

Mediastinoscopy and Mediastinotomy

The mediastinum is the area in your chest between your lungs. It contains the heart and its large vessels, parts of the trachea (windpipe) and esophagus (food pipe), the thymus gland, and lymph nodes. Both mediastinoscopy and mediastinotomy are surgical procedures that allow your surgeon to see inside your mediastinum and take biopsies (tissue samples) from lymph nodes in your chest. Pathologists examine and test the samples to find out if there is cancer in the lymph nodes.

Mediastinoscopy

The surgeon makes a small incision (cut) at the base of the neck, just above the sternum (breastbone). A thin tube containing a mediastinoscope (camera lens) is inserted, which lets your surgeon see the structures inside the mediastinum and to biopsy the lymph nodes. You will probably be able to go home the same day.

Mediastinotomy (Chamberlain Procedure)

The surgeon makes a 1-2 inch incision just beside your sternum. This approach allows access to some lymph nodes that cannot be reached during mediastinoscopy. You may be able to go home the same day, or you may need to stay in the hospital for 24-48 hours.

- Both procedures are done in the operating room under general anesthesia. The final pathology report should be available within 5 business days. Your surgeon will review the report with you when you return for your postoperative visit. If your follow up appointment is not already scheduled, please call your surgeon's office.

How do I Prepare for the Procedure?

Some over-the-counter and prescription medicines can interfere with normal blood clotting and increase the risk of bleeding. Please review the attached **Medicine Checklist Before Your Procedure** document with your healthcare team to help determine when to stop taking certain medicines prior to your surgery. **Do not stop taking any medicines without talking to your healthcare team.**

- **Note: Important! Do not** eat or drink anything after midnight on the night **before** the procedure. This includes water, gum, candy, coffee, and juice.
- If you have diabetes and take medicine to control your blood sugar, talk to your healthcare team **before** the day of your procedure.

What Can I Expect After My Procedure?

- You can eat and drink once you are fully awake when the anesthesia has worn off (after you are able to swallow normally).
- You may have some pain and some swelling at the incision site for 1- 2 weeks. You may be given a prescription for pain medicine that you can take as directed.
- Some pain medicines can cause constipation. You may need to take a stool softener while on pain medicine.
- When you go home, there will be a small dressing over the incision. The sutures (stiches) are on the inside and will dissolve on their own. A clear plastic sealant or tape closures, if used, will fall off within 2 weeks as the incision heals. Notify your doctor if the wound sealant or tape is causing itching or discomfort because you might be able to remove them sooner.
- Keep the incision site clean and dry for **48 hours**. You may shower after 48 hours.
- You may have blood-tinged mucous for 3-4 days after the procedure. If you cough up a large amount (1 tablespoon) of blood, call your healthcare team.

- You may experience hoarseness or voice changes. If this continues, please let your surgeon know at your postoperative visit, which will be 1-2 weeks after the procedure.

When Should I Call My Healthcare Team?

Please call immediately if you have:

- Temperature of 100.5°F (38°C) degrees or higher
- Redness or swelling at the incision site that is getting worse (some swelling is normal)
- Drainage of blood or pus from the incision site
- Hoarseness that continues after your first postoperative visit

If you are in need of immediate assistance, please call 732-235-2465 and select the option that best meets your needs.