

Medical throacoscopy is a diagnostic tool to give a final call for pleural diseases and especially when Cancers are to be evaluated.

It is a excellent tool to treat recurrent fluid in the pleura (pleural effusion and pneumothorax with less pain /less hospital stay fast recovery and comparitively cheaper than prolonged hospitalisation).

Dr. Vishal and Dr. Deepika are specially skilled to perform diagnostic medical thoracoscopy ideally suited for ill patients in Navi Mumbai evaluated regularly at CHEST CARE CLINIC KHARGHAR by appointment only.

**BREATHE FIT LIVE FIT**



## **CHEST CARE CLINIC, KHARGHAR**

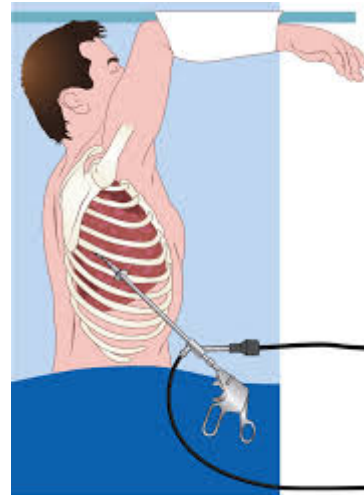
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**TIMINGS: 10AM TO 1PM AND 5PM TO 10PM**

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# What is Pleuroscopy / Medical thoraco- scopy?



This bochure is for education and information purposes of patient and care takers not for distribution and commercial purposes.

The lung is covered with a tissue called the pleura. The inside of the chest is also lined with pleura. The space between these two areas is called the pleural space.

Thoracoscopy is a procedure to pass a small metallic tube into the chest from outside by a small cut to visualise the problem on the lung from outside / surface. It is a way to obtain a sample of tissue (biopsy) from the lining of the chest cavity. It is usually done to look at cancers / tuberculosis / pneumonias to free up lung tissue from the infection. In the process, it also drains out the fluid which helps with the breathing difficulty. It is used to confirm the nature of infection / cancer by appropriate further tests which have a good accuracy in giving final confirmation to the doctor's suspicion. This will enable you to receive a diagnosis and management plan at your appointment.

Fig. Thoracoscope.

### Where will the procedure happen ?

It is an indoor procedure with the patient usually admitted a day prior with the blood tests for anesthetic checkup. It needs the patient to stay indoors for a period of minimum 3 days till the chest tube can be removed. The procedure will last only for 1-2 hours depending upon the reason for the procedure and the job to be done during thoracoscopy. The procedure will need a sedation and local anesthesia. Usually general anesthesia is not needed unless there is an unexpected complication or unusual lung findings which will be discussed with the relatives and the patient during the pre procedure counselling.

### Why do I need a thoracoscopy?

Some of the common reasons why bronchoscopies are done include:

- **Infection** : specific samples from your lungs can help your doctor to find the causes of infections and give you appropriate treatment. Your doctor can also use the thoracoscope to clear some

of the fluid from around the lungs to help improve the breathing.

- **Abnormality in the pleural fluid reports.** There may be an abnormality that may be seen in the pleural fluid reports which needs the evaluation to confirm or exclude the cancer possibility only possible by thoracoscopy. It is the only way to see the findings and confirm the disease to start treatment as soon as possible.

- **An abnormal Chest X-ray / CT SCAN:** there can be wide reasons for a spot in your lung on ct chest seen as narrowing of a breathing passage or a "spot" on your lung that your doctor wants to investigate with the thoracoscope and take small samples to find the cause.

- **Persistent cough,** samples taken during a bronchoscopy and an examination of the breathing passages can sometimes help to determine the cause for a cough that does not respond to usual medication.

- **Noisy breathing** , a bronchoscopy can help to see if narrowing of your breathing passages or erratic movement of your vocal cords (voice box) is causing additional breathing sounds.

Your doctor will explain why you need the bronchoscopy.

### How do I prepare for my Medical / Thoracoscopy?

You will need to provide an up-to-date list of all your medication, allergies and any medical conditions. Your doctor will review this with you including list of routine blood investigation.

Kidney function test.

Liver function test.

Complete blood count and ESR.

Blood clotting profile PTINR.

Blood grouping.

HIV/ HBSAG/ HCV.

Xrays and Ct scan of Chest.

Ultrasound examination of the Chest

It is important to let your doctor know if you are taking any blood thinning medication like Acitrome/ Warfarin/Asprin etc or if you are diabetic / hypertensive / epilepsy / heart condition / blood condition / pregnancy. Other high risk factors.

You can not eat for 4 hours or drink anything for 2 hours before the procedure.

### **What will happen before the procedure?**

The procedure will be explained to you again and you will have the opportunity to ask any questions. You will be asked to sign a consent form. In the room where you will have your thoracoscopy the oxygen levels in you blood and your heart rate is monitored with a probe (loose clip) on you finger. A cannula (tiny plastic tube) is inserted in one of your veins and you may be given medication in the vein to make you feel sleepy. You may be given some oxygen.

Skin preparation will be done and local anesthetic will be given on the chest. If yhere is pain during this please inform the doctor.

### **What happens during a procedure?**

A small cut will be made on the chest fater the anesthetic action has been completed followiung this the scope will be passed into the chest. After thourogh examination of the chest, a powder will be sprayed into the inside of the chest and a tube will be stitched along the cut to allow air to be sucked out to complete the procedure. After the procedure is complete, the patient will be shifted to ICU / post operative area for observation. The patient will be observed indoors for 2-3 days. The tube will be reomved after all the air and small blood clots are completely removed. This would

ideally happen on 2<sup>nd</sup> or 3<sup>rd</sup> day aftet he procedure.

### **Are there any complications / CAN ANYTHING GO WRONG?**

Almost all persons recover completely from the procedure. They may be sleepy or tired for several hours after the procedure. There will be chest pain and minimal bleeding around the drain site. It is extremely safe procedure due to the local anesethetic and mild sedation involved . There have been very rare deaths involved for cardiac and blood conditions due to unexpected events inside the procedure room. These are best managed by keeping the patient in hospital indoor setting for observation. If any questions will be answered by Dr. Vishal / Dr. Deepika during pre /post procedure discussions.

Dr.Vishal and Dr. Deepika are specially skilled with the medical thoracoscopy done to evaluate ill patients regularly visiting at CHEST CARE CLINCI KHARGHAR.