KAREENA PRIVATE HOSPITAL

Bronchoscopy

Patient Information Sheet

Your doctor has advised you to undergo a bronchoscopy. This pamphlet should explain to you what is involved, what the complications are and what to expect on the day of the procedure.

What is a bronchoscopy?

A bronchoscopy is an examination of the breathing passages (airways) of your lungs and is performed to diagnose a variety of lung disorders. The procedure is done using a thin tube-like instrument called a bronchoscope with a light and camera at its tip. Through the bronchoscope, samples of mucous or lung or abnormal tissue within the lung can be biopsied and sent to the laboratory.

Before the procedure

Your lung doctor will assess you before the procedure, explain the procedure to you and ask you to sign a consent form. You will be admitted to the endoscopy department on the day of the procedure.

It is required that you are fasted (not eat food or drink) prior to the procedure. Please ensure you are fully aware when you must fast from. Some medications, especially blood thinners may need to be withheld for a few days.

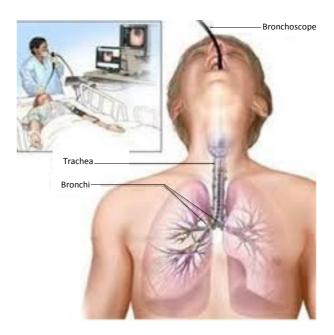
What happens during the bronchoscopy?

A cannula (a small plastic tube) is first inserted in one of your veins and a local anaesthetic is sprayed into your nose and throat to make these areas numb. This medication tastes very bitter and creates a strange sensation in the mouth. Oxygen is then connected to you via a mask or via tubes inserted into your nose and medicine is

injected through the canula into your vein to make you feel sleepy.

The doctor then inserts a bronchoscope through either one of your nostrils or through your mouth. Local anaesthetic is sprayed onto your voice box and into your lungs to numb these areas. This might make you cough initially but settles after a few minutes.

The doctor then inspects the airway tubes and takes samples as necessary.



After the procedure

Afterwards, you will be taken to the recovery bay to recover from the procedure. It is normal to have a sore throat and a cough. You will be monitored for a few hours.

Depending on your recovery, you may be able to go home the same day or require an overnight stay in hospital. The doctor will tell you how the procedure went. Laboratory results take about 5-10 days to return. You

will normally be seen as an outpatient to get be punctured resulting in an air leak. This occurs in about 20% of patients. Most the results. (80%) resolve without treatment. A minority require a chest tube to drain the Alternatives to having a leaked air. If this occurs, you are likely to bronchoscopy have to stay in hospital for a few days. Chest X-rays are performed during and Sputum samples can be coughed up and after the procedure to monitor for sent to the laboratory but only during pneumothorax. bronchoscopy can your doctor actually visualise abnormalities and take samples Chest infection. There is a small risk of directly from the source of the problem. lung infection after a bronchoscopy. This would require antibiotics, either tablets or Other tests and procedures such as x-rays, through a drip depending on the severity. CT scans and lung function tests give the Anaesthetic complications. During doctor limited information. Bronchoscopy sedation and anaesthesia, increased increases the likelihood of obtaining a strain on the heart can result in abnormal definitive diagnosis. rhythms or even a heart attack. Stroke can also occur. These are very Risks and complications uncommon. Bronchoscopy is a very safe procedure. Wheezing. Temporary narrowing of the However, as with all procedures, airways can cause wheezing or coughing. complications can occur. This usually resolves by itself or treated with asthma medication. Sore throat and coughing. Due to irritation where the bronchoscope was Fever and chills. It is common to inserted. This should improve over a few develop a fever and/or chills the night of days. the procedure. This is best managed with paracetamol and should settle within 24 Low oxygen levels. Are treated with hours. mask or nasal prong oxygen. Life threatening complications. These Bleeding. Minor bleeding from the biopsy are extremely rare. site is common. Less commonly, more significant bleeding occurs and requires further interventions. Pneumothorax. If you are having a transbronchial lung biopsy, the lung can have discussed having a bronchoscopy with my doctor and understand the nature of the procedure, alternative options and risks of the procedure. Signature of patient Date

