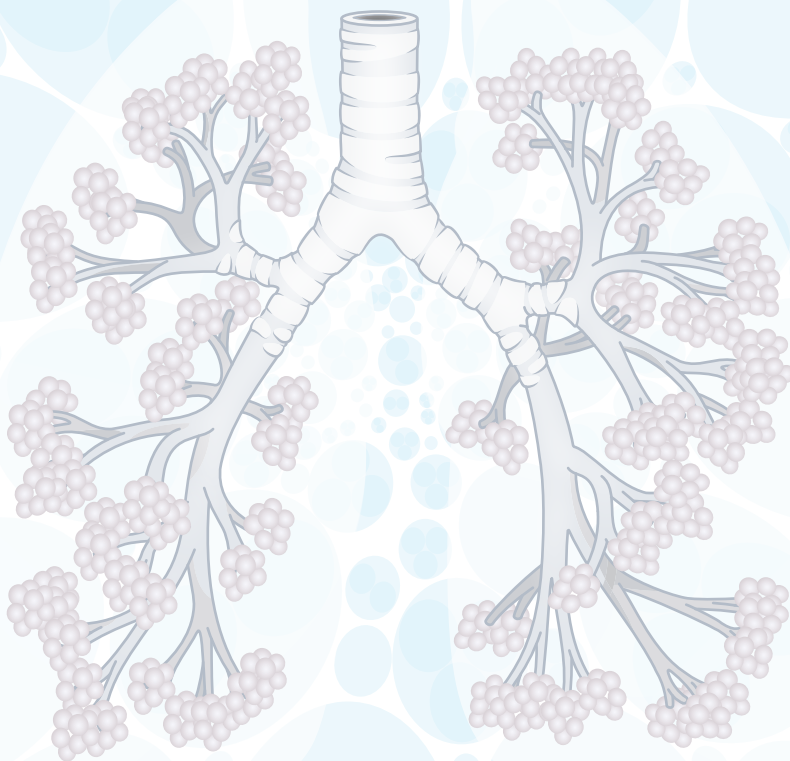


Preparing for your bronchoscopy

a patient friendly booklet for :



This booklet covers important information about your bronchoscopy. It describes how to prepare, what to expect on the day and how to care for yourself once you are back at home. Please review it carefully with your family. Speak to us if you have questions or concerns. We are here to help!

Acknowledgements

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We would like to thank the MUHC Patient Education Committee for their support in funding the production and publication of this document through the Patient Education Grant program.

Thanks to the team at the Patient Education Office for their support throughout the development of this booklet, the design and the layout, as well as for the creation of all the images.



IMPORTANT: PLEASE READ

Information provided by this booklet is for educational purposes. It is not intended to replace the advice or instruction of a professional healthcare practitioner, or to substitute medical care. Contact a qualified healthcare practitioner if you have any questions concerning your care.

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A special message for you and your family

Using our experience and what patients and families have told us, we have designed this booklet so that it is useful, practical and easy-to-read. It will cover important information about how to prepare for your bronchoscopy and care for yourself at home, after this procedure. We also highlight important supports and resources that are available to you.

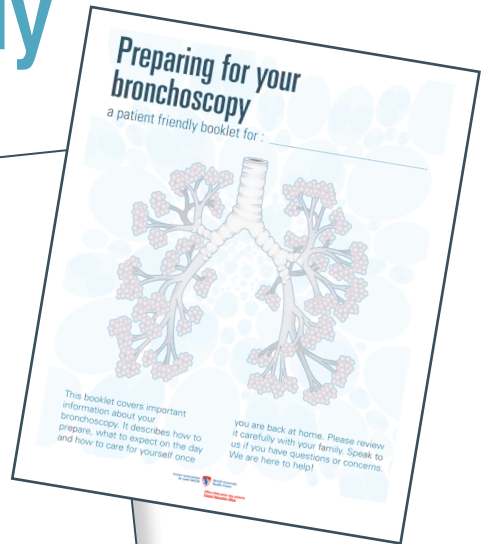
Please review this booklet carefully with your family and bring it with you on the day of your appointments.

Learning that you need to have a bronchoscopy can be stressful. The good news is that you are not alone! Our team of health care experts will care for you.

We want to be sure that you and your family receive the best care possible. Speak to us about your feelings, fears or worries. Knowing how you are doing will help us better meet your needs.

Our goal is that our team, along with this booklet, will guide and help you each step of the way.

-- Sincerely,
Your Bronchoscopy Team
McGill University Health Centre



Important general information

Your bronchoscopy appointment information

1 For your bronchoscopy:

Go to: Montreal Chest Institute (Day Hospital DRC.3314)

Date:

Time:

2 For your follow-up appointment:

- ☐ Montreal Chest Institute
- ☐ Montreal General Hospital
- ☐ Lachine Hospital
- ☐ Other

(If you are followed at another hospital, please ensure
you book a follow-up with your doctor within 2-3
weeks to review the results of your bronchoscopy)

Date:

Time:

Your doctor's name:

How to reach us

Our address:

Montreal Chest Institute
McGill University Health Centre (MUHC)
Glen site - 1001 Decarie Blvd
Montreal Quebec H4A 3J1

Our clinic location and room #:

Day Hospital & Out-patient clinics
Block D, Level RC, Room 3314 - DRC.3314

Our telephone #:

514-934-1934 ext: 32568
Monday to Friday from 8am to 5pm



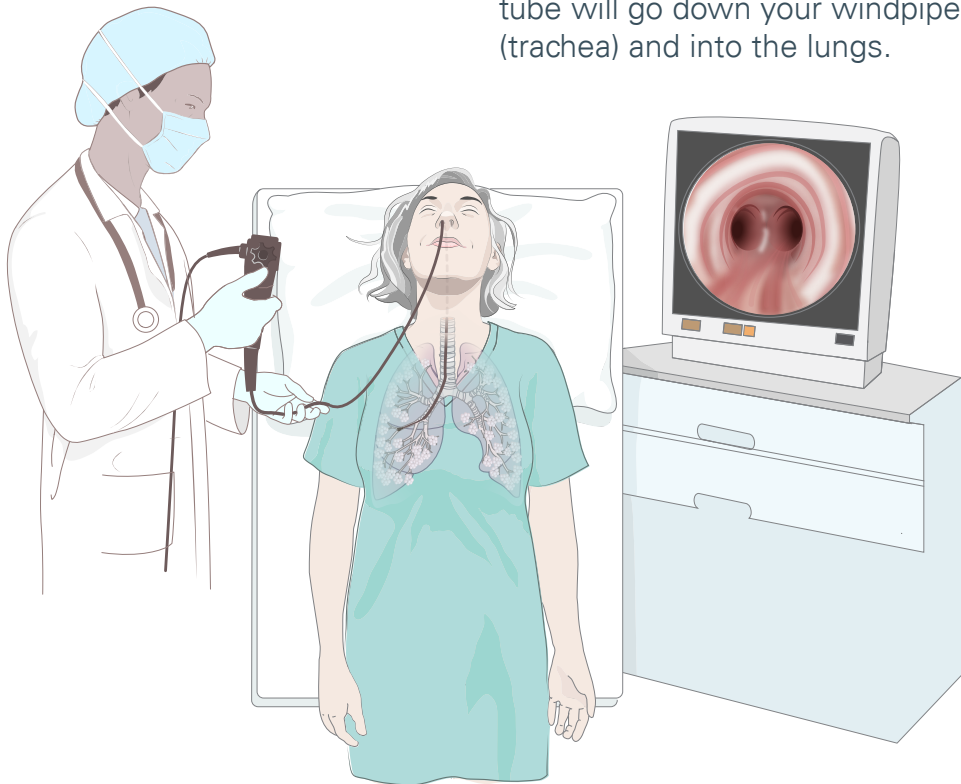
**Please see the back of this booklet
for the hospital map and directions.**

About your bronchoscopy

What is a bronchoscopy?

A bronchoscopy is a procedure that allows your doctor to look inside your lungs.

To do this, your doctor will pass a long, thin and flexible tube with a camera at its tip (bronchoscope) through your nose or mouth. This tube will go down your windpipe (trachea) and into the lungs.



During your procedure, you will receive a medication that will make you feel sleepy. You will also receive pain medication (to freeze or numb the area) so you are comfortable.

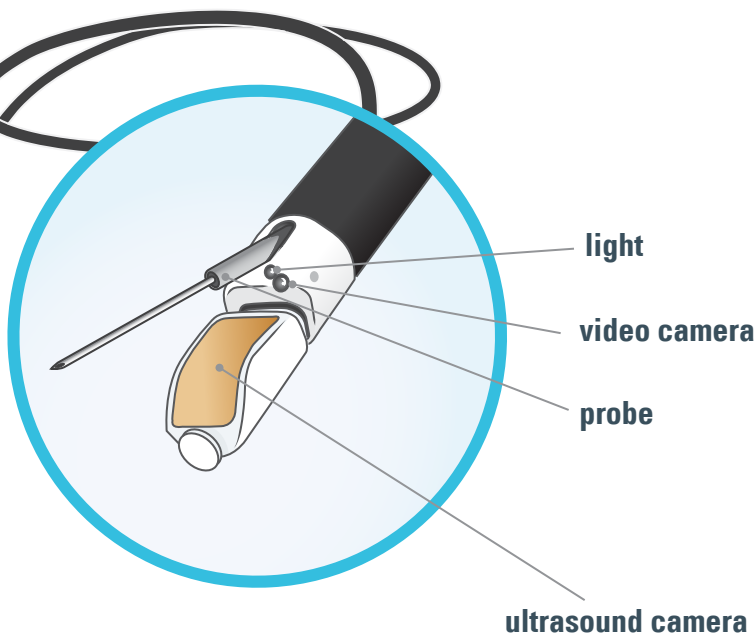
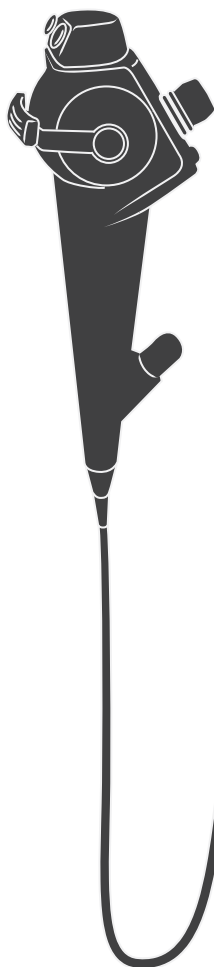
This procedure is usually done in our Day Hospital center. This means you will not have a hospital stay. Instead, you will have the procedure and then go home later that same day.



There is another type of bronchoscopy, called **endobronchial ultrasound** or **EBUS**. If you are scheduled to have an EBUS, we will use a special type of bronchoscope that has an ultrasound camera at the tip.

Using this, your doctor will be able to see through your airways (breathing tubes) and examine the surrounding structures, lymph nodes (lymph glands) in particular. He or she will use this to take samples.

The EBUS bronchoscope is slightly larger than a normal bronchoscope. For this reason, we will pass it through your mouth, instead of your nose.



Why do you need one?

There are a number of reasons why someone may need a bronchoscopy. This is usually used to confirm (diagnose) whether you have a health problem in your airways and lungs.

(Some lung infections, tumours or conditions can be difficult to confirm without this test.) Sometimes, this procedure is also used to treat a health problem.

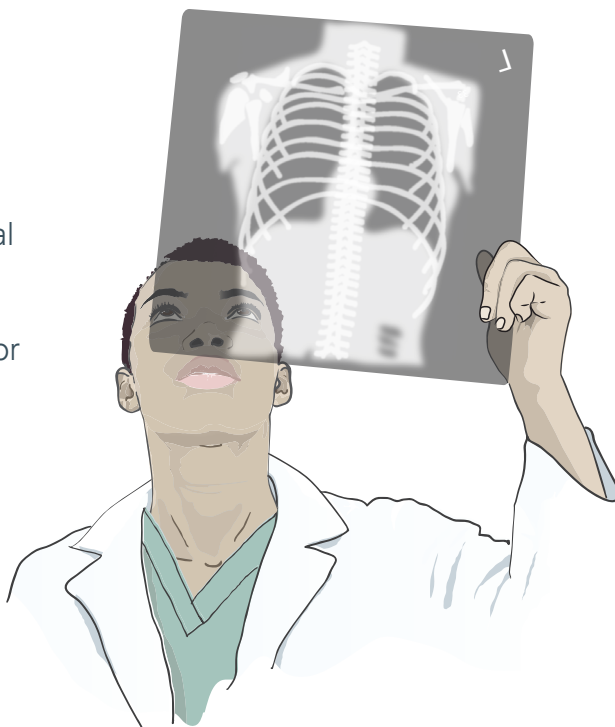


- We noticed something unusual on another test (e.g. a chest X-ray or CT scan) and would like to better see what this is or double-check.

Your doctor will explain what this procedure means for you.

You doctor may suggest you have a bronchoscopy if:

- You are coughing up blood.
- You have a persistent cough (which never seems to go away).



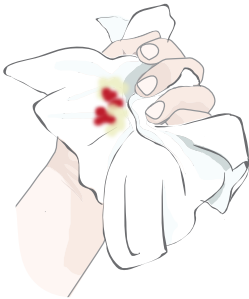
What are the risks?

In general, bronchoscopies are safe. However, as with any medical procedure, there are certain risks. In other words, there is a small chance

that you may have some problems after your bronchoscopy. Your doctor will talk to you about these risks, and what each of these means for you.

Less serious problems

After your procedure, you might notice any of the following:



Light bleeding

Sometimes, if we have taken a sample during your procedure, you may cough-up some bloody phlegm. This is normal.

A sore throat, fever and chills

This might appear about 6 to 12 hours after your procedure, and last a few hours. You should feel better by the next day.

Tips:

Take acetaminophen (Tylenol™).

DO NOT take Advil, Motrin or any other anti-inflammatories right after your bronchoscopy



Sleepiness

This is usually caused by the medications we gave you to fall asleep during the procedure. The effects usually wear off after a few hours.

More serious problems

While these problems can happen, they are not common.

Heavy bleeding

This can happen after we take a sample, however, it is unusual. To lower the chances of bleeding, we will review your medications and most likely ask you stop taking your blood thinning medications before the test.

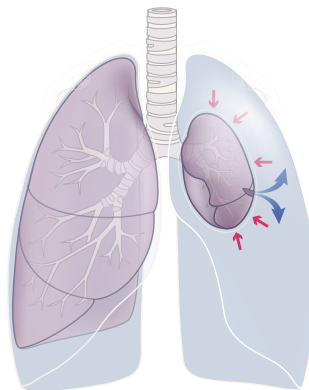


Chest infection (or pneumonia).

If you start to have a new, persistent fever, cough up yellow-green phlegm or feel stuffy in the few days after your procedure, speak to your doctor. This may be a sign of a chest infection. He or she may suggest you take medication (*antibiotics*).

Punctured and collapsed lung (or pneumothorax).

This can sometimes happen after a sample is taken. With this, you would feel chest pain and shortness of breath.



*Punctured and collapsed lung (or pneumothorax) is quite rare unless we have taken a special type of sample (known as a **transbronchial biopsy**). If we need to take this type of sample, your doctor will discuss this with you beforehand. He or she will explain what the risks are for you.*

Very serious problems

While these problems can happen, they are ***extremely rare***.

Death (extremely rare)

This may happen in 1 in 5,000 patients after a bronchoscopy. When this happens, the person has almost always been seriously ill in hospital beforehand.

Severe breathing or heart problems

These can also happen, but they are also very rare



Remember: There are risks with any medical procedure. Your doctor has suggested that you have a bronchoscopy because the benefits of having this procedure are far greater than any risk.

Medications to stop taking ahead of time

If you are taking medications that thin the blood, they must usually be stopped in advance, with the exception of aspirin (Asaphen, ASA) under some circumstances. However, you must discuss your blood thinning medications with your referring doctor. Here is a list of blood thinning medications and recommended steps.



Please inform the Day Hospital IMMEDIATELY (514-934-1934 extension 32568) if you are taking any of these medications. Do NOT stop any of these medications without first discussing with your doctor.

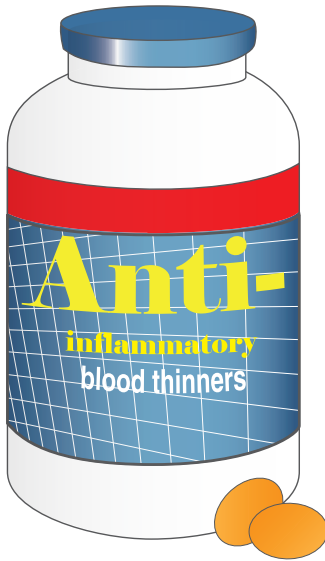
Blood thinners & when to stop taking them



Aspirin, Asaphen (EC ASA, ASA, acetylsalicylic acid)

If you are taking aspirin because of a stroke, cardiac condition (angina, heart attack, stent, arrhythmia, etc...), you may continue taking it prior to your procedure.

If you are taking aspirin for prevention only, or if you have been advised by your physician to stop ASA for the procedure, you should stop taking aspirin 5 days prior to your procedure.



Non-steroidal anti-inflammatory agents (Advil, Motrin, etc...)

Avoid regular NSAIDS during the 5 days prior to your procedure.

Low molecular weight heparin (Fragmin, Lovenox, Innohep)

The last dose should be taken 24 hours prior to your procedure, at half your usual daily dose. Talk to your doctor about this.

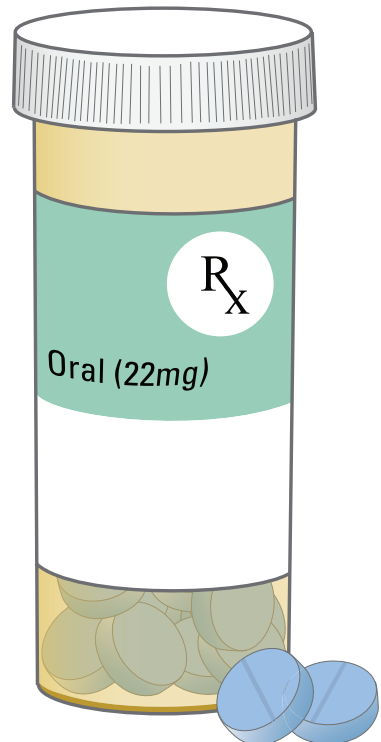
Coumadin (Warfarin)

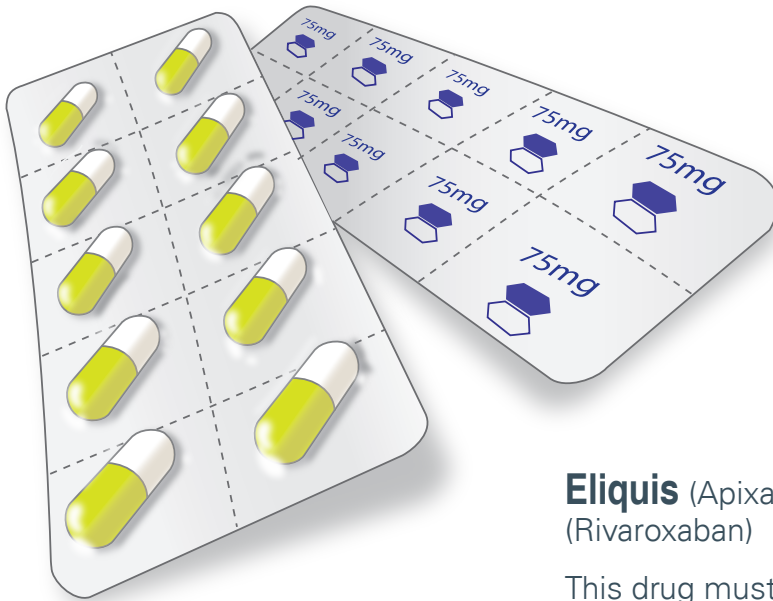
Must be stopped for 5 days prior to your procedure.

In some situations, you might need to receive an injection of heparin while off coumadin (e.g.: metallic heart valve, high risk of stroke, etc...). Talk to your doctor about this.

Pradaxa (Dabigatran)

This drug must be held for two days prior to procedure, unless you have a kidney problem, in which case it should be held for four days prior to the procedure. Talk to your doctor about this.





Eliquis (Apixaban) / **Xarelto**
(Rivaroxaban)

This drug must be held for two days prior to the procedure. Talk to your doctor about this.

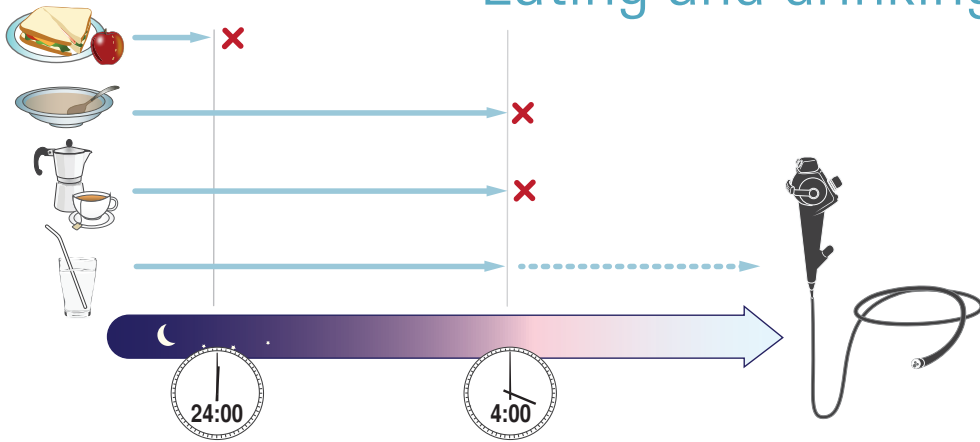
Plavix (Clopidogrel) / **Effient**
(Prasugrel) / **Brilinta** (ticagrelor)

Unless you are taking this drug because of a recent stroke or a cardiac condition (angina, heart attack, recent stent insertion), stop taking it 5 days prior to your procedure.

This drug needs to be stopped for 5 days prior to your procedure, but only after discussion with your doctor (cardiologist, neurologist, or other physician who prescribed it). Ask your doctor.

What will happen on the day?

Eating and drinking



You will need to be on a clear fluid diet as of the night before your procedure. ***This means that as of midnight, you may only drink***

water, tea, black coffee, or have clear broth soup, but as of 4 a.m., do not eat or drink anything except for a sip of water with your medications.

Medications

Take these medications

(with a sip of water) on the morning of your procedure:



- ☐ Heart medications (specify):
- ☐ Blood pressure medications (specify):
- ☐ Inhalers (specify):
- ☐ Other medications:
.....

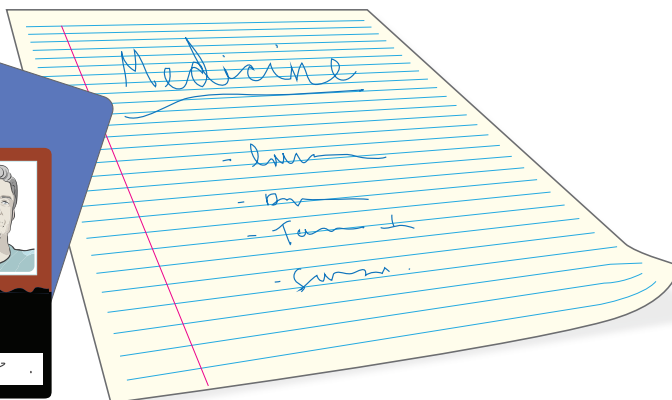
Do **NOT** take these medications:



- ☐ Insulin
- ☐ Diabetes (specify):
- ☐ Other medications:
.....
.....

Things to bring to the hospital

- ☐ An up-to-date list of all of your medications
- ☐ Your Medicare and MUHC hospital card (blue card)



Do not wear any jewelry, makeup or nail polish.

Getting to the hospital

- 1 Go to the hospital at the time that was given to you (see back page of this booklet for directions).
- 2 Once you are at the Day Hospital, go to the main desk (nursing station). Be prepared to show your MUHC hospital card (blue card).
- 3 Please tell us if you have any allergies or if you think you might be pregnant.



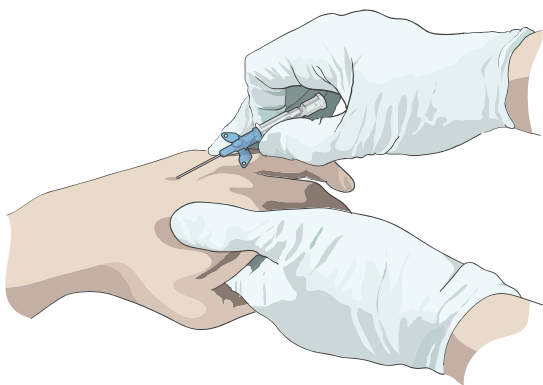
Arrange to come to the hospital with someone who will be able to drive you home. Please note that you **cannot** drive for at least 24 hours after your bronchoscopy.

What happens during the procedure?

When you arrive at the Day Hospital, you will meet with your doctor to go over the procedure. You will need to **sign a consent form** at this time. By signing this form, you are stating that you understand what was explained to you and agree to have the bronchoscopy procedure.



After this, the nurse will insert an intravenous access in one of the veins of your arm and we will take you to the bronchoscopy room. The bronchoscopy technician will **attach special wires to your chest and fingers**. These wires connect to computer monitors and will measure your heart rate, blood pressure, and the oxygen levels in your blood.



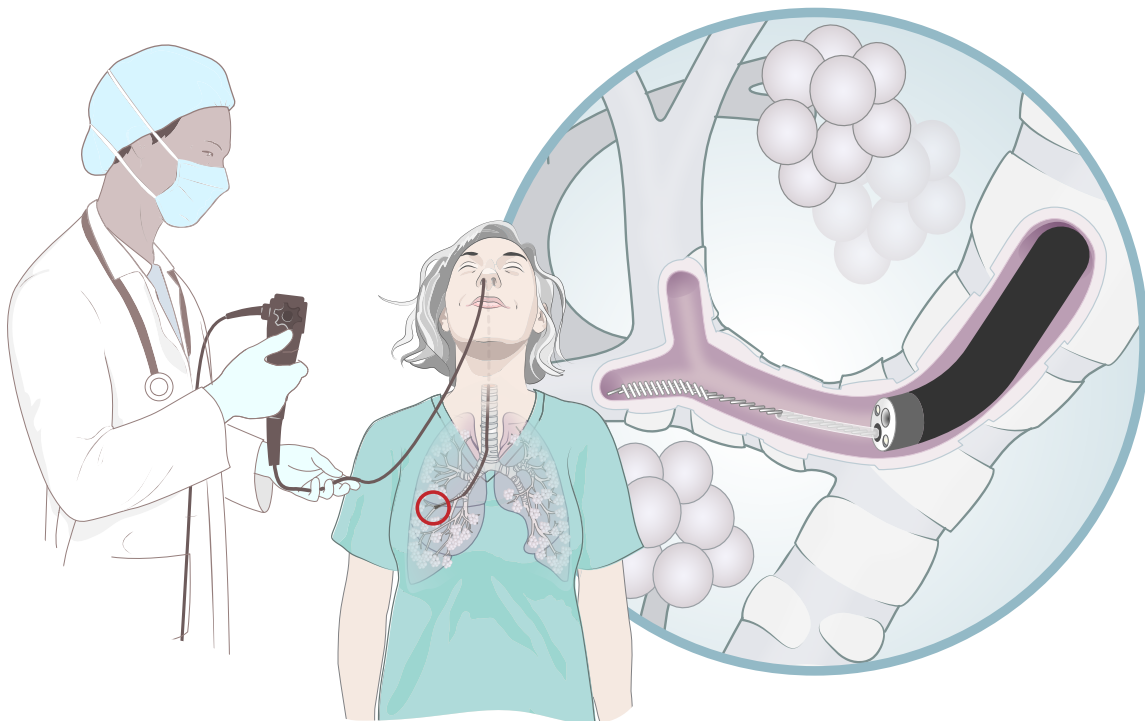
To make sure you are comfortable, we will then spray your mouth, throat and/or your nose with a **pain medication** to numb (or "freeze") them. You will also be given a medication to make you sleepy. Once you feel relaxed, we will pass the bronchoscope tube through your nose or mouth and into your lungs.

A regular bronchoscopy will take 5 to 20 minutes. An EBUS (ultrasound bronchoscopy) will take about 20 to 40 minutes.



What samples might be taken?

During your bronchoscopy, we will take a small piece of tissue or sample of cells from your lungs and/or airways. This sample will be sent to the hospital laboratory for testing.



When can I learn the results?

The results of your bronchoscopy will not be available right away. It may take several days for the laboratory team to study your samples. After your procedure, you will need to

see your doctors for a follow-up appointment within 2 to 3 weeks. During this appointment, you will receive your bronchoscopy results and learn what this means for you.

What will happen after my bronchoscopy?

At the hospital

You will stay in the day hospital for **2 hours** after your procedure. During this time, we will watch you closely to make sure you are recovering well. Right after the procedure, you will still likely feel sleepy (because of the medication). If we took samples from your lungs, you may cough up some bloody phlegm. This is normal.

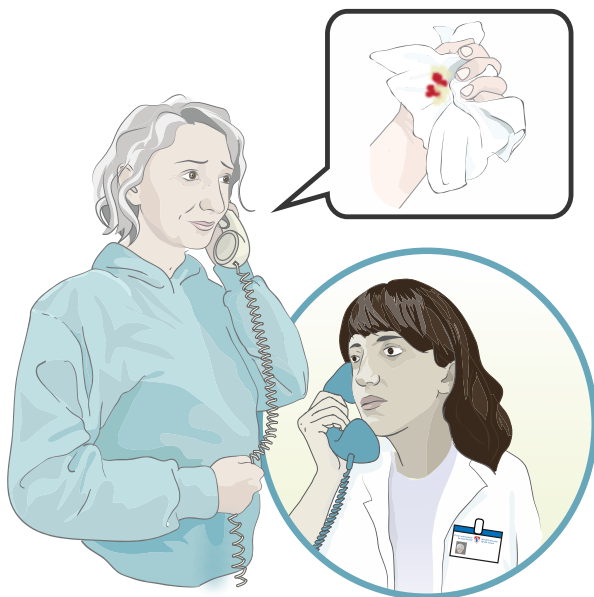
After 2 hours, if you feel well and we see that your throat is no longer frozen, we will ask you to drink some water. You will then be allowed to go home.

At home

After your bronchoscopy, you may continue to cough up some bloody phlegm at home. This is normal and should stop after a few days. If this continues after 2-3 days, speak to your doctor.

You can eat and drink normally at home. If you have mild pain, take acetaminophen (or Tylenol), as needed.

Before you leave, if you are followed at the MUHC, we will arrange your follow-up doctor's appointment so you will be able to learn about and discuss your bronchoscopy results. Otherwise, you will need to schedule a follow-up appointment with your doctor within 2 to 3 weeks.



What to avoid



For a safe and smooth recovery, we ask that, **for 24 hours** after your bronchoscopy:

Avoid driving or operating machinery

The (sedative) medication you received for your bronchoscopy can affect your reflexes as well as how you think and act. For this reason, you should not drive or operate any machinery.

Do not sign any binding contracts or agreements. Again for the same reason above, the (sedative) medication you received for your bronchoscopy can affect how you think and act.

Do not drink alcohol since the combination of alcohol and sedatives received earlier in the day can cause severe sleepiness and breathing problems.



Take rest. Avoid high-energy or demanding activities.

Do not go to work on the day of your bronchoscopy. If you live alone, ask a close friend or family member to stay with you until the next morning. You should be back to your usual self within a day.



How to reach us if you need help

If you have questions or concerns, call us!

Between 8AM and 5PM, you can reach the Day Hospital at:

514-934-1934, ext.: 32568

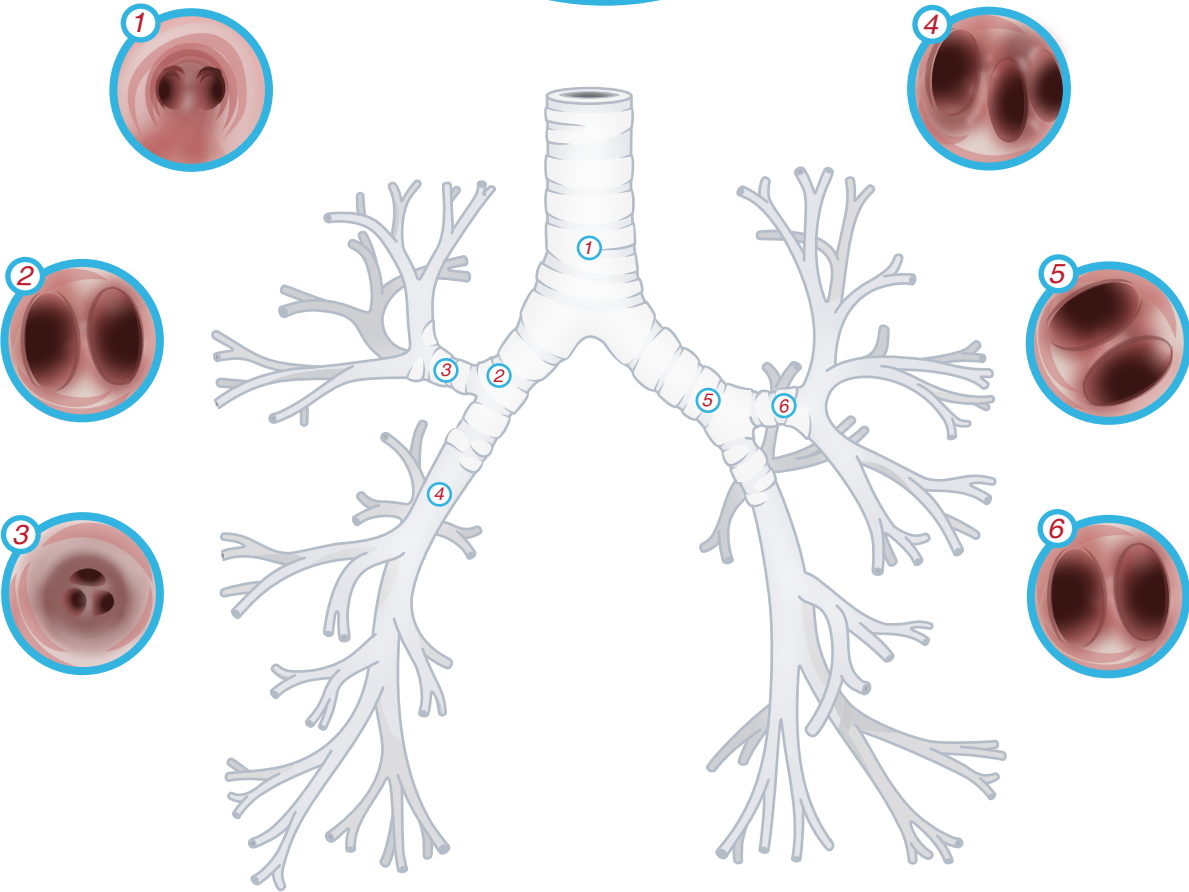
If the Day Hospital is closed (after 5pm on weekdays and earlier on some weekends), call the main hospital line (514-934-1934). Ask to speak to the doctor on-call for adult respiratory medicine at the Glen site.



Contact your doctor as soon as possible or go to the nearest emergency department if you:

- Have chest pain
- Cough up fresh blood (more than 2 tablespoons)
- Are having trouble breathing (and it is getting worse)

Reference



for information on **LUNG HEALTH**?



Search: **LUNG**

Visit the Patient Education Collection
muhcpatienteducation.ca



Centre universitaire
de santé McGill



McGill University
Health Centre

Office d'éducation des patients
Patient Education Office

Directions to our clinic



Glen site:
1001 Décarie Blvd.
Montreal, QC H4A 3J1

**Block D, Level RC,
Room 3314 - DRC.3314**