

## Diagnostic Direct Laryngoscopy, Bronchoscopy & Esophagoscopy

**Direct Laryngoscopy:** Examination of the voice box or larynx (pronounced "lair-inks") under general anesthesia. An instrument called a laryngoscope is carefully placed into the mouth and used to visualize the larynx and surrounding structures.

**Bronchoscopy:** Examination of the windpipe below the voice box in the neck and chest under general anesthesia. A long narrow telescope is passed through the larynx and used to carefully inspect the structures of the trachea and bronchi.

**Esophagoscopy:** Examination of the swallowing pipe in the neck and chest under general anesthesia. An instrument called an esophagoscope is passed into the esophagus (just behind the larynx and trachea) and used to visualize the mucus membranes and surrounding structures of the esophagus. Frequently a small biopsy is taken to evaluate for signs of esophageal inflammation (esophagitis).

**What to Expect:** Diagnostic airway endoscopy procedures generally take about 45 minutes to complete. Usually the procedure is well-tolerated and the child is back-to-normal the next day. Mild throat or tongue discomfort may persist for a few days after the procedure and is usually well-controlled with over-the-counter acetaminophen (Tylenol) or ibuprofen (Motrin).

**Warning Signs:** Contact the office immediately at (603) 650-4399 if any of the following develop:

- Worsening harsh, high-pitched noisy-breathing (stridor)
- Labored breathing with chest retractions or flaring of the nostrils
- Bluish discoloration of the lips or fingernails (cyanosis)
- Persistent fever above 102°F that does not respond to Tylenol or Motrin
- Excessive coughing or respiratory distress during feeding
- Coughing or throwing up bright red blood
- Excessive drowsiness or unresponsiveness

**Diet:** Resume baseline diet (no special postoperative diet restrictions).

**Activity:** Resume baseline level of activity as soon as child feels up to it.

**Contact Information:** The Otolaryngology nurse can be reached at (603) 650-4399 and can answer any additional concerns or questions you may have in the post-operative period. The Dartmouth-Hitchcock Medical Center operator can be reached at (603) 650-5000.

In addition, the following web page has helpful information regarding common pediatric ear, nose, and throat concerns: <http://www.entnet.org/kidsent>.

**Follow-up:** You already have an appointment scheduled a few weeks after surgery to return to Otolaryngology clinic for your first post-operative visit. If you need to confirm the appointment, please contact my secretary at (603) 650-8123.