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 disease-causing large lymph nodes 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 doctors to see the inside of your lungs and airways. It is passed through your mouth and down the 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 compared to traditional surgeries. No incision is needed.

Preparation

Date of procedure: _________________________
- Let your doctor know 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. Talk to your doctor about how to take your medicines.
- You will have an appointment with the Anesthesia Assessment Center before your procedure. You will receive information about your sedative medicines. The medicines will help you relax and comfortable during the procedure.
- You will have an opportunity to ask questions if you have any.
- You will sign a consent form. This gives the doctor permission to perform the EBUS and biopsy.
- **Do not** eat or drink anything after midnight the night before the procedure.
- You must have a responsible adult drive you home after the procedure.
- **Do not** smoke before the procedure. Smoking will increase the amount of throat irritation.

Procedure

- You will change into a hospital gown.
- Remove your dentures if you wear them.
- The nurse will connect you to a monitor to check your vital signs.
- An intravenous (IV) line is started your hand or arm. Medicine is given by IV to help you relax and comfortable during the procedure.
- The endoscope is inserted through your mouth and down the trachea.
- EBUS allows doctors to see airways, blood vessels, lungs and lymph nodes.
• Tissue samples and fluid are taken.
• It is sent to the lab for analysis.
• The bronchoscope is then removed.

After the Procedure

• **Do not** eat or drink anything for two hours after the procedure. Your throat is still numbed 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 two 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 the 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 next 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 one to eight weeks. Unless otherwise arranged, your primary oncologist will contact you to discuss the results.
• If you take blood-thinning medicine, your doctor will discuss with you when you may resume taking your medicine.
• **Do not** hesitate to go to the nearest emergency room, or call 911, if you feel you need to be checked by a health professional **immediately**.