

VENTRICULAR SHUNT

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NAME OF PROCEDURE: Ventriculoperitoneal or Ventriculoatrial Shunt Placement or Revision

DESCRIPTION OF THE PROCEDURE: During this surgery, an incision is made on the head in any of several locations (usually just above and behind the ear), and another incision is placed on the abdomen or neck. A shunt tubing is placed into the fluid-filled spaces in the center of the brain to drain cerebrospinal fluid into the abdomen (ventriculoperitoneal) or heart (ventriculoatrial). The incision is then closed with sutures or staples. **The most important goal of the procedure is to keep you safe.** Dr. Vasudevan will discuss the other specific goals of surgery with you. In all cases, we will prioritize your health and safety above all else.

RISKS OF THE PROCEDURE: Bleeding, infection, stroke, seizure, meningitis, and the need for more surgery or treatment in the future. Shunt malfunction is a risk of any shunt surgery and we will closely monitor you for it after surgery; in the vent of malfunction, this almost always requires surgery to correct it. If you have any questions about any of these risks, please feel free to reach out to us!

PRE-OP LABS/APPOINTMENT: Go to Suite 350 at 980 Johnson Ferry Road NE (same building as our office). You will be given a copy of your orders to take with you if they have not already been faxed. You will need these labs drawn at least one week prior to your surgery, preferably two weeks.

7-10 DAYS PRIOR TO SURGERY: Do not take any type of medication that could thin your blood, including ibuprofen, Motrin, Aleve, Aspirin. If you are taking prescription blood thinners such as Warfarin (Coumadin), Eliquis, Xarelto, or Pradaxa, these generally need to be stopped 4 days prior to surgery; please double check this with our staff when you schedule your surgery.

NIGHT BEFORE SURGERY: Nothing to eat or drink after midnight. Please take your normal medications the morning of surgery with a tiny sip of water (except if specifically instructed not to do so).

THINGS TO EXPECT ON THE DAY OF SURGERY: Your surgery will take place at Northside Atlanta Hospital. At your preoperative visit, you will be advised of your arrival time for the morning.

The nurses will check you in. You may or may not have a CT scan of your head to help us plan for intraoperative navigation after you are checked in, depending on Dr. Vasudevan's orders.

You will receive IV antibiotics before, during, and after surgery to help prevent infection.

Surgery typically takes 1-2 hours once we begin. However, it may be even longer until your family can see you due to the time needed for preparation, anesthesia, surgery, and recovery. Dr. Vasudevan will do the procedure as patiently and safely as possible. Our nurses may update your family periodically throughout the procedure. Everyone in operating room is working their hardest for your safety. Your family should not be concerned if surgery takes a little longer than expected or if updates are delayed; it just means we are doing our best for you! Dr. Vasudevan will speak to your family at the conclusion of the procedure.

WHAT TO EXPECT FOR YOUR HOSPITAL STAY:

You will be on our dedicated neuroscience care unit for the first night, where our nurses and staff are experienced in taking care of neurosurgery patients. Uncommonly, you may also have a Foley catheter (bladder catheter) the first night for safety and will typically be removed the next morning.

Dr. Vasudevan firmly believes the best place to recover from surgery is at home. We aim for you to return home as soon as it is safe to do so. On the day after surgery, we expect you to be up and walking and eating a normal diet. The sooner you start to resume normal activities, the sooner you will start to feel better!

Most patients stay in the hospital for 1-2 days, but we will only recommend discharge when you are safe to leave the hospital. Dr. Vasudevan may have you on a muscle relaxant and pain medication to take as needed, and prescriptions for these will be sent to your pharmacy or home with you. You will have specific discharge instructions provided for you that include details about wound care and your follow-up appointments.

POST-OPERATIVELY:

Dr. Vasudevan most commonly places shunts whose drainage setting can be adjusted in the office using a magnetic programmer. We will closely evaluate your symptoms in the post-operative period to ensure that the setting is correct. If there are any concerns, the shunt can be reprogrammed. This will require follow-up appointments and/or CT scans to ensure the shunt is working as intended