Patient information factsheet

Having a bronchoscopy

IMPORTANT TO DO IMMEDIATELY
You must phone us immediately if:
• You are taking any blood thinning medication such as aspirin, clopidogrel, warfarin, rivaroxaban, apixaban or others (please ask your doctor if you are unsure if about any of your tablets).
• You have had a heart attack within the last six weeks
• You need oxygen at least 16 hours a day
• You have recently had or been exposed to tuberculosis
• You are diabetic and have concerns

If you’re from the Channel Islands, you must be prepared to stay overnight (and fly back the next day) in case there are medical issues during or after the procedure. Please contact us to check that an overnight bed has been arranged for you.

The telephone numbers are at the end of this leaflet.

VITAL INFORMATION – PLEASE READ
You must organise for someone to accompany you on the day and stay overnight with you after the procedure because you will have had a sedative.

You CANNOT DRIVE YOURSELF HOME OR TRAVEL UNACCOMPANIED. A responsible adult MUST be available to stay overnight with you. Otherwise you may need to be admitted to hospital overnight after your procedure. YOU MUST LET US KNOW IF THIS IS AN ISSUE on the telephone number at the end of this leaflet as soon as possible in order for us to make arrangements.

You must not eat within 4 hours of your appointment time.
You must not drink, including water, within 4 hours of your appointment time.

The procedure usually takes about 40 minutes and you are likely to be in hospital for a total of four hours. There is no need to bring overnight clothes as this a day case procedure. Do try to leave valuables at home.

This factsheet gives you information about having a bronchoscopy. We hope it will help to answer some of the questions you may have. If you have any more questions or concerns after reading this information please contact a member of either the medical team that referred you or one of the numbers at the bottom of this factsheet.
What is a bronchoscopy?
A bronchoscopy is an examination of the breathing passages (airways) of your lungs. The bronchoscopy is carried out with a thin tube-like instrument that has a small camera at its tip, called a bronchoscope. The bronchoscope enables us to see inside the breathing passages of your lungs and, if needed, to take samples of mucus (phlegm) or tissue from inside your lungs.

Why do I need a bronchoscopy?
Some of the common reasons why bronchoscopies are carried out include:

- **Infection** – samples from your lungs can help find the cause of infections and enable us to treat you appropriately. The bronchoscope can also be used to clear some of the mucus from your lungs.
- **Lung disease** – in some diseases in which your lungs are scarred or inflamed, samples taken from your lungs may help to determine the cause.
- **Bleeding** – if there is sometimes blood when you cough, we can look inside your breathing passages to determine where the blood is coming from.
- **Abnormal chest x-ray** – there may be a narrowing of a breathing passage or a ‘spot’ on your lung that your doctor wants to look at and possibly take samples.
- **Persistent cough** – samples taken during a bronchoscopy can sometimes help to determine the cause for a cough that does not respond to usual medication.
- **Noisy breathing** – a bronchoscopy can help determine if narrowing of your breathing passages or erratic movement of your vocal cords (voice box) is causing additional breathing sounds.

The doctor who referred you for a bronchoscopy will explain why you need this test.

Is there an alternative test that I can have?
Breathing tests, x-rays and CT-scans of your lungs can give some additional information about your lungs but a bronchoscopy provides detailed information as it enables us to look inside your breathing passages and obtain specific samples for testing.

How do I prepare for my bronchoscopy?
You will need to provide an up-to-date list of all your medication, allergies and any medical conditions. It is vital you let both us and the doctor who referred you know if you are taking any blood thinning medication (such as warfarin, aspirin, clopidogrel or rivaroxaban, apixaban or similar) or if you are diabetic. We can be contacted on the number provided. You should take all of your usual morning medications unless advised otherwise by your doctor or ourselves.

You must not eat or drink anything (including water) for four hours before the procedure.

What will happen before the bronchoscopy?
You will be met by a nurse who may change you into a gown and will carry out a series of pre-procedure checks (glasses and/or false teeth will be removed before the procedure). The doctor will talk you through what will happen and you’ll have the opportunity to ask any questions before signing a consent form. A loose clip (fingerprobe) will be attached to your finger so that we can monitor the oxygen levels in your blood and your heart rate during the procedure. A tiny plastic tube (cannula) will be inserted so that we can give you medication to relax you. You will also be given some oxygen into your nose or mouth.
What happens during a bronchoscopy?
Local anaesthetic will be sprayed into your nose and throat. This can be uncomfortable; the anaesthetic doesn’t taste particularly pleasant and you may have a sensation of numbness or ‘blocking’ in the back of your throat. You will have a sedative and should be comfortably relaxed throughout the procedure. It may feel as if you can’t swallow, but you can - the back of your throat is just temporarily numb. A flexible telescope about the thickness of a little finger is passed into your lungs through your nose or mouth. Anaesthetic is sprayed through the telescope to numb first the vocal cords and then the air passages in the lungs. While your voice box and breathing passages are being numbed, you may cough: this usually settles down when the local anaesthetic takes effect. The coughing may however cause you some discomfort during the procedure. The doctor will look inside the breathing passages and take samples; you may be given more anaesthetic or sedation to help address any discomfort you may experience.

What happens after the bronchoscopy?
You will be looked after by a nurse until you are awake enough to leave. Your breathing rate, pulse and blood pressure will be checked. You may have a chest x-ray. You may cough up small amounts of blood: inform the nurse if you cough up more than a tablespoon of blood, have chest pains or difficulty breathing. When you have come around from the sedation sufficiently, you will be offered a drink and a small bite to eat. If you tolerate these well, you will be allowed to go home.

Can anything go wrong?
A bronchoscopy is a safe procedure with little risk and complications are relatively rare. There is a small chance of infection and bleeding associated with the procedure, but every effort is made to prevent this from happening. Air can also sometimes leak into the space surrounding your lung during the procedure but this is not usually a problem and the air can be taken out with a needle and syringe or in some instances a drain (little plastic tube) needs to be inserted and left inside for a couple of hours to drain the air out. Occasionally patients take a longer time to recover after the procedure and may need to be admitted to hospital for observation.

Are there any adverse effects?
Most patients have very few after effects. You’re likely to feel sleepy for the rest of the day and into the next morning. Your throat will be numb for an hour or two and you may have a mild sore throat, hoarseness, congestion and/or a cough for a couple of days. There may be discomfort in the chest but this is temporary for a day or so. You may also experience a feeling of congestion in the chest, and there is a 1 in 10 chance of a mild fever that should settle by itself. These can all be treated with paracetamol or ibuprofen if required. Due to the sedative you may not remember much about the test and it’s important that you do not drive a car or operate machinery for 24 hours.

It is likely you will cough up a small amount of blood due to the biopsy procedure and the telescope. This should subside within a day or so. If it doesn’t, or a large amount of blood comes up either all at once or over a period of time, you should contact us on the numbers provided or attend your local emergency department. If you develop discomfort in the chest or increased difficulty breathing, you should attend your local emergency department immediately.

Results
In some cases the doctor can give you some initial results of your bronchoscopy before you leave but the results will also be sent to the doctor who requested the procedure and they will contact you when they have received them. If you have not heard within a week, please contact them for an appointment.
Going home
You will need to be accompanied home by a relative, friend or carer and have someone stay with you overnight because you have had a sedative. You must not go home alone or use public transport. If no-one is available please let us know and we will arrange for you to be admitted to hospital.

If you are from the Channel Islands, you will need to stay overnight - the liaison team for patients from the Channel Islands will make these arrangements. It’s important that you rest overnight.

You must NOT drive, drink alcohol or operate machinery for 24 hours, or sign legal documents for 48 hours following the procedure.

Contact telephone numbers
Endoscopy booking office  023 8120 5686 or 023 8120 4576
Endoscopy Unit Coordinator  023 8120 3186 (for any nursing and medical enquiries)
Respiratory secretaries  023 8120 6257 or 023 8120 6686

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Tremona Road
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If you need a translation of this document, an interpreter or a version in large print, Braille or on audiotape, please telephone 023 8120 4688 for help.