



Post-Operative Instructions: General Perineal Care

Summary:

Thank you for trusting us with the care of your pet the following are general guidelines for the post-operative care of patients undergoing perineal surgery (episioplasty, anal saccullectomy, rectal polyp, perineal-urethrostomy, perineal hernia, scrotal ablation, tail amputation). With any perineal surgery, it is of utmost importance to maintain strict adherence to the e-collar application for a minimum of 2 weeks.

E-collar STRICT for 2 weeks!

Recovery Instructions:

1. Activity:
 - a. In your home, it is ok to allow your pet free range of the house while you are present
 - b. We still recommend small room/crate confinement when you are not there to avoid destructive or explosive behavior (doorbell/postal service)
 - c. Furniture/beds are ok to allow jumping onto and off of
 - d. Stairs are ok to allow free access and unassisted navigation
 - e. *There should be no off leash exercise of any kind*
 - f. In your yard, your pet can be off-leash if a chaperone is present
 - g. No rough-housing or play with other dogs
 - h. We recommend a 2-4 time per day of walks – we understand that working schedules might not allow this, but ideally 2-4 times of 35-45 minutes of slow walking that encourages regular bowel movements.
 - i. During leash walks, many dogs can have the e-collar removed during the time of the walk and reapplied immediately after the walks.
 - j. Modifications to these instructions:
2. Perineal Care:
 - a. We recommend that you purchase some aloe baby wipes from a pharmacy

- b. 2-4 times daily, we recommend gently wiping down, away from the anus, any built up secretions, debris or fecal remnants that might be accumulating. Careful to wipe gently. If you are concerned at all by what you are seeing, or are unable to perform this important task, please notify us immediately.
 - c. E-collar – it is essential to prevent self-mutilation to maintain the application of the e-collar at all times (exceptions for walks – see above) if your pet does mutilate the surgical site, please notify us immediately – it is likely to require revision surgery on an urgent basis.
 - d. Modifications to these instructions:
- 3. Medications
 - a. Antibiotics – will be sent depending on the surgery for 5-14days
 - b. NSAID's – are exceptionally helpful – and in general are our go-to group of medications to relieve soreness encountered during early recovery. We will make recommendations
 - c. Tramadol (synthetic narcotic) – generally helpful for the first 2-5days post-op.
 - d. Fiber/Stool Softeners – will sometimes be prescribed if constipation is a concern.
 - e. Gabapentin – this is patient dependent.
 - f. Acepromazine/Trazadone: sedatives – this is patient dependent, and some are still helped by their administration
 - g. Modifications to these instructions:
- 4. Food
 - a. Consider a reduction of 20% of regular diet while rehabilitating
 - b. Generally recommended added fiber to the diet – approx. 1 tablespoon of canned pumpkin per 20 pounds of body weight
- 5. Recovery
 - a. Generally you should see a very linear improvement (eg. Each new day is better then the previous) from this recheck. Minor set-backs are not common, but it straining to defecate or urinate and/or small amounts of blood in stool or urine can be seen for up to one week post-operatively
 - b. Any type of set-back beyond this, especially leading to wound drainage, overt signs of discharge or wound complications should be reported to us urgently. Please call.
 - c. Modifications to these instructions:
- 6. Recheck
 - a. We will need to see you in 2 weeks for what we hope to be the final evaluation!
- 7. Questions
 - a. Our foremost interest is your pet's rapid and complete recovery: Do not hesitate to call or email any questions or concerns.