

## E07Bronchoscopy

Expires end of June 2022

**This information is for guidance only. There may be local variations in practice within the specialties in this Trust.**

The Patient Advice and Liaison Service (PALS) would be pleased to hear any comments or suggestions you may have about our services.

They can offer non-clinical confidential advice and support if you have any concerns.

PALS can be contacted on 01782 676450, 01782 676455 or email [patient.advice@uhns.nhs.uk](mailto:patient.advice@uhns.nhs.uk).

You can also contact:

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## What is a bronchoscopy?

A bronchoscopy is a procedure to look for any problems inside your airways (bronchi) using a flexible telescope.

Your doctor has suggested a bronchoscopy. However, it is your decision to go ahead with the procedure or not. This document will give you information about the benefits and risks to help you to make an informed decision.

If you have any questions that this document does not answer, it is important that you ask your doctor or the healthcare team. Once all your questions have been answered and you feel ready to go ahead with the procedure, you will be asked to sign the informed consent form. This is the final step in the decision-making process. However, you can still change your mind at any point.

## What are the benefits of a bronchoscopy?

Your doctor (a lung specialist) is concerned that you may have a problem in your airways. A bronchoscopy is a good way of finding out if there is a problem.

## Are there any alternatives to a bronchoscopy?

An x-ray, scan or biopsy (removing small pieces of tissue) may give information about the cause of the problem but a bronchoscopy often leads to a diagnosis.

## What will happen if I decide not to have a bronchoscopy?

Your doctor may not be able to confirm what the problem is. If you decide not to have a bronchoscopy, you should discuss this carefully with your doctor.

## What does the procedure involve?

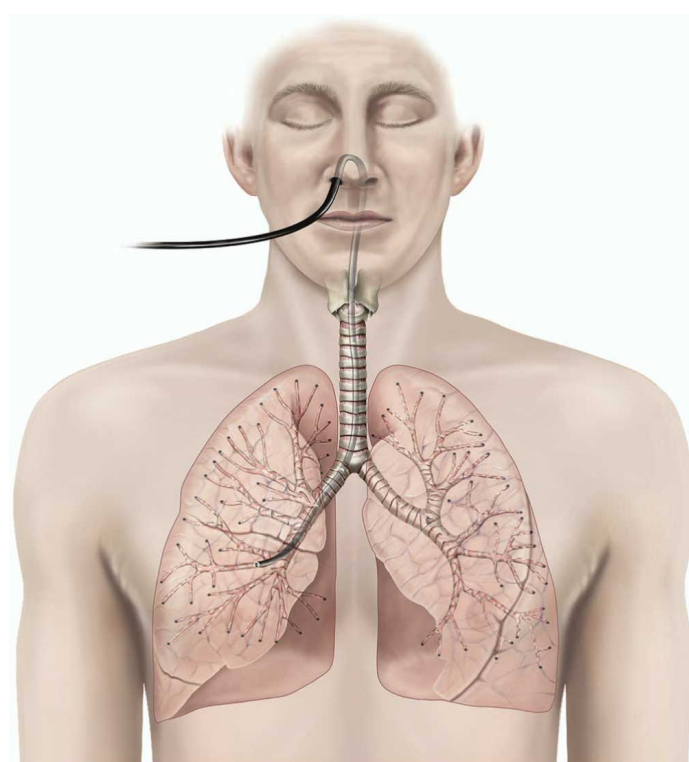
### Before the procedure

If you take warfarin, clopidogrel or other blood-thinning medication, let your doctor know at least 7 days before the procedure.

Do not eat in the 4 hours before the procedure. If you have diabetes, let the healthcare team know as soon as possible. You will need special advice depending on the treatment you receive for your diabetes. You may drink water up to 2 hours before the procedure.

The healthcare team will carry out a number of checks to make sure you have the procedure you came in for. You can help by confirming to your doctor and the healthcare team your name and the procedure you are having.

The healthcare team will ask you to sign the consent form once you have read this document and they have answered your questions.



A bronchoscopy

### In the treatment room

Your doctor may offer you a sedative to help you to relax. They will give it to you through a small needle in your arm or the back of your hand. You will be able to ask and answer questions but you will feel relaxed.

Your doctor may give you medication by injection into a muscle to reduce your chest secretions.

A bronchoscopy is sometimes performed under a general anaesthetic. Your doctor will be able to discuss this with you.

They may use local anaesthetic gel and spray to numb your nose and throat. This can taste unpleasant but will allow your doctor to perform the procedure without causing too much discomfort. It is normal to cough after the local anaesthetic.

Your doctor may also use a small needle to inject local anaesthetic through your skin into your windpipe. This will usually make you cough but is effective at reducing a cough later.

The healthcare team will monitor your oxygen levels and heart rate using a finger or toe clip. If you need oxygen, they will give it to you through a mask or small tube under your nostrils.

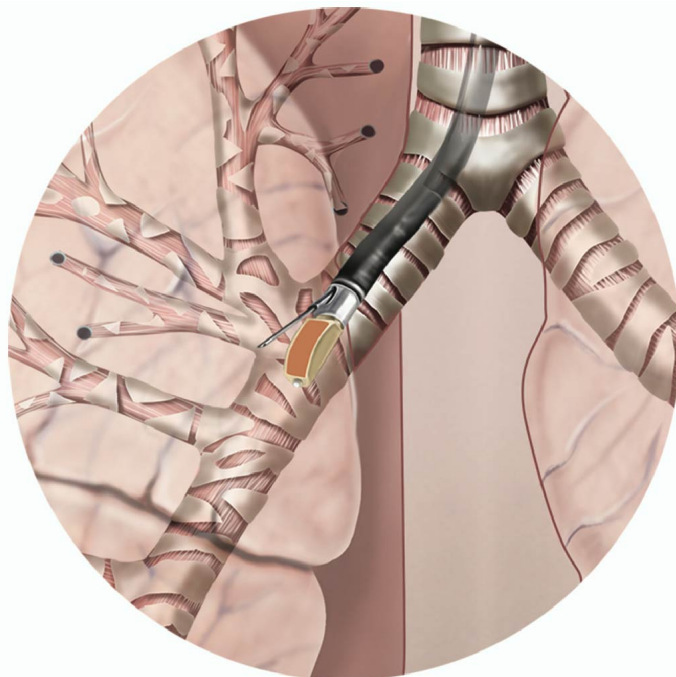
If at any time you want the procedure to stop, raise your hand. Your doctor will end the procedure as soon as it is safe to do so.

A bronchoscopy usually takes less than 15 minutes. Your doctor will pass a flexible telescope (bronchoscope) through your mouth or nostrils and down into your lungs.

Your doctor will use the bronchoscope to examine your airways. To help make the diagnosis, your doctor can perform biopsies and they may place a small amount of fluid in your lungs and then remove it.

Sometimes they may perform a biopsy using a small needle that they pass through your airways to get samples of tissue beneath. This is called a WANG or transbronchial needle biopsy.

Sometimes your doctor may use a special bronchoscope that produces ultrasound images (endobronchial ultrasound - EBUS). This allows your doctor to see beyond your airways, and insert the needle more accurately. This usually takes 25 to 45 minutes, a little longer than a standard bronchoscopy. Your doctor will tell you if you need an endobronchial ultrasound.



An endobronchial ultrasound

## What complications can happen?

The healthcare team will try to reduce the risk of complications.

Any numbers which relate to risk are from studies of people who have had this procedure. Your doctor may be able to tell you if the risk of a complication is higher or lower for you.

Some complications can be serious and can even cause death (risk: 2 in 10,000).

You should ask your doctor if there is anything you do not understand.

The possible complications of a bronchoscopy are listed below.

- Shortness of breath. This usually settles quickly but sometimes your breathing can be more difficult caused by the effect of the sedative or inhaling saliva. The healthcare team will monitor your oxygen levels and will give you oxygen if you need it.
- Bleeding from a biopsy site. Usually there is little bleeding. It is normal to cough up some streaks of blood for 1 to 2 days.
- Developing a high temperature a short while after the procedure. This is easily treated with paracetamol.

- Developing a sore throat, husky voice or a cough getting worse. This gets better quickly.
- Allergic reaction to the equipment, materials or medication. The healthcare team is trained to detect and treat any reactions that might happen. Let your doctor know if you have any allergies or if you have reacted to any medication or tests in the past.

## Covid-19

Coming into hospital increases your risk of catching or passing on Covid-19 (coronavirus) as you will be around more people than usual. This risk increases further if the procedure involves your nose or throat. Practise social distancing, hand washing and wear a face covering when required.

## How soon will I recover?

After the procedure you will be transferred to the recovery area where you can rest. If you were given a sedative, you will usually recover in about 2 hours but this depends on how much sedative you were given.

Once you are awake enough and able to swallow properly, you will be given a drink.

If you had sedation:

- a responsible adult should take you home in a car or taxi and stay with you for at least 24 hours;
- you should be near a telephone in case of an emergency;
- do not drive, operate machinery or do any potentially dangerous activities (this includes cooking) for at least 24 hours and not until you have fully recovered feeling, movement and co-ordination; and
- do not sign legal documents or drink alcohol for at least 24 hours.

You should be able to return to work the next day unless you are told otherwise.

The healthcare team will tell you what was found during the bronchoscopy and discuss with you any treatment or follow-up you need. Results from biopsies will not be available for a few days so the healthcare team may arrange for you to come back to the clinic for these results.

Once at home, if you have severe chest pain, continued vomiting, a high temperature lasting

more than 12 hours, sudden shortness of breath or you cough up more than a tablespoon of blood, let your doctor know straight away.

Ask your healthcare team if you need to do a Covid-19 test when you get home.

## Lifestyle changes

If you smoke, stopping smoking will improve your long-term health. Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight. Regular exercise should improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

## Summary

A bronchoscopy is usually a safe and effective way of finding out if there is a problem in your airways. However, complications can happen. You need to know about them to help you to make an informed decision about the procedure. Knowing about them will also help to detect and treat any problems early.

[Keep this information document. Use it to help you if you need to talk to the healthcare team.](#)

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatments options.

This document is intended for information purposes only and should not replace advice that your relevant healthcare team would give you.

### Acknowledgements

Reviewer: Samuel Kemp (MBBS, MD, FRCP)

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