

Patient Information

Panendoscopy and Biopsy

What is a panendoscopy and biopsy?

This operation is usually performed when there is suspicion of a cancer within the head and neck. It allows the surgeon to fully assess the oral cavity, larynx (voicebox) and oesophagus (food-pipe) to identify the extent of any growths, and take biopsies (which can include a tonsillectomy) to aid in diagnosis.

What is the operation like?

This is usually a day stay procedure. Before the operation you will see a member of the surgical team and the anaesthetist. The operation is performed with you asleep under a general anaesthetic for approximately 20 minutes.

You will wake up in the recovery room and once the anaesthetic has worn off you will be seen by your surgeon to explain the findings. If there are no significant problems you will then be discharged home with painkillers and an appointment to come back for any biopsy results. You will have a sore throat (especially if tonsillectomy was performed), and this will gradually improve over a week or two.

What can go wrong?

The surgery is usually safe and uncomplicated however it is important that you are aware of the risks of the procedure.

General complications such as nausea, vomiting, sore throat and drowsiness may occur as a result of the anaesthetic. Serious drug reactions related to the anaesthetic are very rare.

Specific problems:

- **Bleeding** – specks or streaks of blood mixed with the saliva is common. However if you have large amounts of blood or any fresh active bleeding that is worrying you then you need to come back to the hospital emergency department
- **Infection** – is uncommon and may occur after a delay of at least 3-5 days from the procedure and causes fevers and increasing pain despite pain relief. If you are concerned about this you need to contact your surgical team
- **Non-Diagnostic** – Occasionally a diagnosis is not yielded from the biopsy and in some instances if there is ongoing suspicion then a repeat procedure will be arranged

Discharge Instructions:

- Take regular analgesia (paracetamol, oxynorm)
- Rest adequately & avoid excessive exertion
- Attend your review appointment

How to get help:

If you are concerned about your recovery, you can contact the ENT surgical team through the hospital switchboard on 9496 5000 or present to your GP or Emergency department for help. In an emergency call 000.