WHY DO I NEED IT?

A carotid endartectomy is a surgical procedure to remove the fatty deposits (plaque) that are narrowing the arteries in your neck that supply blood and oxygen to the front part of your brain. If the carotid artery has significant plaque a fragment may travel to the brain causing a blockage and stroke.

It is sometimes appropriate to consider a carotid endartectomy for stoke prevention if a person is having symptoms of a stroke or TIA, with at least a 50% narrowing or if testing shows a high-grade narrowing without symptoms.

YOUR CARE AND RECOVERY ARE OUR HIGHEST PRIORITIES



 \odot

518-562-7557

cvvascular@outlook.com

www.champlainvalleyvascular.com

11 Hammond Lane Plattsburgh, NY 12901



Dr. Theodore S. Pabst, III received his BA from John's Hopkins University in Baltimore, Maryland. He graduated with his MD from Northwestern University in Chicago Illinois. His general surgery residency was completed at the University of Illinois Medical Center, also in Chicago. He attended the University of Arizona Health Science Center in Tucson, where he completed his vascular residency.

CHAMPLAIN VALLEY VASCULAR IS A PRIVATELY OWNED PRACTICE FOR OVER 25 YEARS

CXV

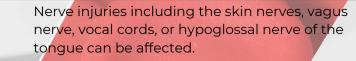
CHAMPLAIN VALLEY VASCULAR

WHAT YOU NEED TO KNOW



FOR STROKE PREVENTION

RISKS & COMPLICATIONS



A small number of people, between 1 and 3 in 100, having a carotid endartectomy may have a stroke during the operation. All possible precautions will be taken to prevent this.

Medical complications such as heart attack, kidney failure, breathing problems, infection, and bleeding may occur.

DISCHARGE INSTRUCTIONS

You should have someone stay with or check on you for the first 24 hours.

The dressing can be removed two days after the surgery. You may shower as usual. No new dressing is needed.

Monitor your blood pressure for a goal blood pressure less than 160mmHG.

No heavy lifting, more than 20 pounds, for one week. No driving for one week.

Notify the office by phone for a headache and/or elevated blood pressure above 160mmHg.

Return to usual activities and work after one week.

LONG TERM CARE

Don't smoke and avoid secondhand smoke.

You should be on long term antiplatelet therapy, Aspirin 81mg, and statin therapy for cholesterol.

Participate in physical activity.

Reach and maintain a healthy weight.

Have your blood sugar tested and under control if you have been diagnosed with diabetes.

Have your blood pressure monitored and treated if elevated.

You will be monitored periodically with a carotid ultrasound and appointment to assess for any recurrence.



THE OPERATION

The surgical procedure is done with general anesthesia, to have you go to sleep and prevent pain.

The surgeon makes a small cut in your neck where your carotid artery is narrowed.

The surgeon opens up the narrowed artery and removes the plaque to make it as smooth and clean as possible.

The artery and incision are then sutured closed. There are no external sutures or clips to be removed.

This surgery usually takes less than two hours.

HOSPITAL COURSE

Usually, it is a one-night stay in the hospital. You may receive additional medication to control your blood pressure.

You will be carefully monitored for any complications that can be seen in the immediate post operative time.

Any discomfort will be controlled with ice packs and possibly oral medications.