Our thoracic surgery program provides outstanding expertise and proven results for the most complex and high risk cases of lung, esophageal and pleural malignancies.

Recognized as High Performing for Lung Cancer Surgery.

What Sets Us Apart

- Minimally invasive lung resections including lobectomy, segmentectomy and pneumonectomy
- Latest surgical technologies and procedures such as robotics and 3D Video-Assisted Thoracoscopic Surgery (VATS)
- Dedicated interventional pulmonology service with the region’s only fellowship trained expert working alongside our thoracic surgeons and oncologists
- Robotic bronchoscopy for detection and biopsy of small, difficult-to-reach peripheral nodules with a minimally invasive approach
- Extensive experience with mesothelioma and pleural malignancy management
- Esophageal cancer and complex benign esophageal pathology management
- 3D reconstruction modeling for interactive treatment planning
Services We Offer
Our Thoracic Surgery and Interventional Pulmonology capabilities are uniquely coordinated to provide expert and seamless care from diagnosis through treatment and long-term follow up of lung disease. We offer:

- **Complex airway management** including stents, ablative therapies, tracheal resections and bronchoplastic procedures
- **Advanced diagnostic and therapeutic pulmonary techniques** such as flexible and rigid bronchoscopy, linear and radial EBUS with biopsy and robotic navigational bronchoscopy for peripheral nodule localization and biopsy
- **Minimally invasive resections** including lobectomy, segmentectomy, pneumonectomy, and for mediastinal tumors
- **Complex chest wall resections and reconstructions**
- **Full pulmonary physiologic evaluation** (PFTs, CPET, quantitative lung perfusion scanning, availability of right heart catheterization)
- **Pleural disease management** (ultrasound guided thoracentesis, PleurX catheter placement, pleuroscopy, thoracoscopy, advanced pleurodesis techniques)
- **Mesothelioma diagnosis and management** including lung sparing surgical resection, photodynamic therapy (PDT) and chemotherapy/radiotherapy for advanced disease
- **Minimally invasive management of malignant pericardial diseases**
- **Endobronchial valve placement** for severe emphysema

Other Advanced Diagnostic Services
- CT, CT angiography, MRI (3Tesla), PET, and lymphangiography
- Interventional radiology expertise
- Dedicated pathology support with real time cytologic FNA biopsy ability including rapid on-site evaluation (ROSE)

Clinical Support Services
- Prehabilitation program for all surgical patients to strengthen respiratory muscles and improve cardiopulmonary capacity prior to resection.
- Gamma Knife capability for brain metastases
- Stereotactic Body Radiotherapy (SBRT)
- Brachytherapy
- Neurosurgery
- Plastic and reconstructive surgery
- Advanced genomic testing with OmniSeq ComprehensiveSM
- Clinical trials offering latest advances in immunotherapy, targeted therapy and novel agents

The Roswell Park Advantage

- Roswell Park Comprehensive Cancer Center was among the first to be designated by the National Cancer Institute (NCI) as a comprehensive cancer center — one of a select group in the nation — and the only such center in upstate New York.
- Multimodality thoracic conferences and tumor board discussions held three times/week, and include radiology, pathology, pulmonary medicine, thoracic surgery and medical and radiation oncology.
- **State-of-the-art inpatient facilities** with 17-bed Intermediate Care Unit, which employs universal bed concept. Coverage includes Intensivist team and nurse-to-patient ratio of 1:3 to 1:4, 24 hours/day, 7 days/week. Nursing staff of the Intermediate Care Unit ranked in the 92nd percentile of Press Ganey surveys for overall nursing care.
- **Extensive support services** include 24-hour respiratory therapy, nutrition support, speech and swallow evaluation and therapy, dedicated social service team, and palliative care.
- **Enrollment in national quality databases** including NSQIP and STS GTDB.
Lung Cancer Screening

Our screening program diagnoses 70% of cancers at stage 0, I, and II, compared to current trends that detect 70% of lung cancers in advanced stages. Screening involves a focused medical history, physical examination and a non-contrast helical Low Dose CT (LDCT).

WHO SHOULD BE SCREENED?

- Patients with a history of cancer of the lung, esophagus, head or neck, or
- Patients with the following three factors:
  - Age 55 to 79
  - At least 30 pack/years of smoking
  - Actively smoked within last 15 years

Esophageal Care

Our thoracic surgical team offers high-volume experience and skill with esophageal procedures:

- Minimally invasive esophagectomy
- Complex open esophageal resections, such as salvage esophagectomy, colonic pull through, and supercharged jejunal interpositions
- Complex benign esophageal surgery, such as re-do fundoplications

Facilities > 100 lobectomies

- **VATS Lobectomies**
- **Open Lobectomies**

- Roswell Park Comprehensive Cancer Center: 90% VATS, 10% Open
- Memorial Sloan Kettering: 66% VATS, 34% Open
- NY Presbyterian Weill Cornell: 75% VATS, 25% Open
- LJ Jewish Medical Center: 92% VATS, 8% Open
- NYU Winthrop Hospital: 99% VATS, 1% Open
- NYU Medical Center: 85% VATS, 15% Open
We provide coverage for consultation and treatment of patients at other local facilities: Buffalo General Medical Center, Buffalo VA Medical Center, Erie County Medical Center, Mercy Hospital of Buffalo, Millard Fillmore Suburban Hospital, Mount St. Mary’s Hospital, Niagara Falls Memorial Medical Center, and Sisters of Charity Hospital.