

BronchoscopyTaking a look inside the Lungs

Department of Thoracic Medicine

Website: www.uhd.nhs.uk

What is a Bronchoscopy?

Bronchoscopy is a procedure which looks inside the main airways of your lungs. The bronchoscope is a fine, flexible tube with a fibre-optic light source. It is passed either through the nose or the mouth with the aid of local anaesthetic. Bronchoscopy is performed using light sedation and can therefore usually be done as a day case procedure.



Why am I having a Bronchoscopy?

It is usually performed to help us to interpret any unusual appearances on chest x-rays. The x-ray will have been performed to try to explain the cause of any number of symptoms, from a persistent cough to coughing up blood.

A bronchoscopy will give us much more detailed information. It will also enable small specimens of lung tissue (biopsies) to be taken during the procedure if required.

Where is it done?

Your bronchoscopy will take place in the Endoscopy Department at the Royal Bournemouth Hospital. Directions and parking advice are included at the end of this booklet.

How should I prepare for the procedure?

Before the bronchoscopy we ask that you do not eat or drink anything for at least 4 hours. However, you should take all your usual medication, unless otherwise instructed.

If you are diabetic, please telephone for advice if needed:

Royal Bournemouth Hospital diabetes nurse specialist:

0300 019 4888 (Monday - Friday 8am - 4pm).

Poole Hospital diabetes nurse specialist:

0300 019 2355 (Monday - Friday 8am - 4pm).

The full effects of the sedation can take up to 24 hours to wear off. Therefore it is essential that you have somebody to collect you and be at home with you during this period. You will be unable to drive. Please ensure that you bring the details of the person who will be collecting and staying with you when you come to the Endoscopy Department for your bronchoscopy.

Do I need to bring anything with me?

Please bring a list of your usual medications and any allergies, and details of your medical history. Please bring in your usual medication with you, particularly if you are diabetic.

The Endoscopy Department is very busy and sometimes appointments are delayed due to emergencies or unforeseen problems. It is advisable to bring a book or something to read to help you pass the time.

What will happen on the day?

Please report to the Endoscopy Department at the time indicated on your appointment letter. The receptionist will ask you to complete a form, giving details of your medical history, regular medications, allergies, and contact details of the person collecting you/next of kin.

A nurse will then check through this with you and admit you for your bronchoscopy. Your blood pressure, pulse and temperature will be measured to ensure that you are well enough to have the procedure.

A cannula (flexible needle) will be inserted into your hand or arm so that sedation can be given. A doctor will discuss the risks and benefits of the bronchoscopy (which are included later in this booklet), and ask you to sign a consent form to indicate that you understand the information given and that you give permission for the procedure to go ahead. You will have the opportunity to ask any questions at this point. You do not need to get changed. A gown will be placed over your chest and shoulders to protect your clothing during the procedure.

You will then be taken from the waiting area to the procedure room by the nurse, where you will be asked to sit upright on a trolley.

Who will be in the procedure room with me?

You will be accompanied in the procedure room by two nurses who will monitor and support you throughout your bronchoscopy. They will assist the doctor with the procedure and the collection of any samples or specimens.

The procedure will be performed by a qualified and experienced doctor. In some cases a trainee doctor may be present and may be learning to perform bronchoscopy under the direct supervision of a fully qualified doctor. If you would prefer not to have your bronchoscopy performed by someone who is training, you will have the opportunity to make this known before entering the room.

What will happen to me during the procedure?

A probe will be placed on your finger so that your pulse and oxygen levels can be monitored throughout the procedure. Local anaesthetic will be sprayed upon the back of your nose and throat to numb the tissues and suppress the need to cough. This can taste a little unpleasant. A sedative is then injected via the cannula in your hand or arm. This will not send you to sleep, but may make you feel drowsy and reduce your awareness of time. The doctor will then pass the thin, flexible bronchoscope through the nostril (or mouth if nostrils are blocked, sore or narrow). Further local anaesthetic will be applied as the bronchoscope continues down the back of the throat and into the lungs. This may cause you to cough

and catch your breath every now and then but it will pass, and your breathing will settle. The nurse will help to keep you safe by suctioning or wiping any secretions away from your nose and mouth. Oxygen may also be introduced by way of a small sponge gently inserted into one of your nostrils.

The doctor will examine the large airways of the lungs and may record photographic images if needed. Biopsies or small samples of secretions or washings may also be taken as necessary.

How long does it take?

The procedure itself will take only 10 to 15 minutes and sedation will reduce your awareness of this time. However, you need to be monitored for approximately two hours in our recovery area after your bronchoscopy before you can safely go home. You should expect to be in the department for between 3 to 4 hours so that we can admit you safely and observe you afterwards.

What happens after the procedure?

As soon as your bronchoscopy is finished, you will be transferred to the recovery area where a nurse will monitor you for the next two hours. You will be unable to drink anything safely until all the local anaesthetic has worn off. After one hour, provided that you are breathing normally and you do not have a temperature, you can sip water. After another hour, if all is well, you may eat and drink.

A nurse will give you written discharge advice and contact numbers and will contact the person who is collecting you, and provided you are accompanied, you can go home.

Are there any risks or complications with Bronchoscopy?

Serious complications are uncommon, but as with any invasive procedure, there are some risks involved, including:

- temporary increase of symptoms such as shortness of breath or wheeze
- chest infection
- bleeding
- coughing up small amounts of blood
- allergic reaction to medication given
- pneumothorax an air leak from the lung into the space between the lungs and the rib cage can rarely occur. This may need to be drained by a tube and require a hospital admission.

If any of these problems develop before you go home, it may be necessary to keep you in hospital overnight for observation and treatment as necessary.

What if I feel unwell after I have been discharged?

For the next few days following the procedure, you may experience a sore throat, feel a little 'chesty' or cough up a small amount of blood. This should all be minimal and should settle within 24-48 hours.

If you are at all concerned, or develop a fever, pain in the chest, or bring up large quantities of blood by vomiting or coughing, you should contact your GP, or attend the Emergency Department. You can also call the following numbers for advice:

Royal Bournemouth Hospital Endoscopy Department:

0300 019 4668 (Monday - Friday 8am - 6pm)

Royal Bournemouth Hospital Department of Thoracic Medicine:

0300 019 4859 (Monday - Friday 8.30am - 4pm)

Poole Hospital Endoscopy Department:

0300 019 2772 (Monday - Friday 8am - 6pm)

Poole Hospital Department of Thoracic Medicine:

0300 019 2691 (Monday - Friday 8:30am - 4pm)

When will I know the results of my Bronchoscopy?

You may have a face-to-face appointment to discuss the results of your test or the doctors/nurses may have made a plan to review the result and phone or write to you. A copy of the report will be sent to your GP.

Endobronchial ultrasound

In some cases a more complicated procedure is performed which would be discussed with you at your appointment before you attend for your bronchoscopy. This is called an endobronchial ultrasound (EBUS). This is similar to a normal bronchoscopy - but the thin flexible scope would be passed through your mouth rather than your nose and the procedure would take a little longer - 30 to 60 minutes. The scope used is attached to an ultrasound probe that allows the doctor to see the lymph glands and the lungs. This is used to enable samples to be taken using a fine needle. More than one sample will be taken. There is a small risk of lung collapse after this procedure, so we will arrange for a chest x-ray afterwards to check that this has not occurred. This will be seen by the doctor before you are discharged home..

For further advice or information please contact:

Bournemouth Hospital Endoscopy Department:

0300 0194668 (Monday - Friday 8am - 6pm)

Royal Bournemouth Hospital Department of Thoracic Medicine:

0300 019 4859 (Monday - Friday 8.30am - 4pm)

Poole Hospital Endoscopy Department:

0300 019 2772 (Monday - Friday 8am - 6pm)

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0300 019 2691 (Monday -Friday 8:30am - 4pm

The Royal Bournemouth Hospital, Castle Lane East, Bournemouth, Dorset, BH7 7DW Poole Hospital, Longfleet Road, Poole, Dorset, BH15 2JB

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