Objective(s): This presentation describes TEVAR explant after for a pseudo-coarctation type physiology after discovery of a chronically collapsed TEVAR. The indication for the TEVAR was for a traumatic aortic tear in a young male. The exposure involves a left thoracotomy, explant of endograft and descending thoracic aortic repair with dacron graft. Important to note is the extent of the arteriotomy which must be extended proximally and distally to the endograft for successful explantation. The thoracic endograft was wrapped with the aneurysm sac as a protective layer to resist infection.