



Information for  
patients and  
carers

## Having a Bronchoscopy

Patient's name: .....

Your appointment is at Royal Preston Hospital (01772 522032)

Chorley Hospital (01257 245656) Endoscopy Unit on:

Date: ..... Time: .....

Or Royal Preston Hospital Day of Surgery Unit (DOSA) (for procedures in

Theatre) on: Date: ..... Time: .....

## Bronchoscopy

This leaflet has been produced to answer questions you may have about the bronchoscopy procedure and what to expect during your visit. If you have any other questions, please ask a member of the nursing team.

### What is a bronchoscopy?

A bronchoscopy is a test that allows the doctor to look at your larynx (voice box) trachea (windpipe) and bronchi (branches of the airways). The bronchoscope is a long flexible tube with a bright light at the end and it is passed up your nose or through your mouth, past your larynx (voice box) and down your trachea. This allows the doctor to get a clear view of the different parts of your airways.

### Why do I need a bronchoscopy?

The examination allows us to look directly at the larynx, trachea & bronchi to check whether any disease is present and helps us to find the cause of your symptoms (for example; haemoptysis (coughing up blood), weight loss, cough. During the test specimens may be taken. The specimens are sent to the laboratory for examination.

## Will I find the procedure uncomfortable?

You may find the procedure unpleasant, as it may make you cough a lot. A trained nurse will remain with you throughout and will reassure you and explain what is happening during each stage of the procedure.

Sedation can be injected into your vein through a cannula. The sedation will make you feel drowsy and relaxed but will not make you unconscious. You will be aware of your surroundings and will still be able to hear what is said to you and will be able to follow simple instructions during the procedure.

Sedation makes it unlikely that you will remember anything about the procedure. When the procedure has ended, you will be taken to the recovery area for about 1 hour.

## What are the risks of having a bronchoscopy?

A bronchoscopy is normally a very safe procedure but can result in complications such as a reaction to the sedation medication; this is usually managed with close monitoring and rarely with the use of medicines to reverse the effect of sedation. Another rare complication is bleeding from where lung tissue samples have been taken (1 in every 1000). This usually stops on its own but occasionally needs medication injected through the bronchoscope or treatment with diathermy (using heat to seal the area).

Rarely (1 in every 1000) the procedure may cause an air leak when samples are taken during the procedure. This causes air to leak into the space around the lung. This will often settle without treatment but occasionally may need a tube inserting into your chest which helps the lung re-expand. You will need to stay in hospital for a short time if you have a chest tube inserted.

A more common complication after bronchoscopy is developing a fever. This does not always mean that you have an infection and will usually

settle within 24 hours of your procedure. Simple measures such as paracetamol may help if needed.

A trained nurse will monitor you at all times to ensure that any problems are quickly recognised and treated.

## What is the alternative to having a bronchoscopy?

In some cases and depending on individuals, alternatives to bronchoscopy may include:

- Rigid bronchoscopy – A straight hollow metallic tube is used to examine the airways. This is carried out in an operating theatre under general anaesthesia at a different hospital

This is not possible for everyone.

## What do I need to do before I have a bronchoscopy?

- To make sure that your stomach is empty it is important NOT to eat for 6 hours or drink for 2 hours before the test
- If you are diabetic please read the enclosed leaflet
- If you are taking blood thinning medications such as, Warfarin, Rivaroxaban, Sintrome, Dabigatran, Edoxaban, Apixaban, Dipyridamole, Aspirin, Clopidogrel, Prasugrel, Ticagrelor, Dalteparin/Clexane injections you may need to stop taking them, please ring **01772 522412** for further information
- Bring an up to date list of medications and allergies
- If you would like sedation you will need to arrange for someone to collect you from the Endoscopy or DOSA and stay with you for up to 24 hours
- Remove nail polish and false nails

- Bring your consent form (read it but please do not sign it)
- Do not bring valuables or jewellery into the department. We cannot be held responsible for any loss or damage
- Please let us know in advance if an interpreter or sign guide would be needed on the day of the bronchoscopy

## What happens when I arrive on the unit?

- When you arrive, please book in at reception
- You may have to wait before being called by one of the nurses
- The nurse will take you into a private booking in room to explain the procedure to you, complete the paperwork and you will have the opportunity to ask any questions
- You will be asked to sign the consent form that shows that you understand the test and the risks involved
- If you have asked for sedation, you will have a small cannula inserted into a vein in your hand or arm. The sedation will be given through this when you are in the treatment room
- You will wait in reception until the doctor is ready to carry out your procedure
- You will be asked to remove your dentures during the procedure. Please make staff aware if you wear them

## What happens during the procedure?

For your comfort and reassurance, a trained nurse will be with you throughout the procedure. If you have requested sedation this will be given before the procedure starts.

When you enter the room the doctor will speak to you. You will be asked to sit with your feet up on the couch. Local anaesthetic will be sprayed onto the back of your throat and/or gel up your nose. A 'peg' will be placed on your finger to monitor your pulse and oxygen levels. The camera may be passed through your nose or your mouth. If it is passed

through your mouth, a guard will be placed in between your teeth (if you wear dentures these will first need to be removed). As the bronchoscope passes into your airways, more liquid local anaesthetic is sprayed through the bronchoscope to numb your voice box. The doctor can then examine the different parts of your airways.

## What happens after the procedure?

You will be taken to the recovery area until the effects of the sedation have diminished (about one hour). You should not eat or drink for about one hour after the throat spray has been given.

## Going home

Please remember that if you have had sedation, it is important that someone comes to collect you from the department and stays with you for the next 24 hours. If this is not possible, please contact the reception staff before your appointment date and let us know.

When you arrive home it is advisable to recover quietly for the rest of the day. You will be able to eat and drink normally; if you have had sedation you must not drive, drink alcohol, operate machinery or sign legal documents for 24 hours.

## Frequently asked questions

### How many people will be in the procedure room?

The endoscopist along with one or two trained nurses and a healthcare assistant will be in the room. There are often extra doctors or nurses in the room who are there to learn. If you are unhappy with this, then please inform the nurse. In Theatre an anaesthetist will also be present.

### How long will I be in the unit?

You can expect to be on the unit for between 2 – 4 hours of your appointment time. The procedure can take from 15 - 30 minutes. If you

have sedation you will be in recovery for up to 60 minutes after the procedure.

### **What samples may be taken?**

Taking samples is usually painless. A short description of the different types of samples that may be taken are listed below:

**Lavage:** fluid is flushed through the camera into the airways then collected in a pot.

**Brush:** a very small brush is passed through the camera and brushes the wall of the airways to collect cells.

**Biopsy:** a very small pair of forceps is used to take a small sample of tissue.

**Trans bronchial needle biopsy:** A fine needle is passed through the wall of the airway to collect cells.

When samples are taken for examination, these are sent to the Pathology laboratory to identify the cells that are in the tissue sample. The results will be sent to your consultant and they will be in contact with you to let you know the results. Results can take any time from 1 to 4 weeks.

## **Checklist and contact details**

- If your appointment is at Chorley Hospital, please confirm the appointment by telephoning 01257 245656. To confirm your appointment at Royal Preston Hospital please telephone 01772 522412
- Do not eat anything 6 hours before the test
- Do not drink anything for 2 hours before the test. Only drink water on the day of the test
- Please bring a list of all medications that you are taking
- Arrange for someone to accompany you and stay with you for up to 24 hours if you want sedation
- Bring the Consent Form but do not sign it

- Write down any questions/concerns
- If an interpreter is required please inform the hospital on the numbers above

## Sources of further information

[www.lancsteachinghospitals.nhs.uk](http://www.lancsteachinghospitals.nhs.uk)

[www.nhs.uk](http://www.nhs.uk)

[www.accessable.co.uk](http://www.accessable.co.uk)

[www.patient.co.uk](http://www.patient.co.uk)

All our patient information leaflets are available on our website for patients to access and download:

[www.lancsteachinghospitals.nhs.uk/patient-information-leaflets](http://www.lancsteachinghospitals.nhs.uk/patient-information-leaflets)

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If you want to stop smoking, you can also contact the Quit Squad Freephone 0800 328 6297.

Please ask if you would like help in understanding this information. This information can be made available in large print and in other languages.

**Gujarati:**

આ માહિતીને સમજવામાં સહાયતા જોઈતી હોય તો કૃપાકરીને પૂછો. આ માહિતી મોટા છપાણ માં અને અન્ય ભાષામાં ઉપલબ્ધ કરી શકાય છે.

**Romanian:**

Vă rugăm să întrebați dacă aveți nevoie de ajutor pentru înțelegerea acestor informații. Aceste informații pot fi puse la dispoziție în format mare și în alte limbi.”

**Polish:**

Poinformuj nas, jeśli potrzebna jest ci pomoc w zrozumieniu tych informacji. Informacje te można również udostępnić dużym drukiem oraz w innych językach

**Punjabi:**

ਜੇ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਸਮਝਣ ਵੱਲੋਂ ਮਦਦ ਲੈਣੀ ਚਾਹੋਗੇ ਤਾਂ ਕਰਿਪਾ ਕਰਕੇ ਇਸ ਬਾਰੇ ਪੁੱਛੋ। ਇਹ ਜਾਣਕਾਰੀ ਵੱਡੇ ਪ੍ਰਿੰਟ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵੱਲੋਂ ਮੁਹੱਈਆ ਕੀਤੀ ਜਾ ਸਕਦੀ ਹੈ।

**Urdu:**

دوسری زبانوں اور ریڑی اگر آپ کو ہی معلومات سمجھنے کے لیے مدد کی ضرورت ہے تو یئچھپا یں یبھ ابی دست بو یسکت ہے برا ئے مہر یان پو ے یچھہی۔ معلومات

**Arabic:**

مطبوعة بأحرف كبيرة و بلغات إذا كنت تريد مساعدة في فهم هذه لمعلومات يُرجى أن تطلب أخري يمكن تو فسير هذه المعلومات

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