This information booklet is for patients who are due to have a bronchoscopy. It will explain the reasons for the procedure, the procedure itself and potential risks that may be associated with it. It will also explain the care you will need before and after the procedure. Please feel free to ask any questions you may have. The doctors and nurses are available to support you at this time.

A bronchoscopy is a procedure to look into your trachea (windpipe) and bronchus (airways).

A doctor will use a surgical telescope called a bronchoscope to look down your throat and see into your windpipe and airways. If you are being looked after by one of the thoracic surgeons these procedures are done under a general anaesthetic.

The doctor will discuss this procedure with you and explain why it is recommended in your case.

Reasons for doing a bronchoscopy

A bronchoscopy is usually recommended to investigate symptoms you may have been experiencing.

During the procedure the surgeon may:

- Look into your airways
- Take mucus, cells and tissue samples (biopsies) to be examined in the laboratory
- Remove foreign objects obstructing the airway
- Make the airways wider; this may involve laser treatment or placing a stent in the airways to hold the narrowed portion open

It is important that you understand why this procedure is necessary and what is involved, so that you can give your permission (consent) for it to be done. Please feel free to ask any questions and voice any concerns you may have about your procedure.

Preparation for your bronchoscopy

You will normally be admitted to hospital the day of the procedure; however some patients will need to come in the day before. We will give you information about when to stop eating and drinking, as well as advice about taking your normal medications.

On admission you will need to have the following tests.

- Blood tests
- ECG – heart tracing
- Chest x-ray
- A full set of observations
- Swabs from your nose and groin to screen for MRSA infection

There will be some paperwork to be completed and you will be examined and given an explanation of the procedure. The doctor will then ask you to sign a consent form.

An anaesthetist will see you to assess your fitness for a general anaesthetic.

Some of this may have already been done if you have attended the pre-admission clinic.
You will need to have a shower and hair wash using an antiseptic solution that the ward will give you.

You will normally be admitted to F10, the surgical day unit (also known as SDU) for this procedure. When you arrive you will be shown to your bed space. Sometimes the bed is not ready when you arrive on the ward so you may be asked to sit in the waiting area.

Once you have a bed you will be asked to change into a theatre gown. Please let the staff know if you have any valuables that require locking away for safekeeping.

You will need to wear compression stockings, which will help to prevent blood clots (deep vein thrombosis – DVT) developing in your legs.

The procedure

The procedure is done under a general anaesthetic. The surgeon will look at your airways very carefully with the bronchoscope before doing any of the procedures mentioned above, as discussed with you.

Specialist registrars are qualified doctors in training and may do this procedure, but only when fully competent and under supervision by your consultant surgeon.

After the procedure

Once the procedure is finished you will go to the recovery room next to theatre. You will be given oxygen through a face mask or nose tubes while you are recovering from the anaesthetic.

Once you are awake we will help you to sit up. Your condition will be monitored, ensuring you are fully awake and breathing on your own. Your blood pressure, pulse, oxygen levels, temperature and breathing rate will all be taken at regular intervals. It is normal to cough initially following this procedure and your throat may feel sore. This will normally settle down fairly quickly.

You will stay in the recovery room until the anaesthetic and nursing staff are happy with your recovery. You will then return to the ward or SDU.

Some patients may need to have a chest x-ray.

When you return to the ward or SDU you will be allowed to start drinking; just sips of water to begin with. When the nurses are happy with your condition you will be able to increase the amount you drink.

The staff will continue to monitor your condition as necessary. You will need to stay in bed for a while before getting up. You will then be encouraged to walk around as able. When the staff are happy with your progress and you are drinking freely you will be offered something to eat.

Please inform the staff if you have any pain or feel more short of breath than normal following this procedure.

Results of your bronchoscopy

After the procedure one of the team will discuss with you how it went. It may not be possible to give you any results at this time. If biopsies have been taken it normally takes two weeks to get the results. You will normally be seen in an outpatient clinic to get the results. Please ensure you ask about any follow-up arrangements before going home.

Going home

Depending on your recovery you may be allowed home the same day, or you may have to stay in overnight.

If the staff have any concerns about your recovery they may feel it is not sensible for you to go home the same day, in which case you will need to stay in overnight so your condition can continue to be monitored.

You may go home once the staff feel you are recovered, you have passed urine and managed to eat and drink something without difficulty. Before discharge you will be checked to ensure you are ready to go home.

If your doctor has recommended starting on any medication a letter will be forwarded to your GP.
Most patients will be advised to continue to wear the compression stockings until fully recovered. If you experience any pain or discomfort in your calves (lower legs), or they become swollen contact your GP.

You must not drive for 48 hours after your procedure so will need a relative or friend to drive you home.

If you go home the same day of your procedure, there must be someone able to stay with you for the first night at home.

Expect to feel generally tired and to have some slight throat discomfort. This should improve over a few days but you may wish to take a mild painkiller such as paracetamol.

If biopsies have been taken it is normal to cough up a little blood for a few days after the procedure.

Ensure you have plenty of rest between activities for the first 24 to 48 hours. We would not recommend returning to work for at least 48 hours after you leave hospital.

**Complications and side effects of a bronchoscopy**

It is important you are aware that a bronchoscopy can occasionally result in complications.

**Sore throat**
- It is normal to feel slight throat discomfort where the bronchoscope was put in; this should improve over the next few days.

**Coughing up blood**
- It is normal to cough up a little blood for a few days after your procedure. More severe bleeding is not normal – if this happens you will need to stay in hospital.

**Changes in blood pressure**
- Sometimes your blood pressure may be lower after an anaesthetic. This is normally due to not having anything to drink for a while. You will either be asked to drink more or you may need to have fluids through a tube into a vein in your arm.

**Damage to teeth**
- Because of the nature of the procedure there is a risk that your teeth can be damaged. Although the surgeon and anaesthetist will try to avoid this you must be aware of the risk. Please inform the surgeon or anaesthetist if you have dentures, loose teeth or crowns, before the procedure.

**Chest infection**
- After any anaesthetic there is a small risk of developing a chest infection. Early mobilisation (moving around) will help prevent this.

**Bronchospasm**
- This is a temporary narrowing of the airways causing wheezing or coughing and usually settles down after a short while.

**Pneumothorax**
- Very occasionally the lung will partially collapse following this procedure. It will either resolve on its own or require a chest drain, which will mean having to stay in hospital until it resolves.

**Further information**

Please remember you can ask questions at any time if there is anything you are not sure about.

Once discharged if you have any concerns or questions contact the thoracic nurse specialists on 023 8120 8457 between 8am and 4pm.

Outside of these hours please contact ward E4 on 023 8120 6498.

We would also advise you to contact the ward if you have any of the following symptoms:

- Increased shortness of breath
- Concerns about the amount of blood you are coughing up
- Vomiting
- A high temperature

You may be asked to either come back in to hospital or to contact your GP.

- For any non-urgent queries you can contact the thoracic nurse specialists, on 023 8079 8457.
Please help Wessex Heartbeat make a difference

Mr/Mrs/Ms First name .................................................. Surname ...............................................................
Address ..........................................................................................................................................................
............................................................................................................ Postcode ..........................................
Telephone ............................................. Email ............................................................................................
I would like to receive more information on:
Events WHB Community Groups Healthy Heart Campaign

How to make a donation

1  By Cheque
I enclose a cheque for $........................... made payable to Wessex Cardiac Trust.
Please send cheques to the address at the bottom of this form.

2  By Credit or Debit Card
To make a donation by debit/credit card please call the Fundraising Team on 023 8070 6095. We regret that we cannot accept American Express or Diners Club cards.

3  Direct Debit Mandate
We are very grateful for any amount you are able to give. Please complete the Direct Debit section below.
I / we wish to pay Wessex Heartbeat the amount of $................ monthly / quarterly / annually, until further notice.

Instructions to your Bank or Building Society to pay by Direct Debit

Bank name.....................................................................................................................................................
Bank address ...................................................................................................................................................
Account name(s) ..........................................................................................................................................
Account number........................................................... Branch sort code ...............................................
Starting on .................................... Signature .................................................... Date ................................

Please send this form to:
Wessex Heartbeat, PO Box 270, Southampton General Hospital, Southampton SO16 6GE
T 023 8070 6095 E info@heartbeat.org.uk

All data is protected under the Data Protection Act and not shared with any other organisation. Wessex Heartbeat would like to keep you updated with our work. If you do not wish to receive information from us please tick the box.

Key Services

We fund Heartbeat House; a home from home providing free accommodation for the Wessex Cardiovascular and Thoracic Centre patients’ relatives, located just a few minutes walk from the hospital. For information about staying at Heartbeat House please ask the Ward Sister.

The story so far...

Wessex Heartbeat is a registered charity dedicated to providing support to the Wessex Cardiac Centre (WCC), its patients and their loved ones so they can receive the best possible care and support.

Wessex Heartbeat has raised over £13 million, helping the WCC become and remain a Centre of Excellence for cardiac care in the UK. We receive no funding of any type and rely solely on the donations of our generous supporters.

Wessex Heartbeat are continually funding projects to ensure the Centre remains at the forefront of cutting edge services. Wessex Heartbeat continues to help patients, loved ones and medical staff in many ways, including:

- Funding specialist equipment
- Providing patient literature
- Funding educational and training grants for medical staff

We are also taking the message of keeping healthy out to the community through our ‘Healthy Heart’ campaign, offering on the spot health checks to staff at businesses and organisations.

It is thanks to the generosity of many individuals and organisations that we are able to fund these projects past and present.

With an increasing number of patients being treated by the WCC, there are always more ways in which Wessex Heartbeat can help and ensure that the cardiac care these patients receive continues to get even better.

Our next major projects will be the development of a Cardiac Day Case Lounge and Heart Failure service.

For more information on our work please visit our website at www.heartbeat.co.uk

With your help, however large or small, we can continue to make a difference and change the lives of the people in our community.

Thank You

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Information for patients