Memorial Sloan Kettering Cancer Center

PATIENT & CAREGIVER EDUCATION

About Your Diagnostic Laryngoscopy Under Anesthesia

This information will help you get ready for your diagnostic laryngoscopy at MSK including what to expect before and after your procedure.

A diagnostic laryngoscopy is a procedure that lets your surgeon look at your larynx (voice box) using an instrument called a laryngoscope. A laryngoscope is a tube with a camera at the end that your surgeon will use to get a clear view of your larynx. Your surgeon may also take a biopsy (sample of tissue) during the procedure.

Some people also have an esophagoscopy done at the same time. This is a procedure that looks at your esophagus (food pipe).

A laryngoscopy is usually done as an outpatient procedure in the operating room. You'll get anesthesia (medicine that makes you sleep) during the procedure.

Before your procedure

Presurgical testing (PST)

You'll have a PST appointment before your procedure. You'll get a reminder from your healthcare provider's office with the appointment date, time, and location. Visit www.msk.org/parking for parking information and directions to all MSK locations.

You can eat and take your usual medicines the day of your PST appointment.

It's helpful to bring these things to your appointment:

- A list of all the medicines you're taking, including prescription and over-the-counter medicines, patches, and creams.
- Results of any medical tests done outside of MSK in the past year, if you have them. Examples include results from a cardiac stress test, echocardiogram, or carotid doppler study.
- The names and telephone numbers of your healthcare providers.

You'll meet with an advance practice provider (APP) during your PST appointment. They work closely with MSK's anesthesiology (A-nes-THEE-zee-AH-loh-jee) staff. These are doctors with special training in using anesthesia during

a procedure.

Your APP will review your medical and surgical history with you. You may have tests to plan your care, such as:

- An electrocardiogram (EKG) to check your heart rhythm.
- A chest X-ray.
- Blood tests.

Your APP may recommend you see other healthcare providers. They'll also talk with you about which medicine(s) to take the morning of your procedure.

Since you will be asleep during your procedure, you must get ready for your laryngoscopy as if you were having surgery. Your nurse will give you the resource *Getting Ready for Surgery* (www.mskcc.org/pe/getting-ready-surgery). It has important information you will need to get ready for your procedure.

Ask about your medicines

You may need to stop taking some of your medicines before your procedure. Talk with your doctor about which medicines are safe for you to stop taking. We have included some common examples below.

Anticoagulants (blood thinners)

If you take a blood thinner (medicine that affects the way your blood clots), ask the doctor performing your procedure what to do. Their contact information is listed at the end of this resource. Whether they recommend you stop taking the medicine depends on the reason you're taking it.

Do not stop taking your blood thinner medicine without talking with your doctor.

Examples of Blood Thinners			
apixaban (Eliquis®)	dalteparin (Fragmin®)	meloxicam (Mobic®)	ticagrelor (Brilinta®)
aspirin	dipyridamole (Persantine®)	nonsteroidal anti-inflammatory drugs (NSAIDs) such as ibuprofen (Advil®) or naproxen (Aleve®)	tinzaparin (Innohep®)
celecoxib (Celebrex®)	edoxaban (Savaysa®)	pentoxifylline (Trental®)	warfarin (Coumadin®)
cilostazol (Pletal®)	enoxaparin (Lovenox®)	prasugrel (Effient®)	
clopidogrel (Plavix®)	Fondaparinux (Arixtra®)	rivaroxaban (Xarelto®)	

dabigatran (Pradaxa®)	heparin (shot under your skin)	sulfasalazine (Azulfidine®, Sulfazine®)	

Read *How To Check if a Medicine or Supplement Has Aspirin, Other NSAIDs, Vitamin E, or Fish Oil* (www.mskcc.org/pe/check-med-supplement). It has important information about medicines you'll need to avoid before your procedure and what medicines you can take instead.

Medicines for diabetes

If you take insulin or other medicines for diabetes, ask the doctor who prescribes the medicine what you should do the morning of your procedure. You may need to change the dose before your procedure.

Weight loss medicines

If you take medicine for weight loss (such as a GLP-1 medicine), talk with the healthcare provider who scheduled your procedure. Ask them what to do before your procedure. You may need to stop taking it, follow different eating and drinking instructions before your procedure, or both. Follow your healthcare provider's instructions.

We've listed some examples of medicines that cause weight loss below. There are others, so be sure your care

team knows all the medicines you take. Some of these are meant to be used to help manage diabetes but are sometimes prescribed just for weight loss.

- Semaglutide (Wegovy®, Ozempic®, Rybelsus®)
- Dulaglutide (Trulicity®)
- Tirzepatide (Zepbound®, Mounjaro®)
- Liraglutide (Saxenda®, Victoza®)

Diuretics (water pills)

If you take any diuretics (medicines that make you pee more often), ask the doctor doing your procedure what to do. You may need to stop taking them the day of your procedure. Diuretics are sometimes called water pills. Some examples are furosemide (Lasix®) and hydrochlorothiazide.

Arrange for someone to take you home

You must have a responsible care partner take you home after your procedure. A responsible care partner is someone who can help you get home safely. They should be able to contact your care team if they have any concerns. Make sure to plan this before the day of your procedure.

If you don’t have a responsible care partner to take you home, call one of the agencies below. They’ll send

someone to go home with you. There's a charge for this service, and you'll need to provide transportation. It's OK to use a taxi or car service, but you still need a responsible care partner with you.

Agencies in New York

VNS Health: 888-735-8913

Caring People: 877-227-4649

Agencies in New Jersey

Caring People: 877-227-4649

The day before your procedure

Note the time of your procedure

A staff member will call you after 2 p.m. the day before your procedure. If your procedure is scheduled for a Monday, they'll call you on the Friday before. If you do not get a call by 7 p.m., call 212-639-7606.

The staff member will tell you what time to arrive for your procedure. They'll also remind you where to go.

If you need to cancel your procedure for any reason, call the doctor who scheduled it for you.

Instructions for eating

Stop eating at midnight (12 a.m.) the night before your surgery. This includes hard candy and gum.

Your healthcare provider may have given you different instructions for when to stop eating. If so, follow their instructions. Some people need to fast (not eat) for longer before their surgery.

The day of your procedure

Instructions for drinking

Between midnight (12 a.m.) and 2 hours before your arrival time, only drink the liquids on the list below. Do not eat or drink anything else. Stop drinking 2 hours before your arrival time.

- Water.
- Clear apple juice, clear grape juice, or clear cranberry juice.
- Gatorade or Powerade.
- Black coffee or plain tea. It's OK to add sugar. Do not add anything else.
    - Do not add any amount of any type of milk or creamer. This includes plant-based milks and creamers.

- Do not add honey.
- Do not add flavored syrup.

If you have diabetes, pay attention to the amount of sugar in your drinks. It will be easier to control your blood sugar levels if you include sugar-free, low-sugar, or no added sugar versions of these drinks.

It's helpful to stay hydrated before surgery, so drink if you are thirsty. Do not drink more than you need. You will get intravenous (IV) fluids during your surgery.

Stop drinking 2 hours before your arrival time. This includes water.

Your healthcare provider may have given you different instructions for when to stop drinking. If so, follow their instructions.

Things to remember

- Take your medicines the morning of your procedure as instructed by your doctor. Take them with a few sips of water.

What to expect

Once you arrive at the hospital, doctors, nurses, and other staff members will ask you to state and spell your name and

date of birth many times. This is for your safety. People with the same or similar name may be having procedures on the same day.

After changing into a hospital gown, you'll meet your nurse. They will place an intravenous (IV) catheter into a vein, usually in your hand or arm. At first, you'll get fluids through the IV, but it will be used later to give you anesthesia (medicine to make you sleep during your procedure).

When it's time for your procedure, you'll be brought into the procedure room and helped onto an exam table. You'll be attached to equipment to monitor your heart, breathing, and blood pressure.

You'll get anesthesia through your IV. Once you're asleep, your head will be tilted back. This gives your doctor the best view of your larynx and the areas around it.

Your doctor will insert a laryngoscope into your mouth and down your throat. It's attached to a small video camera that can make your larynx look bigger, so the doctor can see it clearly. Your doctor may also use a special microscope to see better. If you need a biopsy of your larynx, your doctor will take them during the procedure as well.

After your procedure

In the hospital

You will wake up in the Post-Anesthesia Care Unit (PACU). Your nurse will continue to monitor your heart, breathing, and blood pressure.

Your doctor will talk with you about what they found during the procedure. If they took any biopsies, it will take up to a week to get the results. Your doctor will tell you when you can call to get this information.

Once you are fully awake and alert, you can go home.

At home

- If you had a biopsy taken, you may have a sore throat for a few days.
  - If you're having any discomfort, you can rinse out your mouth and gargle with warm salt water. To make a salt water rinse, dissolve 1 tablespoon of salt in 1 quart of warm water. Gargle as often as you like.
  - You may want to use a humidifier to help reduce any dryness or swelling in your throat.
- You may also cough up mucus that has some blood in it. This is normal and should stop within 7 days.
- If you usually take aspirin or products containing aspirin,

you can start taking them again the day after your procedure after checking with your doctor first.

- You'll have a follow-up appointment with your doctor in 5 to 7 days. At that time, your doctor will talk with you about the treatment option that's best for you, based on your results.

When to contact your healthcare provider

Call your healthcare provider if you:

- Have a fever of 101 °F (38.3 °C) or higher.
- Have trouble breathing.
- Cough up bright red blood.

If you have questions or concerns, contact your healthcare provider. A member of your care team will answer Monday through Friday from 9 a.m. to 5 p.m. Outside those hours, you can leave a message or talk with another MSK provider. There is always a doctor or nurse on call. If you're not sure how to reach your healthcare provider, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.

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