

Patient Information

Thoracotomy:

A thoracotomy is a surgical incision into the chest that allows the surgeon to directly view the lungs, esophagus (food tube), heart, and major blood vessels, and the area around them. Surgical procedures may be done, such as removing part or all of a lung, repairing or removing the esophagus, or removing cancerous tissue. One or more tubes are placed in the chest temporarily to drain fluid and air after surgery. The tubes are removed several days after surgery.

Your surgeon will give you instructions on how to get ready for the procedure, and explain why you need a thoracotomy.

The risks associated with thoracotomy include the following:

- Risks of general anesthesia
- Wound infection
- Bleeding
- Inflammation of the lungs (pneumonia)
- Air leak through the lung wall, requiring a longer hospital stay
- Worsening of any existing heart problems
- Blockage of a blood vessel in the leg (deep vein thrombosis) with potential for blood clots in the lung (pulmonary embolism)
- Death, stroke, kidney, and liver failure

Anesthesia

The anesthesiologist will discuss the type of medications you will be given during the procedure. You may receive epidural anesthesia through a flexible tube inserted in your lower back.. A bladder catheter to help

drain urine is usually inserted. Other pain-relieving procedures, such as a nerve block, may be done during the surgery.

In the Recovery Area

After surgery, you will be moved to a recovery area where you can be closely monitored. When you first wake up from the anesthesia, you may feel groggy, thirsty, or cold. If the breathing tube given to you during surgery remains in place, you will not be able to speak.

Flexible tubes in your chest drain air, blood, and fluid. Intravenous (IV) lines give you fluid and medications. Monitors record your blood pressure, heartbeat, and the amount of oxygen in your blood. You may spend one or more days in this monitoring unit before you're moved to a regular hospital room.

During recovery, you will be given pain medications to help make you more comfortable. You may also be taught exercises to improve your breathing. The hospital stay varies, but it's often a week or longer.

Therapy and Exercises

Soon after your surgery, a nurse or therapist will teach you exercises to keep your lungs clear, strengthen your breathing muscles, and help prevent complications. The exercises include incentive spirometry, coughing, and deep-breathing exercises.

Range-of-Motion Exercises

While you're in the hospital, your nurse or a physical therapist may teach you range-of-motion exercises. These exercises help stretch and strengthen the muscles on the

Philip L. Rice, M.D., F.A.C.S.
Commonwealth Surgical Services
400 Highland Ave. Lewistown, PA 17044

717-242-7939

Patient Information

side of surgery to keep your shoulder moving freely.

Home Recovery

Your doctor will review the results of your surgery with you and explain to you what to expect during your recovery. You and your doctor can discuss any further treatment you may need for your condition, review the next stage of your treatment plan, and schedule follow-up visits. Have someone available to drive you home when you're ready to leave the hospital. For the first several weeks after your surgery, you will be gaining a little more energy and strength each day. Breathing may be uncomfortable at first, and you may be short of breath. Take things slowly, and rest when you get tired. Your doctor or nurse can talk to you about what you can and can not do as you recover.

Caring for Your Incision

When you shower, wash your incision gently with warm (not hot) water and mild soap. Bruising, itchiness, soreness, and numbness at your incision site are normal for several weeks after surgery.

Taking Medications

Take your pain medications regularly as your doctor instructs--don't wait until the pain gets bad before you take them. Your doctor may prescribe other medications. In some cases, this may include oxygen, or antibiotics

Easing into Activity

For 6 to 8 weeks after your surgery, avoid any activity that might put stress on your healing incisions, such as heavy lifting or yard work. Walking is a good exercise to improve your circulation, lung capacity, and

strength. Ask your doctor how long to wait before returning to sexual relations, driving, and work.

When to Call Your Doctor

Call your doctor if you have any of these symptoms:

- Draining or very red incision
- Sudden, severe shortness of breath
- Sudden, sharp chest pain
- Fever over 101°F
- Rapid heartbeat or “fluttering” in your chest

Following Up with Your Doctor

As you recover from the surgery, you'll see your doctor for regular follow-up visits. During these visits, your healing and recovery can be monitored. Your doctor or nurse can also discuss your plan of care with you and outline your options if you need further treatment.

Philip L. Rice, M.D., F.A.C.S.
Commonwealth Surgical Services
400 Highland Ave. Lewistown, PA 17044

717-242-7939