

## First Rib Resection for Thoracic Outlet Syndrome (TOS)

### Thoracic Outlet Syndrome

Thoracic outlet syndrome (TOS) is caused by pressure in the neck on the nerves and/or blood vessels that go into the arm. You may have pain, numbness, tingling, swelling or weakness in your arm.

### Surgery

You will be asleep under general anesthesia for the surgery to relieve the pressure in the neck. Our surgeon makes an incision in your chest and removes a part of your first rib. This helps relieve the pressure causing your symptoms. The surgeon will close the incision with stitches that will dissolve on their own. You will have a dressing over your closed incision.

### Before Surgery

No eating or drinking for at least 12 hours before your surgery.

### After Surgery

After surgery we will move you to your room. We closely watch your heart rate, blood pressure, and blood oxygen level.

When you wake up, you will have tubes and lines attached to you. You will have an IV in your arm for medicine and fluids. You may also have a chest tube that drains fluid from around your lungs. We will give you medicine for pain.

You may have blood tests, X-rays, ultrasounds, or other procedures. You may also need to wear compression stockings. These stockings help prevent blood clots in your legs. You cannot eat or drink for a few hours. You will start with clear liquids and eat more as you wake up. As you heal, you will work with nurses and occupational

therapists (OT) to get back your strength in your arm.

Most patients who have this surgery can go home within 1 to 2 days.

### Incision Care

- You can shower but do not swim or take tub baths.
- Clean the incision gently with mild soap and water. Remove any dried drainage.
- **Do not** scrub the incision.
- Rinse it and pat it dry.
- **Do not** use any lotions, alcohol, powders, or oils on your incision, unless told by your doctor.
- Leave the incision open to air unless told by your doctor.

The stitches will dissolve on their own. You may have small pieces of tape called Steri-Strips® placed on the incision. After 2-3 days, the Steri-Strips® will begin to curl up at the ends. With time, the strips will fall off on their own.

### Activity

You should be able to do most of your basic daily routines at home. You may feel weak and tired. This is **normal**. Give yourself time for rest. Your strength and energy level will increase as your body heals. Your sleep pattern should return to normal. Walking is good for you and will help you get stronger. Start slowly. Increase your distance a little bit each day. Walking also helps prevent constipation and blood clots.

For the first few weeks, **do not**:

- Lift more than 10 pounds. This includes groceries, pets, and children. One gallon of milk is about 8 pounds.
- Vacuum or scrub floors.
- Drive until your doctor says it is okay. This is often after the first clinic visit. **Do not** drive while taking opioid-pain medicine.
- Play contact sports.

Follow the exercises given to you by the OT. Try to increase the movement in your shoulder.

Ask your doctor at your follow-up visit when you may return to work and resume sex.

### **Pain**

You will have some pain and/or prickly feelings in the back of the upper arm, abdomen, and at the incision. Your doctor may prescribe pain medicine for you to use at home. You should need less pain medicine as you heal. Talk to your doctor before you start any over-the-counter pain medicine.

The opioid pain medicine can make you constipated. Use over-the-counter stool softeners (senna/docusate) as needed to prevent constipation. Other ways to prevent constipation include drinking fluids and eating fiber. Vegetables and fruits (prunes, raisins, apples, oranges, potatoes, spinach, and carrots) and whole grain breads/rice have fiber.

### **Diet**

You may not feel hungry after surgery. You should still try to eat. Eating well helps your body heal. It may be easier to eat small amounts of food throughout the day instead of eating three large meals.

Dehydration can cause you to feel tired and weak. Drink at least eight to ten 8 oz. glasses of fluid each day. Water and milk are good options. Drinks that contain caffeine (soda, coffee) are not the best choice for helping you to stay hydrated.

### **When to Call**

- Increased redness or warmth at the incision site.
- Red streaks on your skin that extend from the incision site.
- Bulging or swelling at the incision.
- Foul-smelling or pus-like drainage (green or yellow) from the incision.
- New bleeding from your incision.
- Open spots on the incision where the skin is pulling apart.
- Skin along the incision is getting darker or turning black.
- Sudden increase in pain that is not controlled by your pain medicine.
- Fever over 101.5° F (38.5°C) by mouth for two readings taken 4 hours apart.

### **When to Go to the Emergency Room**

- Increased shortness of breath or trouble catching your breath.
- Uncontrolled bleeding from the incision or anywhere else.

### **Follow Up**

You will usually return to our clinic about 2 weeks after you go home.

**Who to Call**

Vascular Surgery Clinic  
Monday-Friday, 8 am to 5 pm  
**(608) 263-8915**

After hours, call hospital paging at  
**(608) 263-6400**. Ask for the Vascular  
Surgery doctor on call. Give your name and  
phone number with the area code. The  
doctor will call you back.

The toll-free number is **1-800-323-8942**.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 9/2024. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#5354