

## UOA MS

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**Patient Name:**

**Special Instructions:**

**Follow Up:**

# Mediastinoscopy

*Mediastinoscopy* is a procedure in which a small *incision* (cut by the surgeon) is made over the notch near the top of the *sternum* (the chest bone between your ribs). The finger of the surgeon is used to bluntly dissect down to the area which is to be examined by a small instrument similar to a small telescope ( *mediastinoscope*).

## PURPOSE OF THE TEST

This test allows the *diagnosis* (learning what is wrong) of disease of the lymph nodes around the *trachea* (your windpipe) and the area where the trachea splits into the *major bronchi* (large air passages) that go to each lung. This test is often done before surgery to see if a lung cancer has spread to these lymph nodes ( *staging*). If it has spread, surgery may not be helpful. A different form of treatment for that particular tumor may be needed.

## LET YOUR CAREGIVER KNOW ABOUT:

- Previous problems with anesthetics or medicines used to numb the skin.
- Allergies to dyes, iodine, foods, and/or latex.
- Medicines taken including herbs, eye drops, prescription medicines ( **especially medicines used to "thin the blood"**), aspirin, and other over-the-counter medicines, and steroids (by mouth or as a cream).
- History of bleeding or blood problems.
- Possibility of pregnancy, if this applies.
- History of blood clots in your legs and/or lungs .
- Previous surgery.
- Other important health problems.

## BEFORE THE PROCEDURE

- Stop smoking at least one week prior to surgery. This lowers risk during surgery.
- Your caregiver may advise that you stop taking certain medications that may affect the outcome of the surgery and your ability to heal. For example, you may need to stop taking anti-inflammatories such as aspirin because of possible bleeding problems. Other medications may have interactions with anesthesia.
- **BE SURE TO LET YOUR CAREGIVER KNOW IF YOU HAVE BEEN ON STEROIDS**

**FOR LONG PERIODS OF TIME. THIS IS CRITICAL.**

- Your caregiver will discuss possible risks and complications with you before surgery. In addition to the usual risks of anesthesia, other common risks and complications include: blood loss and replacement, temporary increase in pain due to surgery, or possible collapse of a lung.

You should be present 60 minutes prior to your procedure or as directed.

**AFTER THE PROCEDURE**

After surgery, you will be taken to the recovery area. A nurse will watch and check your progress. Generally you will be allowed to go home within a week barring other problems.

**HOME CARE INSTRUCTIONS**

- Follow your caregiver's instructions as to activities.
- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.

**SEEK MEDICAL CARE IF:**

- Increased bleeding (more than a small spot) from the wound.
- Redness, swelling, or increasing pain in the wound.
- Pus coming from wound.
- An unexplained oral temperature over 102° F (38.9° C).
- A foul smell coming from the wound or dressing.

**SEEK IMMEDIATE MEDICAL CARE IF:**

- You develop a rash.
- You have difficulty breathing.
- You have any allergic problems.

For the protection of your privacy, test results can not be given over the phone. Make sure you receive the results of your test. Ask as to how these results are to be obtained if you have not been informed. **It is your responsibility to obtain your test results.**

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