

Video-Assisted Thoracoscopic Surgery (VATS): Before Your Surgery

What is video-assisted thoracoscopic surgery?

VATS is a way to do surgery inside the chest. With open surgery, the doctor makes one large cut in your chest. But with VATS, the doctor makes several small cuts. VATS also differs from open surgery because the doctor does not have to cut through the ribs or breastbone (sternum). The doctor can use VATS to find and treat many problems in the chest.

To start, the doctor will make several small cuts between your ribs. These cuts are called incisions. The doctor will put a thin, lighted tube with a camera on it into your chest. This tube is called a thoracoscope, or scope. It lets the doctor see inside your chest. Then the doctor will use tiny surgical tools to do the surgery. The doctor will close the incisions with stitches or staples.

How long you stay in the hospital and how long your recovery takes will depend on why you are having the surgery.

The scars from the incisions will fade with time. The area around the incisions may ache or feel numb in the weeks after surgery.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

What happens before surgery?

Surgery can be stressful. This information will help you understand what you can expect. And it will help you safely prepare for surgery.

Preparing for surgery

- Understand exactly what surgery is planned, along with the risks, benefits, and other options.
- Tell your doctors ALL the medicines, vitamins, supplements, and herbal remedies you take. Some of these can increase the risk of bleeding or interact with anesthesia.
- If you take blood thinners, such as warfarin (Coumadin), clopidogrel (Plavix), or aspirin, be sure to talk to your doctor. He or she will tell you if you should stop taking these medicines before your surgery. Make sure that you understand exactly what your doctor wants you to do.
- Your doctor will tell you which medicines to take or stop before your surgery. You may need to stop taking certain medicines a week or more before surgery. So talk to your doctor as soon as you can.
- If you have an advance directive, let your doctor know. It may include a living will and a durable power of attorney for health care. Bring a copy to the hospital. If you don't have one, you may want to prepare one. It lets your doctor and loved ones know your health care wishes. Doctors advise that everyone prepare these papers before any type of surgery or procedure.

What happens on the day of surgery?

- Follow the instructions exactly about when to stop eating and drinking. If you don't, your surgery may be canceled. If your doctor told you to take your medicines on the day of surgery, take them with only a sip of water.
- Take a bath or shower before you come in for your surgery. Do not apply lotions, perfumes, deodorants, or nail polish.
- Do not shave the surgical site yourself.
- Take off all jewelry and piercings. And take out contact lenses, if you wear them.

At the hospital or surgery center

- Bring a picture ID.
- The area for surgery is often marked to make sure there are no errors.
- You will be kept comfortable and safe by your anesthesia provider. You will be asleep during the surgery.
- The surgery will probably take about 1 to 3 hours.
- You may have one or more tubes coming out of your chest. They drain fluid and air.

Going home

- Be sure you have someone to drive you home. Anesthesia and pain medicine make it unsafe for you to drive.
- You will be given more specific instructions about recovering from your surgery. They will cover things like diet, wound care, follow-up care, driving, and getting back to your normal routine.

When should you call your doctor?

- You have questions or concerns.
- You don't understand how to prepare for your surgery.
- You become ill before the surgery (such as fever, flu, or a cold).
- You need to reschedule or have changed your mind about having the surgery.

Where can you learn more?

Go to <http://www.healthwise.net/ed>

Enter **A568** in the search box to learn more about "**Video-Assisted Thoracoscopic Surgery (VATS): Before Your Surgery.**"

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Video-Assisted Thoracoscopic Surgery (VATS): What to Expect at Home

Your Recovery

Video-assisted thoracoscopic surgery (VATS) is a way to do surgery inside the chest using several small cuts (incisions) instead of one larger incision (open surgery). VATS also is different from open surgery because it does not require the doctor to cut through the ribs or breastbone (sternum). The doctor may have used VATS to find and treat problems with the lungs, heart, or spine. Or the doctor may have used VATS to operate on other organs in your chest.

Your chest may be sore where the doctor made the incisions and put in the surgical tools. This usually gets better after 2 to 3 weeks.

You will have stitches or staples in the incisions. Your doctor will take these out 1 to 2 weeks after your surgery.

The amount of time you will need to recover depends on the surgery you had. But you probably will need to take it easy at home for at least 1 to 2 weeks.

This care sheet gives you a general idea about how long it will take for you to recover. But each person recovers at a different pace. Follow the steps below to get better as quickly as possible.

How can you care for yourself at home?

Activity

- Rest when you feel tired. Getting enough sleep will help you recover.
- Try to walk each day. Start by walking a little more than you did the day before. Bit by bit, increase the amount you walk. Walking boosts blood flow and helps prevent pneumonia and constipation.
- Avoid strenuous activities, such as bicycle riding, jogging, weight lifting, or aerobic exercise, until your doctor says it is okay.
- Avoid lifting anything that would make you strain. This may include a child, heavy grocery bags and milk containers, a heavy briefcase or backpack, cat litter or dog food bags, or a vacuum cleaner.
- Do breathing exercises at home if instructed by your doctor. This will help prevent pneumonia.
- Ask your doctor when it is safe to you to drive or fly.
- You will probably need to take at least 1 to 2 weeks off from work. It depends on the type of work you do and the surgery you had.
- You may take showers. Do not take a bath for the first 2 weeks, or until your doctor tells you it is okay.

Diet

- You can eat your normal diet. If your stomach is upset, try bland, low-fat foods like plain rice, broiled chicken, toast, and yogurt.
- Drink plenty of fluids (unless your doctor tells you not to).
- You may notice that your bowel movements are not regular right after your surgery. This is common. Try to avoid constipation and straining with bowel movements. You may want to take a fiber supplement every day. If you have not had a bowel movement after a couple of days, ask your doctor about taking a mild laxative.

Medicines

- Your doctor will tell you if and when you can restart your medicines. He or she will also give you instructions about taking any new medicines.
- If you take blood thinners, such as warfarin (Coumadin), clopidogrel (Plavix), or aspirin, be sure to talk to your doctor. He or she will tell you if and when to start taking those medicines again. Make sure that you understand exactly what your doctor wants you to do.
- Take pain medicines exactly as directed.
 - If the doctor gave you a prescription medicine for pain, take it as prescribed.
 - If you are not taking a prescription pain medicine, ask your doctor if you can take an over-the-counter medicine.
- If you think your pain medicine is making you sick to your stomach:
 - Take your medicine after meals (unless your doctor has told you not to).
 - Ask your doctor for a different pain medicine.
- If your doctor prescribed antibiotics, take them as directed. Do not stop taking them just because you feel better. You need to take the full course of antibiotics.

Incision care

- If you have strips of tape on the incisions, leave the tape on for a week or until it falls off.
- Wash the area daily with warm, soapy water, and pat it dry. Don't use hydrogen peroxide or alcohol, which can slow healing. You may cover the area with a gauze bandage if it weeps or rubs against clothing. Change the bandage every day.
- Keep the area clean and dry.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

When should you call for help?

Call 911 anytime you think you may need emergency care. For example, call if:

- You passed out (lost consciousness).
- You have severe trouble breathing.
- You have sudden chest pain and shortness of breath, or you cough up blood.

Call your doctor now or seek immediate medical care if:

- You are sick to your stomach or cannot keep fluids down.
- You have pain that does not get better after you take pain medicine.
- You have a fever over 100°F.
- You have signs of infection, such as:
 - Increased pain, swelling, warmth, or redness.
 - Red streaks leading from the incision.
 - Pus draining from the incision.
 - Swollen lymph nodes in your neck, armpits, or groin.
 - A fever.
- You have loose stitches, or your incisions come open.
- Bright red blood has soaked through the bandage over your incision.

Watch closely for changes in your health, and be sure to contact your doctor if you have any problems.

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