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CTPALS025
Date of Publication: February 2018
Date for Review: February 2021

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Bronchoscopy under a General Anaesthetic



Examination of windpipe and lungs

This leaflet has been written to provide information about a procedure to examine your windpipe and some areas of your lungs (Bronchoscopy) under a general anaesthetic. We hope it answers some of the questions or concerns you may have about the procedure. It is not intended to replace talking with medical or nursing staff.

What is a Bronchoscopy?

A Bronchoscopy is a procedure that allows a doctor to examine your windpipe and some areas of your lungs by passing a tube (called a bronchoscope) with a camera and a light on the end of it down your throat.

Why do I need this test?

This test will allow your doctor to look for signs of lung disease or certain lung conditions. Your doctor may take a sample of tissue during the procedure to be later examined or remove any foreign objects.

How is it done?

You will be given a general anaesthetic and will therefore be asleep during the procedure. Once you are asleep your doctor will insert a long thin tube with a camera and a light on the end of it (bronchoscope) into your mouth and down your throat. The doctor will be able to guide the scope by looking into the eye piece or looking at the images on a video monitor. Looking down the bronchoscope will allow your doctor to examine your windpipe and lungs. Samples of tissue may be taken during the procedure and later examined.

How long does it take?

The procedure takes approximately 30 minutes.

Will I have any pain or discomfort following the procedure?

You may have a sore throat for a short time after the procedure. If you are in any pain you should inform the staff.

How do I prepare for the procedure?

You will usually come into hospital the day before, or occasionally on the morning of the procedure. You may need to have a heart tracing (ECG), breathing test, chest x-ray and routine blood tests. You will be informed when to stop eating and drinking prior to the procedure.

What are the benefits of having the procedure?

The procedure can help your doctor to diagnose or rule out certain lung conditions, which may require treatment.

What are the risks involved?

Any risks involved with the procedure will be discussed with you in more detail before you sign a consent form.

There is a small risk of causing a tear to the throat (Oesophagus).

There is a small risk of the lungs collapsing during the procedure.

If this happens you may require treatment to reinflate the lung.

Oxygen levels may drop, which may mean you require oxygen for a few hours after the procedure.

What alternatives do I have?

This depends on your symptoms or your condition.

Other tests or procedures that provide information about the lungs include CT scans of the chest, breathing tests and chest x-rays.

Your doctor would be happy to discuss any alternative tests or procedures if they are applicable to you.

What can I expect after the procedure?

After the procedure you will be taken to a recovery room in theatre and closely monitored until you are awake. You will then return to the ward. You may notice that you cough up a small amount of blood following the procedure, this is entirely normal and usually passes within 24 hours. You may also have a sore throat, hoarseness or a cough for a short while. Staff on the ward will inform you when you are able to eat and drink.

Your doctor may inform you of the results of the Bronchoscopy before you go home. If you have had a sample of tissue taken to be examined you will be informed of the results when you are reviewed as an outpatient.

When can I resume normal activities?

You may be able to go home later the same day, or the day after the procedure. You should rest for the remainder of the day. Do not drive for 24 hours after the procedure. You should take up to 1 week off work.

This advice will be discussed with you in more detail before you go home and you will be given a discharge advice sheet.