

Patient information

Bronchoscopy

Critical Care Department – Royal Liverpool Hospital

A Bronchoscopy is a procedure that is both useful in diagnosing lung conditions and treating lung problems.

A Bronchoscope is a long flexible camera that can be used to look inside the lungs. It is beneficial as it can be used to take biopsies of lung tissue and samples of sputum (phlegm). It is also useful in helping to remove sputum from a patient's lungs.

Most patients on the Critical Care Unit (CCU) have a tube in their mouth (endotracheal tube) or throat (tracheostomy) that attaches them to the breathing machine (ventilator). It is through this tube that the bronchoscope will be passed into the bronchus (windpipes) of the lungs.

Before a bronchoscopy takes place, the doctors will have discussed the patient's condition and decided that a bronchoscopy is a necessary part of treatment. If awake and conscious the procedure will be explained to the patient.

The patient will be given sedative drugs to make them sleep and drugs to make their muscles relax so they will not feel any discomfort or pain during the procedure.

An CCU nurse and/or an ODP (Operating Department Practitioner) will assist the doctor. The Bronchoscopy will take place on the ITU so your relative will not have to be moved to a different area of the hospital. During the procedure the patient's condition will be monitored constantly. The actual bronchoscopy can take between half an hour to one hour.

The risks associated with a bronchoscopy are:

- Pneumothorax (lung collapse) due to high-pressure suctioning of phlegm.
- Low blood pressure due to sedative drugs.
- Bleeding (in the lung) – if biopsies taken.
- Patients who need high levels of oxygen and support from the ventilator may become unstable.

As always the patient's condition is monitored at all times and any of the above side effects will be noticed quickly and treated appropriately.

A chest X-ray is usually taken after the bronchoscopy.

Any samples that may have been taken will be sent to laboratory. However depending on what tests have been ordered it can be up to one week before the results are known. Sometimes we do receive an early test result for infections within a day so that we can alter antibiotic treatment. There is no alternative to this procedure but if you decide not to proceed there may be a delay in diagnosis and deterioration in lung function. If you have any further questions please do not hesitate to ask the nurse/doctor looking after your relative.

Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

Further Information:

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