

## Home Care After Thoracotomy

### What is a thoracotomy?

A thoracotomy is an incision made on the side of the chest wall (about 4-8 inches long), that goes between the ribs and muscles of the chest wall. Sometimes a part of the rib is taken out so the surgeon has a better view inside your chest to help remove lung tissue. You will require one or more chest tubes after a thoracotomy. The chest tube will drain any liquid or air around your lung to help it fill up with air.



### Incision Care

After the chest tube is removed, leave the chest tube dressing in place for 48 hours. Remove the dressing on \_\_\_\_\_.

After the chest tube dressing is removed, you may shower or wash the incisions daily with mild soap and water. Pat your incision dry. Do not rub them because it slows healing. Do not put lotions, powders, or antibacterial ointments on the incisions.

Do not soak in a bathtub or hot tub or go swimming until your incisions have healed.

Check your incisions daily for signs and symptoms of infection. These include:

- Increased redness
- Pus-like drainage
- Excess swelling
- Temperature (by mouth) greater than 100.4° F for two readings, 4 hours apart

You may have a small amount of drainage from your incision or from your chest tube site. This may last for a few days. Wear a Band-Aid or small dressing over the site until the drainage stops. Change the dressing daily and as needed.

When you go home, your incision may have staples or stitches in place. Sometimes, small pieces of tape called steri-strips are placed after your staples are removed. It is okay if these tape strips fall off, but don't pull them off. When you return for your clinic visit in 1-2 weeks, the doctors will remove staples or stitches that are left.

### Pain

It is very common to have pain after a thoracotomy. It is very important that you manage your pain well so that you can cough, take deep breaths, and walk. While in the hospital you will have pain medicine. There are different ways you can receive this medicine, and your surgeon will help decide which way is best.

- A **patient controlled analgesia (PCA) pump** is a pump that gives you pain medicine into your veins through an IV. You can control the amount of pain medicine you receive by pressing a button.

- An **epidural catheter** is a catheter that is placed into the spine and gives you a constant amount of pain medicine.
- You can take **pain pills** by mouth once you start eating and drinking. Let your nurse know when your pain first begins. The medicine works better if you take it before the pain becomes more severe.

### **How to Manage Your Pain at Home**

We will give you a prescription for pain medicine when you leave. When you are in pain, take your pain pills as ordered. If the pain is sharp and constant or gets worse, call your doctor.

### **Other Ways to Manage Pain**

- Warm showers (once chest tube dressing is removed) to help loosen the muscles.
- Heating pads near the incision site. Make sure to place a towel between you and the heating pad to prevent burns.
- Splinting when you cough (hold a pillow tight against the chest when you cough).

### **Activity**

- Walk 3-4 times each day.
- Use your incentive spirometer 10 times an hour while awake (2-3 times each commercial break).
- Do range of motion exercises with your arms 10 times each, 2-3 times daily for 3 weeks on your incision side. It may feel best to do these in the shower; the warm water will loosen the muscles making the exercises easier to do.
  - Raise your arm over your head with the elbow straight. Bring the arm towards your ear.

- Place your hand behind your neck and try to move that hand towards the opposite shoulder blade.
- Hold your arm straight out in front of you and cross it over to the other side of your body.
- Shrug your shoulders up, down and in circles.
- Squeeze your shoulder blades together.

- Use the arm on your surgery side as you normally would in your daily routine (dressing, showering, and combing hair).
- Do not drive for 4 weeks or if you are using narcotic pain pills.
- Do not lift more than 10 pounds (gallon of milk) for about 4 weeks or until instructed by the doctor.

### **When to Call the Doctor**

- Signs of infection.
  - Increased redness
  - Pus-like drainage
  - Excess swelling
  - Temperature (by mouth) greater than 100.4° F for two readings, 4 hours apart.
- Sudden sharp chest pain with shortness of breath

### **Phone Numbers**

Surgery Clinic: Monday – Friday, 8:00 a.m. – 4:30 p.m. **(608) 263-7502.**

After hours, the clinic number will be answered by the hospital paging operator. Ask for the **thoracic surgery resident on call.** Leave your name and phone number with the area code. The doctor will call you back.

If you live out of the area, please call the **toll-free number: 1-800-323-8942.**

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

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 © 7/2019. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#5836.