed to drive home and must arrange for someone to accompany you and drive you home.

Medication given during the test will prohibit you from driving until 24 hours after your examination. Please do not plan to use public transport.



## Contact Details

If you are unable to keep your appointment or if you have any questions, please ask a member of staff on the day or telephone the department.

**Doncaster Royal Infirmary: Tel. 01302 381424 (Endoscopy)**

**Tel. 01302 381424 (Chest Clinic)**

**Bassetlaw Hospital: Tel. 01909 500990 Ext. 2017**

**Montagu Hospital: Tel. 01709 321154**

Alternatively, contact your General Practitioner. If you need urgent advice out of hours, please contact Accident & Emergency on the telephone numbers below:

**Doncaster Royal Infirmary: Tel. 01302 366666 Ext. 3131**

**Bassetlaw Hospital: Tel. 01909 5002048/5002148**

## Patient Advice & Liaison Service (PALS)

PALS staff are available to offer advice or information on healthcare matters. The office is in the Main Foyer (Gate 4) of Doncaster Royal Infirmary. Contact can be made either in person, by telephone or email. PALS staff can also visit inpatients on all Trust sites.

### The contact details are:

**Telephone:** 01302 553140 or 0800 028 8059

**Email:** [pals.dbh@dbh.nhs.uk](mailto:pals.dbh@dbh.nhs.uk).

