



## CRITICAL CARE, PULMONARY & SLEEP ASSOCIATES

A PROFESSIONAL LLP

# Endobronchial Ultrasound (EBUS) PATIENT & CAREGIVER INFORMATION

### **Introduction**

The lung contains lots of lymph nodes like many places in our body. In the lung they are mostly located next to the airways. The endobronchial ultrasound (EBUS) procedure uses a flexible scope with a camera and a tiny ultrasound on the end to look inside the airway and visualize the lymph nodes and other structures next to the airways. Samples of lymph nodes and masses can be taken at this time under direct visualization with the ultrasound, where we watch the needle the entire time it is in the lymph node or mass. Taking biopsies with EBUS increases the likelihood of getting good tissue samples. These samples help your doctor make decisions on what type of treatment will be best for you.

### **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 EBUS  
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 - 120 minutes

### **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



## CRITICAL CARE, PULMONARY & SLEEP ASSOCIATES

A PROFESSIONAL LLP

A breathing tube will be placed into your mouth & past your throat  
A thin flexible scope (bronchoscope) will be put into your mouth and gently slid down the large airways  
Your doctor will use the ultrasound on the bronchoscope as a guide to take samples of tissue from nodes or masses  
Once the procedure is complete the breathing tube will be removed  
You will then be brought to the Post Anesthesia Care Unit (PACU)

### **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. of your Oncologist (if they asked for the procedure) 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

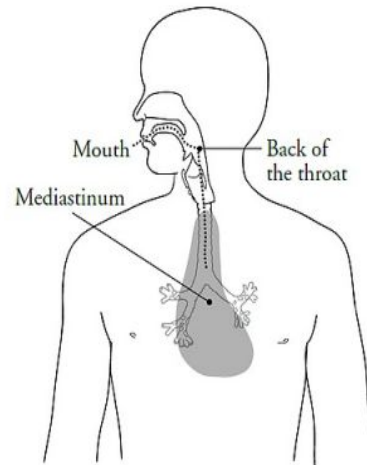
***Call 911 immediately if you have new or increased chest pain***

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



# CRITICAL CARE, PULMONARY & SLEEP ASSOCIATES

A PROFESSIONAL LLP



274 Union Blvd, Suite 110  
Lakewood, CO 80225  
303 951-0600