Discharge advice following laryngoscopy, pharyngoscopy and oesophagoscopy

Definitions

A **laryngoscopy** is an examination of your larynx (voice box) using an endoscope.

A **pharyngoscopy** is an examination of the pharynx (the area at the back of the throat) using an endoscope.

An **oesophagoscopy** is an examination of your oesophagus (the gullet or food pipe) using an endoscope.

An **endoscope** is a tube with a light and video camera at its lower end. Each procedure (endoscopy) is performed while you are asleep under general anaesthetic. Small samples of tissue (biopsies) may be taken for testing and diagnosis.

What does the operation consist of?

- The operation is carried out under a short general anaesthetic.
- You will wake up in the recovery area of the theatre department and be closely monitored by the nursing staff. You will be given medication to relieve any pain or sickness. You may also be given a drip (intravenous fluids) to hydrate you. The drip will be taken down once you are able to drink enough fluids.

What happens back on the ward?

- You will need to rest in bed as you may well feel sleepy from the anaesthetic. We advise you not to leave the ward area as you may feel unwell.
- Your condition will continue to be monitored and medication given to keep you comfortable.
- The surgeons may have instructed you to be ‘nil by mouth’ for a particular period of time, in order to allow your throat or windpipe to heal without complication. This period of time will vary, depending on the procedure undertaken. Reasons for this will be fully explained to you. An intravenous drip of fluid will keep you hydrated and mouth care will be provided to help with any dryness or discomfort.
- Fluids and a light diet can be taken as soon as the surgeon allows you to do so.

Discharge advice

- Your doctor will advise a specific period of recovery. In general, you should rest at home for one week. Avoid driving, operating heavy machinery and taking part in strenuous activity during this time to best recover from your anaesthetic and procedure. If you require a sick certificate, please ask the medical staff before you leave the ward.
- Any throat discomfort or soreness should gradually ease off over the next few days. A soft diet for two to three days is advised, as swallowing may feel sore. Pain relief medication can help, particularly if taken before meals. The nurses will explain how and when to take your medication.
- To improve recovery, eat a healthy diet, avoid alcohol and stop or reduce smoking. Smoking will irritate the area examined. Staff can provide advice, aids (e.g., nicotine patches) and support group contacts to help you quit.
- Following a laryngoscopy, the surgeon may have instructed you to rest your voice for a number of days.

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(usually one to two). This is very important, in order to allow the voice box to recover. Please do not even whisper, as this actually puts more strain on the vocal cords.

- Contact F5 ward if you have any concerns following discharge or if you experience any spitting up of fresh blood, worsened pain in the throat, chest or back (between the shoulder blades) or a raised temperature. Pain and fever can be signs of a perforation (hole) in the area you had examined and would require a return to hospital for treatment.

Contact information
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