

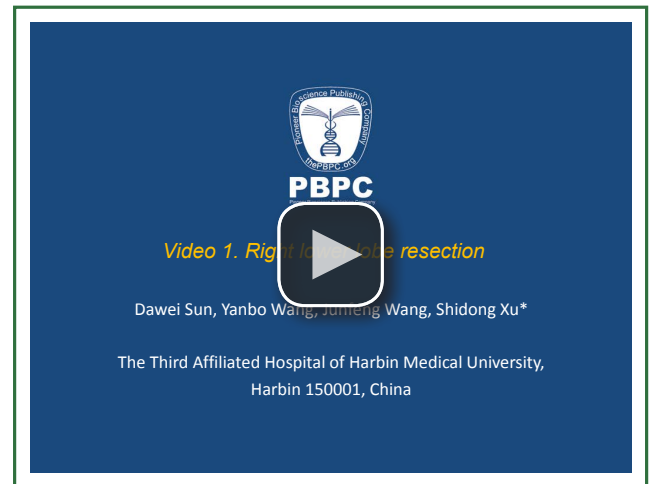
Right lower lobe resection

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This video (Video 1) describes the right lower lobe resection. A 1.5-cm incision was made at the 7th intercostal space along the midaxillary line as the main operation port. A 3.5-cm incision was made at the fourth intercostal space, in which an incision protection sleeve was attached. The operator then explored the thoracic cavity to identify that the lesion was located at the right lower lobe. Open the mediastinal pleura using an electrotome. Dissociate and resect the ligament of the right lower lobe to expose the vein of the right lower lobe, which was further divided and retracted with sutures. Under the Covidien system, a linear stapler and reloads were used to resect the vein of the right lower lobe. The surrounding lymph nodes were dissected. The thinner parts between the middle and lower lobes in the right lung were dissected with an electrotome. However, the thicker parts were divided with an endoscopic linear stapler. Notably, the artery of the right lower lobe was closely attached with the surrounding lymph nodes and therefore was difficult to be dissociated. Using the linear stapler and green reloads, the operator clamped, sutured, and resected the remaining inter-lobe tissues, the bronchus of the right lower lobe, and the artery (root trunk + other arterial branches) of the right lower lobe. Finally, the operator inserted a disposable glove to lift the right lower lobe outside the body. Thus,



Video 1. Right lower lobe resection.

the right lower lobe resection was completed.

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