

Guideline released on minimally invasive procedure, EBUS-TBNA, to diagnose lung diseases

September 24 2015

The American College of Chest Physicians announced the release of new clinical guidelines on endobronchial ultrasound (EBUS)-guided transbronchial needle aspiration (TBNA). The guideline, which applies to a common bronchoscopic test, contains 12 recommendations including best practices related to patient factors and procedural aspects.

Endobronchial ultrasound (EBUS) was introduced in the last decade, enabling real-time guidance for transbronchial needle aspiration (TBNA) of structures located near the lung airways and providing a highly accurate and reliable way to diagnose conditions such as [lung cancer](#), sarcoidosis, and TB. EBUS-TBNA has become an essential tool for pulmonologists and [thoracic surgeons](#) and is one of the recommended first steps in the mediastinal staging of lung cancer as outlined in [Diagnosis and Management of Lung Cancer, 3rd ed, American College of Chest Physicians Evidence-Based Clinical Practice Guidelines](#).

"This guideline provides advice on optimal performance of EBUS-TBNA and examines current knowledge of the technical aspects of the procedure. EBUS-TBNA has become an essential tool for the chest physician, and guidance is needed as clinicians adopt its use for diagnosing pulmonary diseases," said Momen Wahidi, MD, MBA, Director, Interventional Pulmonology and Bronchoscopy, Duke University Medical, chair of the guideline panel.

The guidelines have been endorsed by the American Association of Bronchology and Interventional Pulmonology, American Association for Thoracic Surgery, European Association for Bronchology and Thoracic Surgery, and the Society of Thoracic Surgeons.

Provided by American College of Chest Physicians

Citation: Guideline released on minimally invasive procedure, EBUS-TBNA, to diagnose lung diseases (2015, September 24) retrieved 3 May 2024 from <https://medicalxpress.com/news/2015-09-guideline-minimally-invasive-procedure-ebus-tbna.html>

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