Patient information



Having a Bronchoscopy

Your doctor has advised you to have a bronchoscopy. This leaflet tells you about the procedure. It explains what is involved and what the possible risks are. It is not meant to replace informed discussion between you and your doctor, but can act as a starting point for such a discussion.

You should have plenty of time to discuss your situation with your consultant and perhaps even your own general practitioner (GP.)

Your consent for the test?

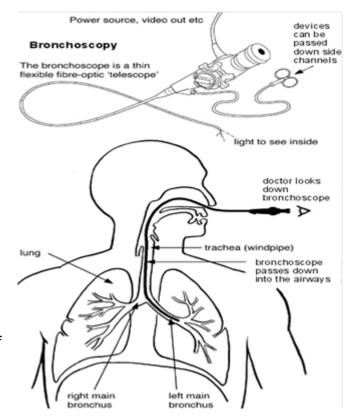
You should have had sufficient explanation before you sign the consent form. Your signature confirms that you understand the procedure, the potential risks and side effects and want to go ahead with the procedure.

Although you will sign a consent form for this treatment, you can withdraw your consent if you change your mind after signing.



During bronchoscopy a doctor is able to view the airways inside your lungs. A small flexible camera is carefully passed through your nose or mouth into your lung. It gives a clear view of your airways and also allows your doctor to collect lung secretions or take biopsy samples. Local anaesthetic is used to make the procedure more comfortable, and many

patients also have an injection to make them sleepy and relaxed



Why do I need a bronchoscopy and what are the benefits?

Bronchoscopy will help the doctor to find out what is wrong. The doctor can take tissue samples and give treatment if necessary.

What are the alternatives?

Your doctor has advised you to have a bronchoscopy as s/he feels that this is the best option for you. You can however discuss what alternatives may be available to you, including the option not to have this procedure done.

X-rays, scans and breathing tests give your doctors different information about your lungs. These cannot provide samples of lung tissue

What are the potential risks and side effects?

Bronchoscopy is an extremely safe procedure. The chance of anything going seriously wrong is very small indeed. Most problems that do occur are minor and can be dealt with easily.

Potential problems from having a bronchoscopy are:

- Coughing this almost always settles once the local anaesthetic has worked.
- Bleeding from where the samples have been taken.
- Very occasionally patients may experience some temporary breathlessness due to irritation of the voice box.
- A few patients react to the drugs used for sedation / local anaesthetic. The risk is very small and can usually be reversed with medication.
- Pneumothorax (punctured lung) Most people having a bronchoscopy are not at risk of this happening, but if biopsies are taken from the edge of the lung (transbronchial biopsies), there is a small chance of causing a pneumothorax. If this does occur you will be asked to stay in hospital for observation and may need to have the air drained from the lung. We will tell you if this risk applies to you.

How to prepare for your test

For this investigation it is important that your stomach is empty. The night before your bronchoscopy, **do not eat** anything after midnight. You can have a drink of water, or **black** tea or **black** coffee up to four hours before your visit to the hospital but you **must not eat any breakfast or drinks containing milk**.

- ◆ You may take your usual medication (except diabetic medication) as normal. You can take the medication with a small amount of water or bring it with you and take it after the test if required.
 - *If you are diabetic or are taking blood thinning medication your consultant will discuss your management of this with you prior to the procedure.
- ♦ If you have asthma and take inhalers (e.g. salbutamol) please take them as normal in the morning, and bring them with you.

How long does the procedure take and how long will I be in the Endoscopy Unit?

A bronchoscopy takes ten to thirty minutes. The time varies depending on the findings and if treatment is needed. Including admission and recovery time, you should expect to be in the department for between two and four hours.

What is conscious sedation?

The sedation is an injection to make you feel relaxed and sleepy. It makes the procedure more pleasant for you, and people who choose to have it find they often cannot remember the procedure clearly afterwards. It is not like having a general anaesthetic, as you will still be able to hear and understand what is being said to you. You can have a bronchoscopy without sedation if you prefer.

 If you want to have sedation for this test please arrange for someone to collect you as you will not be able to drive yourself home. Someone should be with you for 12 hours after the test.

What to bring with you to the Endoscopy Unit

Please wear loose, comfortable clothing. Bring:

- A list of all your medications.
- A list of all your allergies.
- A name and telephone number of the person taking you home.
- Your reading glasses.

Please do not bring any valuables with you, as we cannot take responsibility for any losses.

What will happen when I arrive at the Endoscopy Unit?

- You will be greeted by a member of the endoscopy team at the endoscopy reception and your details will be checked.
- A trained nurse will record your blood pressure and ask you questions about your medication, any allergies and medical conditions.
- The nurse will explain the procedure to you again and you can ask questions if you need to.
- if you haven't already signed a consent form, you will be asked to complete one now. This is to confirm that you understand the test and want to go ahead with it. If you choose to have sedation, we will place a small needle into a vein in your hand or arm, so that we can give you the injection.
- The nurse or doctor will give you local anaesthetic spray or Gel to numb your nose and sometimes also your mouth and throat.
- Very occasionally the doctor may recommend additional medication before the test (for example a nebulised bronchodilator for patients with severe COPD.) If so, the doctor will discuss the medication with you.

What happens during a bronchoscopy?

- You will be on a hospital trolley. Most doctors prefer to do the test with you sitting up, but some prefer you to be lying down. If there are reasons why one or other position would cause you problems, please tell the nurse or doctor looking after you.
- Three nurses will assist the doctor and look after you during the examination.
- You will be closely monitored during the test and you may be given oxygen.
- If you have chosen to have sedation, we will give this to you before the test starts.
- The bronchoscope (a flexible tube connected to a camera) is carefully passed through the nose or mouth into your lung.
- The doctor will use more local anaesthetic spray during the test to numb the vocal cords and windpipe. This will make the test more comfortable for you although it won't stop you from coughing at times.
- The doctor will look at the lining of the airways and take some small tissue samples (biopsies) if necessary.

What happens after the test?

- After the bronchoscopy you will be taken to the recovery area for about one to two hours
 whilst the sedative wears off. The nurse will take your blood pressure, pulse and oxygen
 levels regularly.
- When you are fully awake and the local anaesthetic has worn off you can have something to drink and a biscuit.

How will I feel afterwards?

Your throat may feel a bit hoarse or sore for a day or two afterwards. If you have had a biopsy, you will probably cough up a few specks of blood. If you had sedation, it lasts longer than you think and you must not drive a car/motorbike, operate machinery (including using your cooker), drink alcohol or sign any legal documents until the next day.

When can I go home?

Most patients are able to go home one to two hours after the test. It's a good idea to take it easy for the rest of the day. You can eat normally and take your usual medication.

Do I need somebody to take me home?

If you have had sedation you will need somebody to collect you from the Endoscopy Unit and to stay with you for at least 12 hours after the test.

Can I expect any problems when I get home?

Serious side effects are rare, but if you develop any of the following symptoms, you need to be seen urgently:

- · Painful or difficult breathing
- Coughing up a lot of blood

When can I return to work?

You should be able to resume normal activities the day after the bronchoscopy, or sooner than that if you have decided not to have sedation.

Specific Advice and Contact details

You will be given an additional supplementary leaflet advising you of specific instructions relevant to you. This will include advice particularly if you are diabetic or taking anticoagulants (i.e Warfarin, clopidogrel). Please telephone the Consultant Secretary or the Endoscopy Unit and speak to a member of staff if you are unclear or need further guidance.

Endoscopy Unit Conquest Hospital – Tel: 0300 131 5297

Consultant Secretary Conquest Hospital:

Tel: 0300 131 4837 or 0300 131 4835 - Monday to Friday - 8.30am to 4.30pm

Endoscopy Eastbourne District General Hospital – Tel: 0300 131 4595

Consultant Secretary Eastbourne DGH:

Tel: 0300 131 4816 or 0300 131 4815 – Monday to Friday - 8.30am to 4.30pm

Consent

Although you consent for this treatment, you may at any time after that withdraw such consent. Please discuss this with your medical team.

Important information

This patient information is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the patient experience team on 0300 131 4784 or esh-tr.patientexperience@nhs.net.

Hand hygiene

We are committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of our leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights

Department on 0300 131 4434 or esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.		
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Reference

The following clinicians have been consulted and agreed this patient information: Conquest Hospital
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Eastbourne District General Hospital
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The Clinical Specialty/Unit that have agreed this patient information leaflet: Medicine Division

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Responsible clinician/author: Mrs Nicola Booth, Clinical Service Manager, Medicine Division

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