



GIG  
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WALES

Bwrdd Iechyd Prifysgol  
Aneurin Bevan  
University Health Board

## Patient Information

### Thoracoscopy

### Respiratory Medicine

Date of the test:- .....

Admission location ward:- .....

Approximate time of procedure:- .....

#### **What is a Thoracoscopy?**

A thoracoscopy is a procedure carried out to visualise the space between the lungs and the chest wall. It involves putting a small telescope between two ribs into the chest through a little hole (1-2 cm large).

#### **Why have I been advised to have this test?**

Your doctor has advised you to have this test for one of the following two reasons:-

1. to help find out why you have developed fluid around the lung or thickening of the pleura and to take pleural biopsies.
2. to remove the fluid that has collected around your lungs and try to prevent this from happening again.

Biopsies of the lining of your chest wall may need to be taken during the procedure. In order to prevent any fluid from collecting around your lungs again, sterile talc powder may need to be put into the chest during the procedure.

#### **Where will the test be done?**

The test will be done in the Royal Gwent Hospital – Endoscopy Unit. You may be asked to attend ward C6 East on the day of the test (sometimes the day before). In preparation you will have a small cannula placed in a hand vein, a blood test will be performed and one of the nurses or a doctor will give you a routine examination.

You may have another ultrasound scan of your chest, this is to check the amount of pleural fluid before the procedure. You will need an overnight bag since you will have to stay in after the test.

Most patients are ready to go home the day after the procedure but sometimes admission is required for 2-3 days.

### **What will happen before the procedure?**

Please **do not eat or drink anything for the 4 hours** before the test. Your usual medication can be taken with a small amount of water. Please tell the nurse if you are diabetic or taking a blood thinning treatment with Warfarin.

You may be given an antibiotic before the test (this is a routine/prophylactic procedure). You may also be given painkillers in form of tablets before the test.

You will not need a general anaesthetic but you will be given medicine to make you feel relaxed or even sleepy before and during the test. This is called sedation.

Before the procedure the nurse may need to shave your armpit and side of the chest wall on the side where the procedure will be performed.

### **What happens during the procedure?**

The Thoracoscopy takes between 40 and 60 minutes. You will be asked to lie on your unaffected side. An oxygen mask will be put on your face and the oxygen level will be monitored through a probe placed on one of your fingers. Your blood pressure will be measured with a cuff around your arm.

You will be given medication to help you relax and to deal with any pain during the procedure. The doctor will numb down the area on the side of your chest and then place a tube between two ribs in your chest. You will feel a pushing or pressure on your chest which will not last long.

During the test biopsies will be taken and in some cases sterile talc will be instilled through the tube in order to prevent any pleural fluid from coming back. A chest drain will be left in place and secured with a stitch. The drain is attached to a bottle to drain fluid and air until the following day. Sometimes the drain needs to stay in place for a few days.

## **What happens after the procedure?**

You will be taken to the recovery area on the endoscopy unit and then to the respiratory ward for observation. One hour after the procedure you can have a drink and food if you are not sleepy and you feel like having food or drink.

## **Dealing with pain:-**

You may have some pain after the local anaesthetic wears off – please tell the nurse if you are in pain and you will be given pain killers. The nursing staff will review you after the procedure at regular intervals to measure your pulse, blood pressure and oxygen level. They will also ask you if you are in pain.

## **Chest drain:-**

You will have a chest drain coming out of your chest after the thoracoscopy – this will drain any fluid and air and most often there will be some blood coming through the drain. This is expected after the procedure and biopsies. The nursing staff will monitor the amount of fluid drained from the chest drain.

If you had talc put around your lung during the procedure you may experience a rise in temperature – this is expected and will settle soon.

Please do not leave the ward while you have the chest drain in place and do not lift the bottle attached to the drain at any time above the level of your hip – when you are in bed the bottle stays on the floor/by the bed.

## **When can I go home and how soon will I get the results of any biopsies?**

Most people go home the day after the procedure but in some cases a few days hospital stay may be needed. The district nurse or practice nurse will remove a stitch left in place once the chest drain has been removed. This will happen after 5-7 days. You will have an appointment with the chest clinic about one week after the procedure when the doctor will discuss the results of your biopsies with you and will answer any questions you may have.

## **Are there any complications due to thoracoscopy?**

The problems that may happen with thoracoscopy are usually very mild. Like any procedure, there is a risk of bleeding, infection or pain. These usually settle soon after the procedure.

There is a small risk of the lung to be punctured and if this happens, the air or fluid takes longer to drain. This would mean you may have to stay a few more days in hospital. The risk to life is extremely small from the procedure (less than 1000 to 1) and the risk of a serious bleed is very small as well. If a heavy bleed occurs during or after the procedure this will be dealt with as necessary but most often the bleeding stops on its own. Rarely blood transfusion is necessary. If talc is put around the lung during the procedure you may experience shortness of breath or pain – usually these settle quickly.

Infection at the wound or inside the chest is rare (risk of less than 100 to 1) and it is dealt with as needed – usually there is some redness and discomfort at the wound where the stitch is left after the chest drain was removed.

### **What can I do when I get home?**

You should avoid heavy straining or lifting for about a week after the procedure. If you have any concerns about your breathing or chest pain after the procedure, contact the ward C6E in the Royal Gwent Hospital or the Accident and Emergency Department.

### **Contact numbers:**

Ward C6E Royal Gwent Hospital  
Tel. No:- 01633 - 234118 or 4119

Artemio Gonzales Respiratory Advance Nurse Practitioner  
Tel. No:- 01633 234234 & ask for Respiratory ANP to be paged

Lung Cancer Clinical Nurse Specialists (Monday – Friday 10-3 only)  
Tel. No:- 01633 - 656149

Dr Ionescu Secretary  
01633 656011

### **Reference:**

1. C. Boutin et al. Thoracoscopy - Springer Verlag (ed) 1991
2. D.R. Buchanan and E. Neville. Thoracoscopy for physicians. Arnold (ed) 2004.

**“This document is available in Welsh /  
Mae'r ddogfen hon ar gael yn Gymraeg”.**