RUTGERS Cancer Institute of New Jersey RUTGERS HEALTH

Video-Assisted Thoracic Surgery (VATS)

VATS is a surgical procedure where 3-4 small incisions (cuts) are made in your chest wall. A scope (small camera) is inserted into the chest so the surgeon can see the lining of the chest wall and the surface of the lungs. A tissue sample will be taken and sent to pathology. A part of the lung may be removed in order to treat your disease. If the entire lung has to be removed, your surgeon may need to make a larger incision to safely remove the lung.

This procedure requires general anesthesia and the insertion of a chest tube, which reinflates the lung after the procedure is done. You will remain in the hospital for 1-5 days after your surgery.

Your surgeon will review the report with you when you are in the hospital or 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.**

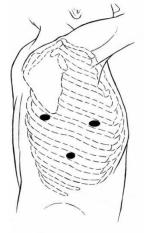
- **Do not** eat or drink anything after midnight on the night **before** the procedure; this includes water, gum, candy, coffee, and juice.
- If you have diabetes and take medicine to control your blood sugar, talk to your healthcare team **before** the day of your procedure.

What Can I Expect After the Procedure?

- You will be transferred to a general surgical floor; You may be in the intensive care unit (ICU) to be watched closely for the first 24-48 hours
- You will have a chest tube in your side for at least 24-48 hours; your chest tube will be removed as soon as your lung has fully expanded
- It is **very** important that you take deep breaths and cough up secretions; this will help prevent developing pneumonia or other lung problems after your surgery; the nurses and respiratory therapists will show you how to perform these deep breathing exercises
- You will have special stockings around your legs that automatically inflate and deflate periodically; this keeps the blood moving so blood clots do not form in your legs while you stay in bed; you will also be on a medicine to prevent clots
- It is important for you to get up and walk around as soon as possible; walking helps you move your bowels, exercise your lungs, and prevent blood clots; your ability to walk also helps us to determine when you can safely be discharged home









What Can I Expect When I am Discharged?

- You may be discharged with oxygen
- You may shower, unless instructed otherwise; raising your arms over your head to wash your hair may cause fatigue, shortness of breath, or pain; you may need someone to help you
- Keep your incisions clean and dry; leave them open to air as much as possible as this promotes healing
- Restrictive clothing, such as a bra, may irritate your incisions
- The chest tube site may drain straw/yellow-colored or bloody drainage; this is normal; you can protect your clothing by covering the incision with gauze until it dries up
- If you have staples and/or sutures, they will be removed at your follow-up visit
- You will be given a prescription for pain medicine to take at home
- Some pain medicines can cause constipation; you may need to take a stool softener while on pain medicine
- You will be given discharge instructions when you leave the hospital
- You will be seen for a follow-up visit 1-2 weeks after the surgery

What Should I Avoid After Surgery?

- Do not scrub the incisions; allow soap and water to run over the incisions, then gently pat them dry
- You are not allowed to drive until you are cleared by your surgeon
- You may do physical activity as tolerated; heavy lifting for the first 1-2 weeks will not harm you but may irritate your incisions and cause increased pain
- No air travel for one month

When Should I Call My Healthcare Team?

Please call immediately if you have:

- Increased shortness of breath or difficulty breathing
- Temperature of 100.4°F (38°C) degrees or higher
- Heart palpitations or chest pain
- Increased redness, drainage, or swelling around the incisions or chest tube site (some swelling is normal)
- Drainage of blood or pus from the incision sites
- A bubbling or sucking sound from the incision sites
- Constipation that does not get better with stool softeners
- Any pain that is not relieved by your pain medicine

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

RWJBarnabas HEALTH RUTGERS Cancer Institute of New Jersey RUTGERS HEALTH



Medicine Checklist Before Your Procedure

Your healthcare team will review your current list of medicines, vitamins and supplements and advise you when to stop taking them.

_ days before procedure stop taking the following medicines:

- Aspirin or medicines containing aspirin such as: acetylsalicyclic acid, Excedrin[®], Percodan[®], Alka-Seltzer[®] Pepto-Bismol[®]
- Herbal supplements such as Vitamin E, Omega 3, Fish oil, green tea, gingko biloba
- Steroids such as dexamethasone, prednisone, prednisolone
- Anti-inflammatory medicines or medicines that have an anti-inflammatory ingredient in it such as:

celecoxib (Celebrex®)	ketoprofen (Orudis [®])	naproxen sodium (Aleve [®] /Anaprox [®])
diclofenac (Voltaren [®])	ketorolac (Toradol [®])	piroxicam (Feldene®)
hydrocodone bitartrate/acetaminophen (Vicodin [®])	meloxicam (Mobic [®])	sulindac (Clinorial [®])
ibuprofen (Advil [®] , Midol [®] , Motrin [®])	misoprostol (Arthrotec [®])	
indomethacin (Indocin [®])	naproxen (Naprosyn®)	

_days before procedure stop taking the following blood thinning medicines such as:

dipyridamole (Persantine [®])	prasugrel (Effient [®])
drotrecogin alfa (Xigris®)	rivaroxaban (Xarelto [®])
enoxaparin (Lovenox [®])	ticagrelor (Brilinta [®])
eptifbatide (Integrilin [®])	ticlopine (Ticlid [®])
fondaparinux (Arixtra®)	tirofiban (Aggrastat [®])
pletal (Cilostazol [®])	warfarin (Coumadin [®])
	drotrecogin alfa (Xigris [®]) enoxaparin (Lovenox [®]) eptifbatide (Integrilin [®]) fondaparinux (Arixtra [®])

Additional/specific instructions:

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

[®]Rutgers Cancer Institute of New Jersey Patient Education Committee