

Endobronchial Ultrasound (EBUS)

An endobronchial ultrasound (EBUS) is used to:

- Diagnose and stage lung cancer
- Detect infections
- Identify other diseases of the lung
- Find other large lymph node diseases in the chest
- Remove tissue and fluid samples from the lungs and surrounding lymph nodes

The procedure uses a special device called a bronchoscope. It is fitted with an ultrasound probe at the tip. The device allows your doctor to see the inside of your lungs and airways.

It is passed through your mouth and down your trachea. A fine-gauge aspiration needle is used to take tissue and fluid samples from your lungs and surrounding areas. This procedure is less invasive than traditional surgeries. No incision is needed.

Preparation

Date of procedure: _____

- Tell your doctor all the medicines you are taking, including any prescribed or over-the-counter medicine or herbal supplements. If you are taking blood thinning medicine, you may need to stop taking them 5 to 7 days before your procedure. Your doctor will tell you how to take your medicines.
- You will have an appointment with the anesthesia team before your procedure. You will receive information about your sedation medicines. The medicines will help you relax and comfortable during the procedure.
- You will have an opportunity to ask questions before the procedure.
- You will review and sign a consent form. This form gives your doctor permission to perform the EBUS and biopsy.
- **Do not** eat or drink anything after midnight the night before the procedure.
- **Do not** smoke before the procedure. Smoking will increase throat irritation and will make the procedure difficult.
- You must have a responsible adult go with you to the procedure and drive you home.

Procedure

- You will change into a hospital gown.
- Remove your dentures if you wear them.
- The nurse will connect you to a monitor that will check your vital signs.

- An intravenous (IV) line is started in your hand or arm. Medicine is given by IV to help you relax and be comfortable during the procedure.
- The endoscope is inserted through your mouth and down your trachea. The EBUS allows doctors to see airways, blood vessels, lungs and lymph nodes.
- Tissue samples and fluid are taken.
- The samples will be sent to the lab for analysis.
- The bronchoscope is then removed.

After the Procedure

- **Do not** eat or drink anything for 2 hours after the procedure. Your throat will still be numb from the medicine. This can cause you to choke.
- **Do not** drive or operate heavy machinery until the next day.
- **Do not** smoke for at least 2 hours after the procedure. Smoking increases the amount of throat irritation.
- Mild soreness and hoarseness in your throat is normal.

Discharge Instructions



- Tell your doctor if you have chest pain or breathing difficulty.
- Tell your doctor if you have a temperature greater than 101°F (38.3°C).
- You may see small specks of blood in your mouth or sputum (saliva or mucus coughed up from your lungs) after the procedure. Although this is normal, tell your doctor or nurse **immediately** if the amount of blood increases.
- You may go back to your normal activities the day after the procedure.
- Allow 48 to 72 hours for your lab results to be processed. The results of other testing, such as bacteria, fungus, virus or atypical bacterial, will be available within 1 to 8 weeks. Unless otherwise arranged, your primary oncologist will contact you to discuss the results.
- If you take blood thinning medicine, your doctor will tell you when you may resume taking your medicine.