**Bronchoscopy**

**What is bronchoscopy?**

Bronchoscopy is an examination of your windpipe and air passages by means of a flexible telescope. Like an endoscopy to look at the stomach, bronchoscopy is a test that your doctor will suggest when there is a need to have a look in the air passages, or take samples from the lung when testing for certain diseases.

Unlike x-rays which take "photographs" of the lung, bronchoscopy lets the doctor see inside the windpipes, an area not clearly shown on x-rays. Bronchoscopy can also help in making the diagnosis and in planning the right treatment for people with lung disease.

**When is bronchoscopy necessary?**

Your doctor will usually request a bronchoscopy when they suspect something is wrong with your airways or lungs. Persistent cough, the coughing of blood, or an abnormality on a chest x-ray are the most common reasons. The results will help your doctor determine what is wrong and how to help you in the most effective way.

**Preparation for your bronchoscopy**

You will be required to not eat or drink for **6 hours** before the bronchoscopy. If you normally take any tablets, discuss with your doctor before the test, what you can take and when to take them. Your doctor will advise you about when to fast, what to do with your medication and the place and time of your bronchoscopy. You may need to stop some tablets like aspirin or blood thinners (e.g. warfarin) but check with your doctor.
If you are a diabetic who takes insulin, special arrangements may need to be made.

It is wise to arrange for someone to accompany you home after the procedure because the sedation you may be given for the bronchoscopy could make it unsafe for you to drive or to travel alone on public transport. It is also advisable to arrange for someone to stay with you to keep an eye on you overnight. Please do not bring valuables or wear jewellery to the procedure as this can interfere with X-rays that may be needed.

What happens during your bronchoscopy?

Blood tests may also be taken before the bronchoscopy starts. Usually, the bronchoscopy is done with the help of some sedative drugs. The test usually takes about 20 minutes.

When you arrive for your test, you may be given local anaesthetic spray or gargle for your nose and throat. This numbs the nose and throat, reducing any discomfort during the bronchoscopy but often makes you cough a little to begin with. You may also be given a sedative injection, but will not be completely "sent to sleep" as you might for a major operation. You may also be given an injection which dries up the saliva in the mouth. Sometimes, instead of sedation you may be advised to have a full general anaesthetic.

The bronchoscope itself is a flexible tube with several channels. One sends light into the lung, another is connected to a camera to see inside the lung and there is a channel to put local anaesthetic into and for taking samples.

The tube is passed gently through a nostril or the mouth and guided into the windpipe at the back of the throat.

When taking samples, an X-ray machine is sometimes used to place the bronchoscope in the correct area of the lung. Sometimes, the doctor uses ultrasound to assist in the procedure.

Usually, salty water is washed into the airway and sucked back to retrieve germs or cells. A small brush like a bottle brush and needles or forceps may also be used to collect specimens of the lung or lymph glands in the chest. Sometimes, other more specialised tests are undertaken which will be explained by your doctor.

After your bronchoscopy

The numbness of the throat from the local anaesthetic usually takes 1-2 hours to wear off, during which time you should not have anything to eat or drink as it may go down the "wrong way". You will be kept under nursing supervision during this time. Sometimes, after special biopsies of the lung tissue, you may be advised to have an X-ray. If you are being tested for tuberculosis, you may be required to wear a mask or stay in the recovery room with a nurse after the procedure.

Because of the sedative you receive, you must check with your doctor about how long you should wait before driving, using machinery, using public transport, going back to work, signing legal documents etc.

A slight fever and cough is not uncommon for 1-2 days. If you get any more serious side-effects, please let your doctor know. If biopsies were taken during the procedure, it is common to experience a slight red colour to your sputum, however if, post procedure, you cough up blood and the amount is larger than a 20 cent coin, please let your doctor know.
It often takes a few days for all the specimens/samples to be checked in the laboratory so your doctor may not be able to give you an accurate diagnosis on the day of the bronchoscopy. Results of tests for tuberculosis can take up to 6 weeks or more.

This brochure is one in a series produced by Lung Foundation Australia to provide information on lung disease, its treatment and related issues. The information published by Lung Foundation Australia is designed to be used as a guide only, is not intended or implied to be a substitute for professional medical treatment and is presented for the sole purpose of disseminating information to reduce lung disease. Any information relating to medication brand names is correct at the time of printing. Lung Foundation Australia has no control or responsibility for the availability of medications, which may occasionally be discontinued or withdrawn. Please consult your family doctor or specialist respiratory physician if you have further questions relating to the information contained in this leaflet. For details of patient support groups in Australia please call 1800 654 301.