



## Operation Information

### Mediastinoscopy/ Mediastinotomy

#### Introduction

Mediastinoscopy and mediastinotomy are the operations carried out under general anaesthesia. They allow doctors to take biopsies from the lymph nodes that surround the airways and large blood vessels in the chest (for diagnosis and staging of a lung carcinoma) or for removal of mediastinal masses or enlarged lymph nodes.

#### Outcomes

This procedure or operation will look for the lymph nodes inside the chest and other abnormalities, biopsies will be taken and sent to laboratory for investigation if required.

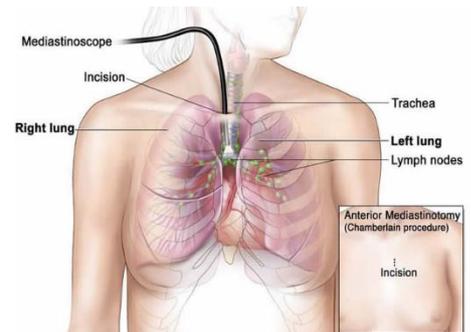
#### Procedures

1. This operation is performed under general anaesthesia.
2. For mediastinoscopy, a small cut will be made at the bottom of the neck, it allows doctor to take biopsies there. For mediastinotomy, a small cut will be made on the front of the chest to allow the doctor to take biopsies or conduct excision of mediastinal masses or lymph nodes.
3. Biopsies will be taken and sent to laboratory for investigation.
4. The wound is closed with stitches.

#### Possible Risks and Complications

1. Wound bleeding
2. Wound infection
3. Inadequate tissue for definitive diagnosis rendering further procedure
4. Accidentally puncture of blood vessels leading to hemorrhage (Extremely rare)
5. Nerve injury
6. Pneumothorax (Pressure of air in the chest cavity)
7. Chylothorax

\*\* The risks listed above are in general terms and the possibility of complications is not exhaustive. Please understand that even though all operations are carried out with utmost professionalism and care, this does not rule out the possibility of complications arising. In the event of peripheral organ damage or post-operative haemorrhage or leakage, further operations may be required.



Source:  
[https://www.lhsc.on.ca/sites/default/files/prev/images/\\_images/Thoracic\\_Surgery/Mediastinoscopy.jpg](https://www.lhsc.on.ca/sites/default/files/prev/images/_images/Thoracic_Surgery/Mediastinoscopy.jpg)

## **Pre-operative Preparations**

1. Good hygiene can prevent surgical wound infection. Therefore, we advise you to clean up yourself on the day of operation.
2. The procedure and possible complications will be explained by the doctor and a consent form must be signed prior to the operation.
3. Please inform the doctor and nurse all your past medical history, previous surgical operations, current medication and any complication with drug or anaesthesia. Please inform doctor if you are taking medications that affect blood coagulation such as Aspirin, Warfarin, Xarelto or Pradaxa, non-steroidal anti-inflammatory drug (NSAID) such as Ibuprofen, Naproxen and Chinese medication.
4. Nurse will supply a surgical soap to you for washing your whole body, especially your chest area.
5. No food or drink six hours before operation.
6. Please change into a surgical gown after removing all clothing including undergarments, dentures, jewellery and contact lenses.
7. Please empty your bladder before the operation.

## **Post-operative Preparations**

### **General**

1. After general anaesthesia, you may:
  - experience discomfort in the throat after tracheal intubation.
  - experience side effects of anaesthesia includes feeling tired, drowsy, nausea or vomiting. Inform the nurse if symptoms persist or worsen.
2. Please inform the nurse of wound pain. Proper pain relief treatment by injection or oral medication may be prescribed by the doctor.

### **Wound Care**

1. The wound will be covered with a sterile dressing which must be kept dry.
2. The wound dressing will be changed according to doctor's order.
3. You may take shower after the operation but must ensure that the dressing is waterproof and remains clean and dry.

## **Advice on Discharge**

1. Please comply with the medication regime as prescribed by your doctor.
2. Immediately consult your doctor or return to hospital for professional attention in the event of shortness of breath, wound swollen and leaking fluid, coughing up blood, shivering, high fever over 38°C or 100.4°F, or any other unusual symptoms, etc.
3. Any follow-up consultations should be attended as scheduled.

Should there be any enquiries or concerns, please consult the attending doctor.

Under the professional care of the doctor, you will gradually recover. We wish you all the best during your treatment and recovery.

If you have any questions after reading the entire leaflet, please write them down in the spaces provided in order for the doctor to further follow-up.

---

---

---

Compiled by Union Hospital Operating Theatre (OT) Governance Committee

The above information is for reference only, please enquire your physician for details  
Our Hospital reserves the RIGHT to amend any information in this leaflet without prior notification

