



CARE INSTRUCTIONS

KAISER PERMANENTE

Direct Rigid Laryngoscopy: Before Your Procedure

What is direct rigid laryngoscopy?

Direct rigid laryngoscopy (say "lair-en-GOS-kuh-pee") is a procedure that lets your doctor look at your throat and voice box (larynx). The doctor uses a tube, called a scope, to look deep into your throat. The doctor may use the procedure to take a tissue sample (biopsy), remove growths from the vocal cords, or do other kinds of surgery or laser treatment in the throat. The procedure can also be used to remove an object that is stuck in your throat.

You will be asleep during the procedure. The doctor will put the scope in your mouth and guide it into the back of your throat.

This procedure takes 10 to 90 minutes, depending on the reason for the procedure. You probably will be able to go home the same day as the procedure. But if you have surgery on your vocal cords, you may need to stay overnight in the hospital. Most people are able to return to work or their usual activities within a week.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

What happens before the procedure?

Having a procedure can be stressful. This information will help you understand what you can expect and how to safely prepare for your procedure.

Preparing for the procedure

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- Bring a list of questions to ask your doctors. It is important that you understand exactly what procedure is planned, the risks, benefits, and other options before your procedure.
- Tell your doctors ALL the medicines, vitamins, supplements, or herbal remedies you are taking. Keep a list of these with you, and bring this with you to every appointment. You will be told which medicine to take or to stop before your procedure.
- Some medicines, such as aspirin or ibuprofen (Advil, Motrin), and certain vitamins and herbal remedies can increase the risk of bleeding or interact with anesthesia. You may be asked to stop these before the procedure.
- Before your procedure, you may speak with an anesthesia provider to discuss your anesthetic options, including the risks, benefits, and alternatives to each. This may be on the phone or in person.

Taking care of yourself before the procedure

- Build healthy habits into your life. Changes are best made several weeks before the procedure, since your body may react to sudden changes in your habits.
 - Stay as active as you can.
 - Eat a healthy diet.
 - Cut back or quit alcohol and tobacco.
- If you have an advance directive—which may include a living will and a durable power of attorney for health care—let your doctor know. If you do not have one, you may want to prepare one so your doctor and loved ones know your health care wishes. Doctors recommend that everyone prepare these papers before a procedure, regardless of the type of procedure or condition.

What happens on the day of the procedure?

- Follow the instructions exactly about when to stop eating and drinking, or your procedure may be canceled. If your doctor has instructed you to take your medicines on the day of the procedure, please do so using only a sip of water.
- Do not apply lotions, perfumes, deodorants, or nail polish.
- Remove all jewelry, piercings, and contact lenses.
- Leave your valuables at home.

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At the hospital or surgery center

- Bring a picture ID.
- A small tube (IV) may be placed in a vein, to give you fluids and medicine to help you relax.
- A doctor or nurse may give you medicine to dry up mucus and numb the inside of your nose and throat.
- You will be kept comfortable and safe by your anesthesia provider. You will be asleep during the procedure.
- The procedure will take about 10 to 90 minutes.
- As you wake up in the recovery room, the nurse will check to be sure you are stable and comfortable. It is important for you to tell your doctor and nurse how you feel and ask questions about any concerns you may have.
- You may have an ice pack on your throat to prevent swelling.

Going home

- You will need someone to drive you home.
- For your safety, you should not drive until you are no longer taking pain medicines, and you can move and react easily.
- Arrange for extra help at home after the procedure, especially if you live alone or provide care for another person.
- You will be given more specific instructions about recovering from your procedure, including activity and when you may return to work.

When should you call your doctor?

- You have questions or concerns.
- You don't understand how to prepare for your procedure.
- You become ill before the procedure (such as fever, flu, or a cold).
- You need to reschedule or have changed your mind about having the procedure.

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Where can you learn more?

Go to <http://www.kp.org>

Enter R496 in the search box to learn more about "**Direct Rigid Laryngoscopy: Before Your Procedure**".

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