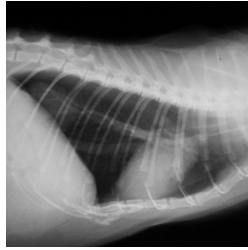


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Lung Lobe Torsion / Lobectomy

- Lung lobectomy is occasionally needed for primary lung tumors, diagnosis of lung masses, and the treatment of lung trauma. Lung trauma is often life threatening.
- Lung lobe torsion is an uncommon, but often life threatening problem, generally occurring after a car accident.
- Some cases of torsion are not radiographically apparent immediately after the accident. Ongoing respiratory issues days after the accident deserve another radiographic look.
- Torsion, resulting in occlusion of the pulmonary vein, can cause pulmonary effusion. This is the most dramatic radiographic sign, and the most life-threatening problem. But, look carefully for lung pathology.
- Pleurocentesis or placement of a chest tube in the presence of pleural effusion may alleviate respiratory distress, allowing for a less urgent referral.
- Lung lobectomy, while not routine, is a rewarding, and generally uncomplicated procedure.
- The presence of multi-trauma is an important consideration, and any other pathology must be considered in the treatment plan.
- Surgery is done daily as needed and on an emergency basis. If it is indicated for non-life threatening disease surgery will generally be done ASAP.
- Hospitalization is typically 2 to 3 nights.
- We will coordinate postoperative aftercare with your hospital. Typical care includes:
 - A 4-5 day postoperative incision check.
 - A 10-12 day suture removal.
- Please send any preoperative laboratory tests and radiographs.
- Uncomplicated and routine cases are \$1500 to \$1800, and emergency referrals in respiratory failure will be representatively more [January 2011]. Ask for an estimate.