

22 Flexible Bronchoscopy and the Respiratory Therapist

FLEXIBLE BRONCHOSCOPY

1. List five clinical situations where flexible bronchoscopy (FB) would be indicated.

- A. _____
- B. _____
- C. _____
- D. _____
- E. _____

2. List three absolute and relative contraindications for FB.
Absolute contraindications

- A. _____
- B. _____
- C. _____

Relative contraindications

- A. _____
- B. _____
- C. _____

3. What is the goal of sedation during FB?

4. Describe the Mallampati classification.

5. List three vital sign measurements the respiratory therapist should monitor while a patient is sedated for an FB. What else should be monitored?

- A. _____
- B. _____
- C. _____

DIAGNOSTIC BRONCHOSCOPY

6. What is a BAL and when is it indicated?

- A. BAL: _____
- B. Indication: _____

7. What is the difference between a BAL and bronchial washings?

THERAPEUTIC BRONCHOSCOPY

8. When is rigid bronchoscopy (RB) indicated?

THERMAL ABLATION OF THE ENDOBRONCHIAL LESION

9. Describe the following thermal ablation technique.

- A. Electrocautery:
- B. Argon plasma coagulation:
- C. Laser photocoagulation:

10. What are the above techniques used for?

11. What should a respiratory therapist consider regarding oxygen delivery during thermal ablation?

12. What are endobronchial stents used for?

13. Describe the two different types of endobronchial stents.

A. _____

B. _____

14. List two indications for a self-expanding metallic stent.

A. _____

B. _____

EMERGING BRONCHOSCOPIC INTERVENTIONS

15. What patient population may benefit from bronchial thermoplasty (BT)?

CASE STUDY

You are the respiratory therapist (RT) in the intensive care unit (ICU) of a large urban trauma center. You are about to assist the physician with an FB procedure on an intubated patient who is receiving mechanical ventilation.

16. What preprocedure responsibilities is the RT accountable for to ensure patient safety?

17. What vital signs would you be evaluating during the procedure? Is there anything else the respiratory therapist may assist with during the procedure?

18. What serious complications are possible following this type of procedure?

WHAT DOES THE NBRC SAY?

Circle the best answer.

19. You are preparing a patient for her flexible bronchoscopy procedure. Her weight is 50 kg. What is the total dose of lidocaine should not be exceeded to help avoid methemoglobinemia?

- A. 300 mg
- B. 350 mg
- C. 400 mg
- D. 450 mg

20. What effects could be seen during a flexible bronchoscopy procedure on an intubated patient receiving mechanical ventilation?

- A. High peak inspiratory pressures
- B. Increase in tidal volume delivery
- C. Acute hypocapnia
- D. High minute ventilation alarm

21. You are assisting a physician during a fiberoptic bronchoscopy when she asks you what is the primary threat to adequate minute ventilation for the patient during the procedure. Which of the following would best answer her question?

- A. Apnea following medication delivery
- B. Elevated airway pressures
- C. Airway obstruction
- D. Secretions

FOOD FOR THOUGHT

As the field of respiratory therapy advances, the RT will be called on to assist in more complex respiratory procedures. Many procedures directly affect the respiratory system and should be within our area of expertise. This means you need to be constantly studying and always willing to learn new and exciting things. Remember, you need to be the lung expert!