

PNEUMONIA: DIAGNOSIS AND TREATMENT FOR SPECIAL POPULATIONS

TRANSCRIPT

Common tests to diagnose and treat pneumonia include a physical exam, x-rays, lab tests, breathing therapy and medications. However, additional procedures and tests that take a closer look inside the body are sometimes required.

For example, your doctor may conduct a bronchoscopy to confirm your diagnosis. During a bronchoscopy, a thin tube is inserted into your windpipe to look directly inside your airways.

Sometimes during a bronchoscopy, saline – a form of purified saltwater – is used to wash your lungs. The fluid is suctioned out and tested for infection.

If you have developed fluid in the space between your lungs and the chest wall, a condition known as a pleural effusion; or have an infected pleural effusion, called an empyema, a procedure known as a thoracentesis may be performed to determine the cause. During this procedure, a long thin needle is inserted between the ribs and used to withdraw fluid from the pleural space. Again, this fluid is sent to the lab.

If there is a large amount of fluid in the pleural space, a chest tube may be inserted to help it drain. This will also help you breathe easier and make you more comfortable.

In severe cases of pneumonia that don't respond to common treatments, the lung tissue itself may need to be studied through a lung biopsy. A biopsy collects a small sample of lung tissue through needle aspiration, a technique in which a needle is inserted between the ribs and gathers cells for examination.

In cases where pneumonia damages a portion of the lung, your doctor may order a thoracotomy. This is a surgical procedure which permanently removes the affected lung tissue.

Each of these procedures has different risks and possible complications. Discuss them with your healthcare team, and ask any questions you have.