

# *Upper Cape Ear, Nose & Throat, PC*

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## **DIRECT LARYNGOSCOPY**

### **Purpose**

Direct laryngoscopy is a procedure to examine the larynx under anesthesia. It is done to treat benign conditions that affect the voice and to accurately diagnose malignancies of the voicebox and lower throat.

### **Procedure**

The procedure is done in a hospital or surgicenter under general anesthesia or local with sedation. After the patient is asleep a scope is inserted through the mouth and the throat examined. If biopsies or removal of a lesion are necessary this is done through the scope using long thin instruments. The patient is then taken to the recovery room. Most patients stay for an hour or so after the procedure and then go home the same day. Patients can resume a soft diet as soon as the anesthesia wears off.

### **Recovery**

You should rest at home with your head elevated after returning home. If a procedure was done on your vocal cords you may be instructed to rest your voice. Voice rest means not speaking unless it is necessary. Absolutely no yelling or whispering is allowed, as these are more injurious than regular speech. Most patients are able to resume all of their normal activity (except voice use) by the following day. The throat will be sore for several days after the procedure.

### **Risks and Complications**

Any time a procedure is done involving the vocal cords there is the potential for scarring of the vocal cord. This could lead to worsening of the voice. Permanent hoarseness is not common, but this is a potential complication of the surgery.

Any time an instrument is passed into the mouth there is a risk of chipping a tooth or knocking a tooth loose. This is a very uncommon complication.

If a lesion is removed from the vocal cords it does not usually recur, but there is a small chance that it could.

Bleeding and infection are possible, as with any surgery. There is not a high incidence of either of these complications with this type of surgery.

**I have read, understand, and accept the risks and possible complications of this operation. Alternative treatments have been discussed with me and I want to go ahead with the surgery.**

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Patient's Signature

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Date

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Witness