



To refer a patient or  
request a consult,  
call (312) 942-6642

**Rush University System for Health**

# Thoracic Surgery Procedures at Rush

## When it comes to thoracic surgery, experience matters.

Performing more than 1,000 lung surgeries each year, thoracic surgeons at Rush are national and international leaders in performing minimally invasive and traditional approaches to diagnose and treat lung cancer, gastroesophageal reflux disease (GERD) and other cancerous and noncancerous disorders of the lungs, chest wall, esophagus and diaphragm.

## Immediate access for you and your patients

We know that when a patient needs thoracic surgery, getting in to see a surgeon quickly is key. Our team is typically able to get patients in for an appointment within 72 hours of your referral to Rush and, in many cases, the same day.

- In-person consultation
- Video visit consultation and second opinions
- Multidisciplinary conferences

## Locations

### Rush University Medical Center

1725 W. Harrison St., Suite 774  
Chicago, IL 60612

### Rush Oak Park Hospital

Medical Office Building  
610 S. Maple Ave., Suite 5500  
Oak Park, IL 60304

### Rush Copley Medical Center

2040 Ogden Ave., Suite 304  
Aurora, IL 60504

### Rush Cancer Care

#### DuPage Medical Group Lisle

430 Warrenville Road, Suite 300  
Lisle, IL 60532

### RUSH Thoracic Surgeons - Skokie

9669 Kenton Ave, Suite 604  
Skokie, IL, 60076

### Silver Cross Hospital

1890 Silver Cross Blvd., Suite 375  
New Lenox, IL 60461

### Franciscan Health Munster

701 Superior Ave., Suite O  
Munster, IN 46312

### Franciscan Health Olympia Fields

3900 W. 203rd St.  
Olympia Fields, IL 60461



## Among the Best in the U.S. for Cancer Care and Lung Surgery

U.S. News & World Report ranked Rush University Medical Center among the best in the nation for cancer care and pulmonology and lung surgery.

Learn more:  
[rush.edu/thoracic-surgery-services](https://rush.edu/thoracic-surgery-services)

## Conditions treated in addition to lung cancers and nodules:

### Esophageal Surgery for Malignant and Benign Diseases

University Thoracic Surgeons at Rush treat a wide variety of esophageal diseases, including: esophageal cancer, paraesophageal or hiatal hernias, diaphragmatic hernias, gastroesophageal reflux disease, Barrett esophagus, achalasia, esophageal diverticulae, esophageal strictures, and esophageal perforations.

**Treatment:** In most cases, minimally-invasive techniques, including video-assisted thoracoscopy (VATS), laparoscopy, and robot-assisted approaches are used. Whether the surgery is for benign or malignant disease, our goal is to get patients back to eating normally as soon and as safely as possible. Most patients are discharged the day after surgery due to the minimally-invasive approaches used.

### Diagnostic and Therapeutic Interventions for Mediastinal and Pleural Abnormalities

Often patients undergo chest imaging that results in more questions than answers. CXRs and CT scans can reveal incidental findings including mediastinal lymphadenopathy or tumors, pleural effusions, pneumothoraces, pleural nodularity, or pleural thickening. These abnormalities can range from asymptomatic and benign to life-threatening.

**Treatment:** University Thoracic Surgeons at Rush have the expertise to perform diagnostic and, when appropriate, therapeutic interventions for mediastinal and pleural abnormalities. Minimally-invasive procedures, including endobronchial ultrasound, mediastinoscopy, VATS and robotic approaches are used to facilitate the quickest recovery possible.

### Minimally Invasive Nuss Procedure for the Treatment of Pectus Excavatum

Pectus excavatum is a congenital chest wall defect that classically presents in teens and young adults as a "sunken in" sternum. Patients can experience chest pain, palpitations, reduced exercise tolerance, and shortness of breath.

**Treatment:** The Minimally-Invasive Nuss Procedure is performed with video-assisted thoracoscopy (VATS). Typically, 2 custom titanium bars are placed under the sternum to move it back into its proper position. The surgery is done through a 2" incision on each side of the chest. Patients typically stay in the hospital for 2 days and have their bars removed 2-3 years after placement.

### VATS Sympathectomy for the Treatment of Hyperhidrosis

Hyperhidrosis is a disorder characterized by excessive sweating in the axillae, palms, and soles. Patients often try a number of non-operative strategies, such as roll-ons, ionophoresis, or Botox injections, without long-term symptomatic relief.

**Treatment:** The video-assisted thoracoscopic (VATS) sympathectomy is a minimally invasive procedure performed through three 5 mm incisions on each side of the chest. The sympathetic chain is identified and divided in the location that corresponds to the patients sweating pattern. Most patients experience immediate relief and are discharged home the same day.

### First Rib Resection for the Treatment of Thoracic Outlet Syndrome

Thoracic outlet syndrome is characterized by compression of the artery, veins, or nerves exiting the thoracic outlet. Patients typically experience numbness, and tingling, and/or pain of their arms when in certain positions. In addition, the blood vessels can be compressed to the point of causing occlusion and clotting.

**Treatment:** Thoracic outlet syndrome is treated by combining physical therapy and surgically resecting the first rib through a 2" incision in the axillae. Patients are typically discharged the next day with relief of their symptoms.

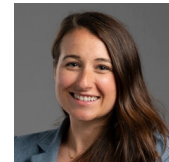
## Our Team



Michael Liptay, MD



Christopher Seder, MD



Gillian Alex, MD



Nicole Geissen, DO



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