

Bronchoscopy & EBUS Consent Information

*Dr Hamor has recommended you have a bronchoscopy. Please read the following information carefully.
If you have any questions, please ask Dr Hamor.*

What is a Bronchoscopy?

Bronchoscopy is a very safe procedure. A bronchoscope is a narrow, long, flexible, fibre-optic camera, which is used to visualise the throat, vocal cords, wind pipe (trachea) and airways within the lung. A small channel allows delivery of water or local anaesthetics, as well as suctioning out of secretions for sampling and subsequent testing. This channel also allows passing through microscopic forceps or brushes to take samples of tissue for testing.

What is an EBUS?

An EBUS ("EndoBronchial UltraSound) is a slightly larger scope and has a small ultrasound probe at its tip, allowing scans of the lymph nodes in the middle of the chest. Once a lymph node is identified, a small sampling needle is advanced through the channel to collect tissue from the lymph node for testing.

Why do I need this procedure?

A Bronchoscopy allows sampling of tissue or fluid directly from the airways. This allows more specific and accurate diagnosis, including

- Atypical infections (including tuberculosis)
- Cancers or other growths in the lung
- Inflammation of the lung
- Anatomical abnormalities

Occasionally bronchoscopy is used to remove a blockage or a foreign body.

How long does the procedure take?

A Bronchoscopy usually takes 10-15 minutes to perform. An EBUS may take 30-45 minutes. However including preparation and recovery time, you will likely be at the hospital for most of the morning.

What is the cost?

Nothing. The procedure will be done at Prince of Wales Hospital as a public patient. There will be no fees payable for the procedure.

Fasting and Medications

You cannot eat or drink anything from midnight before the procedure. If you take blood thinners, including aspirin, please let Dr Hamor know. Also check if you should take your morning tablets with a sip of water.

What to expect

You will meet some of our nurses, who will check your details and medical history, and then take you into the procedure room. A needle (cannula) will be placed in your arm to allow intravenous medications to be given. Numbing sprays and gels will be applied to the nose and throat, which taste bitter. Supplemental oxygen will be applied, and your oxygen levels, blood pressure and heart rate will be monitored. Some patients are given a mouth-guard.

Once ready, the anaesthetic agents will be administered through your cannula. You will become relaxed and drowsy, but will continue to breath on your own. Most people will not remember the procedure at all. Coughing during the procedure is very common.

The bronchoscope is passed through the nose or mouth, down the back of the throat, through the vocal cords and into the main airways. Local anaesthetic will be administered into the airways directly. All accessible airways will be inspected, after which the scope will be directed to the area of interest and samples taken.

Once the procedure is finished, the scope will be removed. You will be sat up and remain on supplemental oxygen. Once you start to regain consciousness you will be moved through to the recovery area for further observation. Your ability to eat and drink will be tested after 2hours. Occasionally patients take longer to recover and will remain under observation for more than 2 hours, or infrequently, are admitted to the ward to stay overnight

The nurses will let you know when you are safe to be discharged. A friend or family member should collect you and escort you home to rest for the remainder of the day. As you have had sedation, you must not do the following for 24hours

- Drive a car
- Operate heavy machinery
- Sign any legal documents
- Drink alcohol
- Advised not to smoke.

Common complications

Almost all patients after the procedure have a degree of sore nose & throat, hoarse voice and cough. Some patients have sore neck or jaw. Occasionally patients may cough up a small amount of blood or have a fever in the first 24 hours (well treated with paracetamol). If bleeding is large or the fever persists, please seek medical review.

Complications from the anaesthetic include drowsiness, fatigue, dizziness, nausea/vomiting, sleep disturbance and altered mental state. You may also have bruising at the intravenous cannula site.

Other risks and complications

More than 5% risk:

- Low oxygen levels,
- Chest infection, such as pneumonia, requiring antibiotics
- collapsed lung (pneumothorax) if a lung biopsy is performed, and this may require a chest drain.

1 to 5% risk

- Heart problems, including abnormal heart rhythms, or rarely a heart attack, may occur in those patients with underlying heart disease.
- Bleeding, particularly after biopsies, which are more common if you are on any blood thinners
- Asthma-like reactions and wheeze
- A reaction to the anaesthetic agents

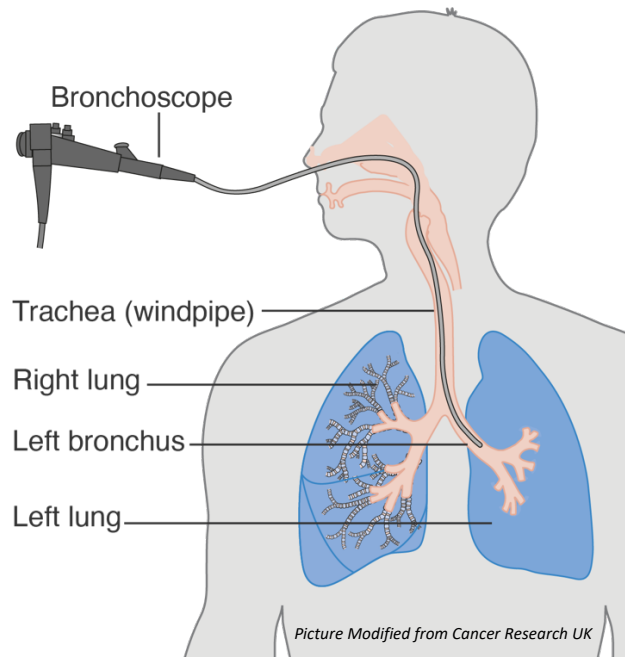
Less than 1% risk

- Narrowing of the vocal cords (Laryngospasm)
- Reaction to the anaesthetic
- Extremely rarely, serious bleeding or obstruction to breathing may occur and require urgent control measures, including full resuscitation, intubation and possible surgery. Death is **rarely** a complication of this procedure.

When do I find out the results?

You should make an appointment to see Dr Hamor one week after the procedure as most biopsy samples will have been reported by this time. Some tests for atypical infections (such as tuberculosis) take up to 6 to 12 weeks to be completed.

Be aware that sometimes, despite a bronchoscopy, no specific diagnosis is made, and further testing with another type of procedure may be necessary.



Where to Go:

The Department of Respiratory Medicine
Level 2, Campus Centre
Prince of Wales Hospital.

If arriving from the Barker St Carparks:

Walk to the Dickens Building Lifts
Go to Level 2, and walk 10m down the corridor.
The department is on your left.

If arriving from High St (Level 2)

Walk down the Level 2 corridor about 200m (nearly to the very end). The department is on your right.

What to Bring:

Medicare card
List of your usual medications
Any recent X-rays Scans

My Procedure
Proposed Date:
Arrival Time:
Specific Instructions: