

# Having a Bronchoscopy

## Other formats

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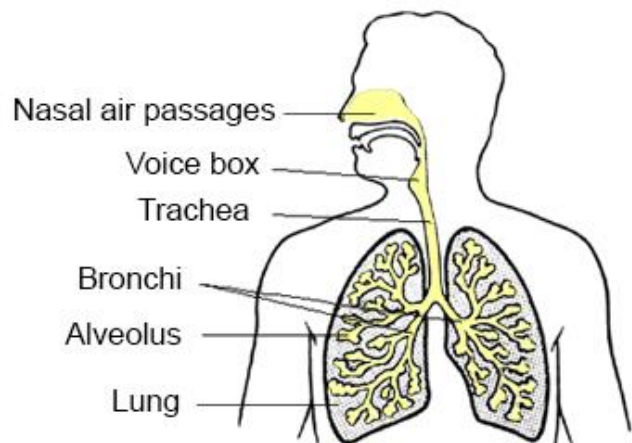
This leaflet will answer many of your questions about your bronchoscopy. However, if you would like to speak to someone, please contact either the Gemini Endoscopy Suite staff or one of the respiratory nurse specialists. The telephone numbers are at the back of this leaflet.

## What is a bronchoscopy?

Bronchoscopy is a procedure that lets doctors look at your lungs and air passages. It's usually performed by a doctor who specialises in respiratory diseases. During bronchoscopy, a thin tube (bronchoscope) is passed through your nose or mouth, down your throat and windpipe (trachea) and into your lungs. Bronchoscopy is most commonly performed using a flexible bronchoscope.

## What does it involve?

A bronchoscopy is carried out under a local anaesthetic and with sedation. A bronchoscope is a long, thin, flexible tube, about the width of a pencil, with a bright light at the end. It is passed up your nose, down your trachea (windpipe) and into the bronchi (air passages). Occasionally it may be necessary to pass the scope through the mouth instead. During the test, photographs are taken.



Sometimes it may be necessary to take a small amount of tissue (biopsy) from a particular area for further examination in the laboratory. This involves the painless removal of the tissue using tiny forceps passed through the bronchoscope.

We may also take brushings of your lung tissue. This involves passing a fine brush through the bronchoscope and gentle brushing the lung surface to collect some tissue. We may also take washings. This involves passing a small amount of saline down the bronchoscope and then sucking it back out to collect any secretions present to test. When you come to the department, a nurse will discuss the test with you. This is to ensure that you understand what the test involves. If you have any questions or worries, don't be afraid to ask.

## Special preparations

Instructions and important information relating to your test:

- It is extremely important that you **do not eat or drink anything for 6 hours** prior to your procedure. This includes chewing gum and boiled sweets.
- You may have sips of water only, up until **2 hours** before your test.
- If you do not follow these instructions, we need to rebook your appointment.
- You can take any regular medication on the morning of the procedure with a very small amount of water.
- Please bring with you a list of all current medications.

### Anti-coagulant advice: Warfarin

- Make an appointment to have your INR checked within 7 days of your appointment date and bring your results with you.
- If your INR is within the therapeutic range (the range specified for you by your doctor), then continue with the same dose of warfarin.
- If your INR is above your therapeutic range, then you will need to reduce your dose of warfarin to bring it back within its therapeutic range. Please consult your GP for advice on how to do this safely. You do not need to stop taking your warfarin.

### Anti-coagulants advice: Dabigatran, Rivaroxiban, Apixaban or Edoxaban

- Please do not take these on the morning of your procedure, unless you have been advised otherwise by your GP or doctor.

### Anti-platelets advice: Aspirin, Dipyridamole (Persantin), Clopidogrel (Plavix), Ticagrelor, Cangrelor or Prasugrel

- Please do not take these on the morning of your procedure, unless you have been advised otherwise by your GP or doctor.
- If you have any questions relating to your blood thinning medications or you are unsure about stopping them, please feel free to contact us or speak to your GP for further advice.
- If you are taking diabetic medication (insulin or tablets) and need advice, please contact the Diabetic Liaison Nurse on 01271 322726.
- If you have any allergies or bad reactions to drugs or other tests, please tell the nurse on admission and/or doctor.

**Your appointment time is NOT your procedure time**

## What happens before your procedure?

- When you arrive in the Endoscopy department, please report to reception.
- You will be asked to take a seat in the waiting area until the admissions nurse is ready to see you. Although we endeavor to see you at your allocated appointment time, we do sometimes experience a delay in our list. Thank you for being patient, the reception staff and admissions nurse will be able to keep you updated on any delays. In the admissions room, the nurse will take some information from you relating to your procedure and talk you through what to expect during your appointment. Once they are satisfied you understand what is going to happen, they will sign your consent form with you. This is a good opportunity to ask any questions you may have regarding the examination.
- Once the admission process is complete, the nurse will show you through into the recovery area where you will wait for the procedure. If you have chosen to have sedation, a cannula will be inserted in preparation for the medication which will be administered by endoscopist.
- Once you are in the procedure room, the endoscopist will talk to you about your reasons for having the procedure. You may want to tell them about any symptoms you have been having and how long they have been occurring.

## What happens during the procedure?

- You will be made comfortable on a trolley in a sitting position. A local anaesthetic will be given in the form of a spray and gel to numb your nose, throat and voice box. We will also give you a sedative injection into a vein in your arm to make you feel sleepy and relaxed.
- The doctor will then pass the bronchoscope gently into your nose or mouth and down into the air passages.
- More anaesthetic will be sprayed through the bronchoscope. This causes no pain but may be slightly uncomfortable and cause occasional coughing. The tube will not interfere with your breathing. It usually takes about 10-15 minutes to carefully examine all the air passages.
- When the examination is finished, the bronchoscope is removed quickly and easily causing little discomfort

## What happens after the procedure?

- If you are still a little drowsy from the sedation, we will leave you to rest in the recovery area, where a nurse is always present.
- Your throat will be numb and therefore it will not be safe to eat or drink for at least one hour.
- After the test, you may have a slight nosebleed. If you have had a biopsy (sample of tissue) taken, you may cough up a little blood. This will usually pass off within the next 24 hours and is nothing to worry about. Any soreness in the throat or hoarseness in the voice will also ease within a day or two.

## What are the risks?

This is a safe procedure. Bleeding or respiratory depression can occur, but this is very rare. You will be closely monitored throughout and if there is any cause for concern, the procedure will be stopped immediately.

### Sedation

- We call this conscious sedation. Which means you will be awake and aware. Some patients may experience brief periods of sleep. For most patients, they are able to speak and respond to verbal cues throughout the procedure. A brief period of amnesia may erase any memory of the procedure. Conscious sedation does not last long, but it will make you drowsy.
- **Side effects of conscious sedation:**
  - It may slow your breathing and the nurse may give you oxygen.
  - Your blood pressure may be affected and you may receive IV fluids to stabilise your blood pressure.
  - Because the effects of conscious sedation linger, you may have a headache, nausea and feel sleepy for several hours once you get home.
  - There is an increased risk of sedation related complications if you are elderly, frail or have a medical history of heart disease, cerebrovascular disease, lung disease, liver failure, anaemia and morbid obesity. The endoscopist carrying out the procedure will discuss the sedation or alternative options on the day.

## When will I be able to go home?

Provided you are fully recovered, you will be able to go home within two hours of having the examination. **However, it is important that someone comes to pick you up from the endoscopy unit reception and that you should be accompanied home by a responsible adult who would stay with you for at least 12 hours if you live alone.** If this is not possible, please contact the Gemini Endoscopy Suite. The telephone number is at the back of this leaflet.

Once home, it is important to rest quietly for the rest of the day. **You must not drive a car, sign legal documents, drink alcohol or operate machinery for 24 hours.** It is also advisable to take the next day off work.

## Further information

**If you are not able to attend for your appointment, please contact the booking team as soon as possible, as we can offer your appointment to another patient.**

Doctors and nurses training in Endoscopy at many different levels attend the unit or department and may be involved in your care under the direct supervision of experienced consultants and nurses. If you do not wish to be involved in training these experts of the future, please contact the booking team.

If you have any queries or concerns about your bronchoscopy, please do not hesitate to contact the Gemini Endoscopy Suite.

## Useful telephone numbers

- Booking team 01271 370214 (for appointments and cancellations)
- Gemini Endoscopy Suite 01271 349180 (for general enquiries such as medications)
- Respiratory Nurse Specialist 01271 311600

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## PALS

The Patient Advice and Liaison Service (PALS) ensures that the NHS listens to patients, relatives, carers and friends, answer questions and resolves concerns as quickly as possible. If you have a query or concern call 01271 314090 or email [rduh.pals-northern@nhs.net](mailto:rduh.pals-northern@nhs.net). You can also visit the PALS and Information Centre in person at North Devon District Hospital, Barnstaple.

## Have your say

Royal Devon University Healthcare NHS Foundation Trust aims to provide high quality services. However, please tell us when something could be improved. If you have a comment or compliment about a service or treatment, please raise your comments with a member of staff or the PALS team in the first instance.

Tell us about your experience of our services. Share your feedback on the Care Opinion website [www.careopinion.org.uk](http://www.careopinion.org.uk).

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