

### 5.01 Endo-bronchial Ultrasound Audit At University Hospital Limerick

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**Background:** Endo-bronchial ultrasound guided trans-bronchial needle aspiration (EBUS-TBNA) is a key diagnostic tool for sampling enlarged mediastinal and hilar lymph nodes, with a sensitivity for diagnosing malignancy quoted at 88 to 100%. This audit aimed to evaluate if the EBUS yield in University Hospital Limerick (UHL) aligns with national and international standards. **Methods:** Fifty-nine samples were taken from February to October 2023. We assessed if the EBUS tissue was sufficient for diagnosis, classifying the procedure as successful if it yielded adequate lymph node tissue. Samples deemed “insufficient” or “scanty” on pathology reports were considered unsuccessful. The standard for comparison for our audit was British Thoracic Society Quality Standards for Flexible Bronchoscopy 2014. **Results:** Of 139 lymph node samples, 100 (71.94%) were adequate. Forty-six of the fifty-nine (77.97%) EBUS procedures yielded sufficient tissue for diagnosis. 26% of the total EBUS procedures resulted in lung cancer diagnosis and the rest of 74% were benign. **Conclusions:** Diagnostic yield rate of EBUS-TBNA in UHL was 77.97%, compared to the BTS standard of 88% for staging lung cancer. Training is necessary to improve diagnostic yields and sensitivity in detecting intra and extra-pulmonary pathology. **Keywords:** EBUS, sensitivity, lymph node, diagnosis **Disclosures:** None **Conflict of Interest:** The authors declare that they have no conflict of interest.

**Reference:** Quality standards <https://www.brit-thoracic.org.uk/quality-improvement/quality-standards/flexible-bronchoscopy>