

Patient Education Literature

We recommend that you read this handout carefully in order to prepare yourself or family members for the proposed procedure. In doing so, you will benefit both the outcome and safety of the procedure. *If you still have any questions or concerns, we strongly encourage you to contact our office prior to your procedure so that we may clarify any pertinent issues. An educated patient is the best patient.*

Bronchoscopy

Definition

Broncho = bronchial tube or windpipe

scopy = an action involving the use of an instrument for viewing

This procedure involves placing an instrument between the upper and lower teeth, over the tongue and between the vocal cords to evaluate the bronchial tubes, which are the passages to the lungs.

Purpose of Procedure

There are several reasons why this procedure is done: to remove a foreign body or to examine the lining of the bronchial tubes for causes of bleeding or blockage.

Preparation

As with any procedure in which anesthesia is administered, you will be asked not to eat or drink anything after midnight on the evening prior to your surgery. You may brush your teeth in the morning but not swallow the water. If you are on medications that must be taken, you will have discussed this with us and/or the anesthesiologist and instructions will have been given to you. The procedure will not be performed if you are currently taking, or have recently taken any medication that may interfere with your ability to clot your blood (blood thinners, aspirin, anti-inflammatory medicines, etc...). ***Please refer to the attached list and tell us if you took any of these within the past 10 days.*** If your new medication is not on the list, alert us immediately so that we may ensure optimal procedure safety. We will have reviewed all of your current medications with you during the pre-operative consultation. You are obligated to inform us if anything has changed (medication or otherwise) since your previous visit.

Procedure

This procedure involves placing a bronchoscope, which is an illuminated hollow metal tube, between the upper and lower teeth, over the tongue and through the vocal cords into the windpipe or trachea. A tooth guard is used to protect the upper teeth from injury. The lining of the trachea and bronchial tubes are carefully evaluated. Instruments are used to remove a foreign body, or mucus plugs if present. Biopsies are taken of suspicious areas. The scope is then withdrawn.

Post Procedure

Following this procedure, pain medicine may be prescribed to manage discomfort. Operation of motor vehicles or machinery is not allowed while taking this medication. Antibiotics may also be prescribed if necessary.

Expectations of Outcome

This operation should result in complete removal of a foreign body if one was present. If the procedure was done for a biopsy, then treatment will be determined by the extent of involvement in the bronchial tubes. Further studies will be needed to determine if there has been any spread of the cancer.

Possible Complications of the Procedure

Bronchoscopy is a safe procedure, however, there are uncommon risks that may be associated with it. While we have discussed these and possibly others in your consultation, we would like you to have a list so that you may ask questions if you are still concerned. It is important that every patient be made aware of possible outcomes that may include, but are not limited to:

- Anesthesia complications: There is always a small risk with general anesthesia. This risk is increased if there is any family history of trouble with anesthesia. The risks can range from nausea and vomiting to very rare life threatening problems. You can discuss any questions with your anesthesiologist.
- Bleeding
- Injury to the teeth
- A collapsed lung, although this is rare

We provide this literature for patients and family members. It is intended to be an educational supplement that highlights some of the important points of what we have previously discussed in the office. Alternative treatments, the purpose of the procedure/surgery, and the points in this handout have been covered in our face-to-face consultation(s).