

Therapeutic Bronchoscopy PATIENT & CAREGIVER INFORMATION

Introduction

The lung can have airways blocked or have items in it that don't belong for many reasons. We have a wide variety of tools that we can use. These include balloons and stents to open up airways, lasers to cut away tissue, forceps and other instruments to remove tissue. Often we don't know which devices we will be using until we have started the procedure. Many of these devices require us to use a rigid bronchoscope.

Preparation for the Procedure

Our clinic staff will make all the hospital arrangements & call you with the details Be sure to ask any questions you have

Do not eat or drink anything after midnight the night before your procedure Arrange for a responsible adult to take you home & stay with you for the next 24 hours

The following medications are usually stopped before doing a bronchoscopy. Please let our staff know if you take any of these medications, so we can determine when they should be stopped before the procedure.

Aspirin or products containing it (e.g.Bufferin®,Anacin®)

NSAIDs, such as ibuprofen (Advil®) or naproxen (Aleve®)

Blood thinners such as Coumadin, Eliquis, Plavix, Pradaxa or Xarelto **Do not stop taking these medication without speaking to our staff first.

Day of the Procedure

Take any medicine you normally take with a small sip of water (except blood thinners)

Report to the hospital 1.5 – 2 hours prior to your scheduled time

You will be asked to change into a hospital gown & remove dentures, glasses, contacts, jewelry etc.

The total time in the procedure room will be 45 – 240 minutes depending upon the procedure

Explanation of Procedure

An IV (intravenous) line will be placed in a vein in your arm You will be given general anesthesia which will put you to sleep Then depending upon the procedure we will use our tools to improve your lungs Once the procedure is complete the breathing tube will be removed

You will then be brought to the Post Anesthesia Care Unit (PACU)



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After the Procedure

You will stay in the PACU until you are fully awake (approx. 2 hours)

During this time a nurse will check on you frequently

You may be given oxygen through small tubes (nasal canula) that will rest below your nose

You will not be able to eat or drink anything until the medicine used to numb wears off

Depending upon the procedure a chest x-ray may be done

Your IV line will be removed

Your nurse will give you discharge instructions.

You may have a sore throat for a day or two. Throat lozenges or ice chips may help ease the soreness

It is normal to have blood in the sputum you cough up for the first 24 hours, it should gradually decrease over this time period

It is normal to have a fever for 24 hours after the procedure, normally acetaminophen or ibuprofen will help to reduce the fever:

- o Tylenol (acetaminophen) 650 mg, every 4 hour ~or~
- o Advil (ibuprofen) 400mg every 6 hours

Results: Critical Care, Pulmonary & Sleep Assoc. will call you with the results within 1 week.

Call Your Doctor or Nurse if You Have:

Fever of 100.4° F (38.0° C) or greater which lasts for more than 1 day after the procedure or doesn't get better with a dose of ibuprofen or Tylenol Difficulty breathing or shortness of breath.

Chest pain or a feeling of pressure in your chest.

Cough up more than a teaspoon of blood. (It is normal to have a small amount of blood in the sputum you cough up.)

A rapid heartbeat

Call 911 immediately if you have new or increased chest pain

If you have any questions or concerns, please call our office at 303 951-0600, option 5.



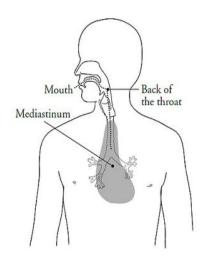






CRITICAL CARE, PULMONARY & SLEEP ASSOCIATES

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