

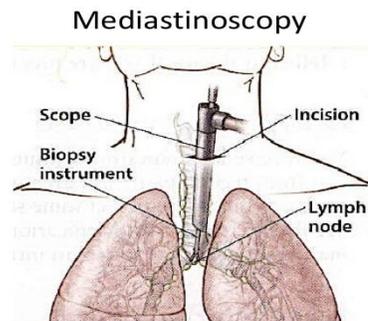
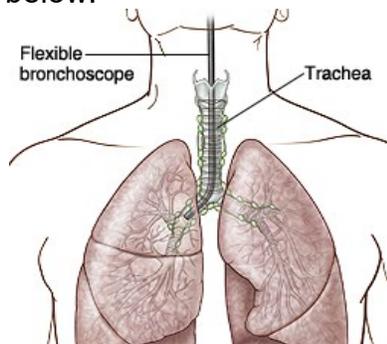


Having a Bronchoscopy and Mediastinoscopy Procedure

This handout offers information on how to prepare for your bronchoscopy and mediastinoscopy procedure. It is important for you and your family member/partner-in-care to read this handout.

What is a bronchoscopy and mediastinoscopy procedure?

A bronchoscopy is a procedure that uses a bronchoscope (a thin, flexible tube) with an ultrasound device. It is inserted through your mouth and down into your throat and trachea. This allows the surgeon to examine your airways – from your nose down into your lungs. A mediastinoscopy uses a mediastinoscope (a thin tube with a light and camera) to look at the mediastinum (the areas in your chest between your lungs). The mediastinoscope is inserted through a small incision in your neck. See the pictures below.



A bronchoscopy and mediastinoscopy procedure allows your surgeon to :

- Check for lung disease, infections, and cancer.
- Evaluate the size or spread of cancer.

You will be sedated (put to sleep) for this procedure. During this procedure, the surgeon removes a small amount of your tissue or lymph nodes (glands). The tissue is sent to a laboratory for testing. The tissue may be benign or malignant. Benign means it is not cancer. Malignant means it is cancer.

Your appointments

You will receive 2 appointments.

1. A preoperative appointment

This appointment is scheduled before your procedure appointment. You will receive more information about your procedure at this appointment. Your procedure is cancelled or delayed if you miss this appointment. A clerk from the Preoperative Department calls you with the date and time of this appointment.

Date of appointment: _____ Time of appointment: _____

Location: Day Surgery Department (2A) at Lakeridge Health Oshawa

You need to bring a list of the medications you take to this appointment. This includes all prescription, over the counter medications, vitamins, and herbal supplements.

2. Procedure appointment

A clerk from your surgeon's office calls you with the date and time of your procedure appointment.

Date of appointment: _____ Time of appointment: _____

Location: Day Surgery Department (2A) at Lakeridge Health Oshawa

Where to go for your preoperative and procedure appointments:

- Enter the north entrance of Lakeridge Health Oshawa (on Hospital Court). Walk past the Gift Shop and Food Court.
- Take the escalator or elevator up to the 2nd floor and turn right into the hallway.
- Go to the Day Surgery Registration Desk (2A) to register for your appointment.

Preparing for your procedure

- Plan to have an adult drive you home and stay with you for 24 hours after your procedure. Your procedure is cancelled if you do not plan for this.
- Do not drink alcohol for 24 hours before your procedure.
- Do not eat any food, drink any fluid that is not clear (examples: milk products, nutritional supplements, smoothies and fruit juice with pulp), chew gum, or candy after midnight the night before your procedure.
- If you take blood thinning medication, you need to stop taking it before this procedure.

The name of your blood thinning medication: _____

Stop it: _____ days before your procedure.

Restart it: _____ days after your procedure.

On the day of your procedure

- You may drink clear fluids up to 3 hours before your procedure. This includes water, black coffee or tea (you may add sugar or sweetener but no milk or cream), sports drinks (no red or purple), carbonated drinks, pulp free fruit juices (no orange juice). Drinking clear fluids before your procedure helps you stay hydrated, improve your blood pressure and decrease any nausea, vomiting, or anxiety after your procedure.
- Stop drinking fluids 3 hours before the scheduled time of your procedure.
- Take your regular medications (unless the doctor or nurse tells you something different) no later than 3 hours before your procedure.
- Bring your health card and any medications you need to take while you are at the hospital.

During your procedure

- This is a day surgery procedure done in the operating room. You are in the hospital for about 3 hours for this procedure.
- You are asked to lay on a stretcher.
- An intravenous (IV) line is inserted into 1 of your veins. Medications to help you relax and put you to sleep are given to you through the IV.

After your procedure

- You stay in the recovery room until you are ready to go home.
- An adult must drive you home and stay with you for 24 hours after your procedure.
- You may have a sore throat, dry cough and hoarseness of your voice for 1 to 2 days.
- You may cough up a small amount of blood. This is normal.
- Do not drive a motor vehicle or operate any heavy machinery for 24 hours.
- Do not make any legal or financial decisions for 24 hours.
- Do not drink alcohol or take any medication or substance that makes you drowsy for 24 hours.

The nurse caring for you will tell you when you can safely restart drinking fluids and eating food.

Managing your care at home

Activity

- Rest for the remainder of the day. You may feel tired, sleepy, and have difficulty concentrating.
- Gradually increase your activity. Rest when you feel tired.
- Your surgeon will tell you when you can return to work.

Managing pain or discomfort

- Take an over the counter pain medication (example: Tylenol/acetaminophen) if you have any pain or discomfort.
- Suck on a throat lozenge (example: cough candy) if you have a sore throat.

Caring for your incision

- Your incision takes 7 to 10 days to heal.
- Remove the dressing covering your incision the day after your procedure.
- Small white strips of tape (example: Steri-strips™) cover your incision. A small amount of pale yellow/pink discharge from the incision area that dries on the Steri-strips™ is normal.

- Remove the Steri-strips™ 7 to 10 days after your procedure. They may fall off on their own before this. This is normal.
- Keep your incision clean.
- You may have bruising and mild swelling around the incision. This is normal.
- Your incision will have dissolvable sutures. If you notice any suture threads, do not remove them. The surgeon may remove these at your follow-up appointment.
- Do not put lotions or creams on your incision until it is completely healed.

Having a shower or bath

- You may shower or have a bath the day after your procedure. Wash the area around the incision gently. Do not remove the Steri-strips™. Pat your incision dry with a clean towel. Do not rub it.

Call the nurse navigator at your thoracic surgeon's office if:

- You have shortness of breath that is new or increasing.
- You have new or increasing difficulty taking a deep breath.
- You have any new sharp pain in your chest, stomach area or throat.
- You cough up a large amount of blood (more than 1 to 2 tablespoons).
- Your heart is beating faster than normal and you feel dizzy.
- You have a fever above 38.3°C/100.9°F at any time or above 38.0°C/100.4°F for more than an hour.
- You have new, or worsening redness, tenderness, or swelling at or near your incision.
- You see yellow/green fluid or bright red blood leaking from your incision.
- You notice a bad smell from your incision.

Call the nurse navigator at your thoracic surgeon's office Monday to Friday from 8 am to 4 pm – except on holidays. Call 911 or go to the Emergency Department at the hospital closest to you if you are not able to talk to the nurse navigator.

- Dr. Browne at 905-576-8711 or 1-866-338-1778 at extension 32383.
- Dr. Dickie at 905-576-8711 or 1-866-338-1778 at extension 36357.
- Dr. Sisson at 905-576-8711 or 1-866-338-1778 at extension 36342.
- Dr. Trainor at 905-576-8711 or 1-866-338-1778 at extension 34481.

Your follow-up appointment

Your follow-up appointment is scheduled for 1 to 2 weeks after your procedure. Call your surgeon's office to schedule a follow up appointment if you did not receive it before leaving the hospital. Make this call the day after your procedure. The surgeon explains your test results and a plan for the next steps in your care at this appointment.

Talk to a member of your healthcare team if you have questions or concerns about any of the information in this handout.

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