

Hip dislocation (craniodorsal position)—Non-surgical treatment with Ehmer Sling



One of the most useful and efficient ways to convey information to you about your pet is via the written word. We carefully craft these notes to give you helpful information and accurate expectations around your pet's surgical experience.

Please read this. *Please save it and read it during each stage of the recovery process.* Surprises make for a stressful time for everyone.

Photo and video examples may be found on our website: www.directvetsurg.com in the Pet Owner Portal under "DVS Resources".

Your pet has had a (craniodorsal) dislocation of the hip joint that was manually reduced back into the correct location. The tape sling around the leg is used to prevent the hip from re-dislocating; the goal is to keep the hip flexed and the thigh pulled away from the body. This is a very challenging position to keep the leg in and sling management will be difficult and frustrating for all involved (x 2-3wks) If enough of the internal support structures are undamaged, this conservative approach can allow the hip to heal. *If there is not enough internal support left, the hip can dislocate again and need surgical stabilization.*

GENERAL INFORMATION

Please keep a note of your questions as you and your pet progress thru recovery and address them to your primary care veterinary team. ****Use your checklist at the end of these notes to make these check-ins complete.****

First few days

MONITORING

Please keep your pet in a comfortable, safe, indoor location without free access to stairs for the next 24 hours as he/she recovers from anesthesia and surgery. ****NO ACCESS TO SLIPPERY FLOORS****

Your pet may be groggy for the next few days. He or she may whine or appear more anxious than usual; this may indicate pain/discomfort or side-effects of the medications.

Please call your primary care veterinary team for assistance with medication adjustments or return for exam and additional pain medications as needed.

Monitor appetite and attitude. If both do not steadily improve over the next 2-3 days, please call your primary care veterinary team or return for progress evaluation and problem-solving.

You can expect your pet to have a bowel movement within 5 days. Some animals take longer than others depending on when they last ate prior to surgery and when they started eating after surgery. It may be abnormal in color and consistency for 2-3 days. If you have any concerns, please speak with your primary care veterinary team.

Please confirm that your pet has urinated within 24 hours of returning home. If he/she does not, or you notice any problems related to urination, please speak with your primary care veterinary team.

Closely supervise your pet's movements over the first 3-4 days when s/he will be groggy from anesthetics and pain medications. Do not allow access to dangerous situations/locations (i.e. stairs, furniture, small children, other pets). Limit activities to necessary events only (on leash/out to go to the bathroom; access to food/water.)

MEDICATIONS

It is likely that you have been prescribed one or more medications (given by mouth) for your pet over the first 2-3wks of recovery. During the discharge appointment or shortly thereafter, please make sure you understand:

- what each medication is being used to treat,
- what side-effects may develop, and
- whether or not the medication should be refilled and continued.

Week 1-2

Patients will come home with a sling around the leg to keep the hip flexed and the thigh hiked away from the body for 2-3 weeks. This will protect the joint. The patient will have to walk on 3 legs during this time. Please prevent access to any dangerous situations– block off stairs, do not place/allow up on furniture, leash at all times when outside.

Check the edges of the tape daily for signs of pressure sores, slippage, or soiling. In male dogs, the area around the prepuce and groin is often sore; **carefully watch this area**. Please see your veterinarian with any problems.

PROGRESS EXAMS

Please return to your primary care clinic in 7, 14 and 21 days for a progress exams. The hip will be checked for stability and the sling evaluated/adjusted/removed.

If you notice a sudden deterioration in leg use at any time after the procedure, please see your veterinarian for exam.

Glucosamine/chondroitin supplements (“chondroprotectants”) may have some beneficial effects in patients with previous orthopedic injury, but this has not been clearly

established. High-dose (medicinal dose) fish oil may improve comfort in arthritic joints longterm. You and your veterinarian should discuss whether or not these products would be helpful for your pet.

DIET

The **most** beneficial and **least** expensive treatment for arthritis and joint health (and general health) over the lifetime of your pet is maintaining your pet on the lean/thin side of normal his/her whole life. Any orthopedic condition can progress with arthritis over time due to excessive, wear & tear; carrying less body weight will relieve some of this stress from the joints. Good parameters to monitor body condition are:

- 1) you should be able to feel the ribs and pelvic bones, but not see them;
- 2) your pet should have an "hour glass" figure when viewed from above looking down;
- 3) your pet should have a tucked-up belly when viewed from the side.

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RESTRICTIONS

The Help 'em Up harness (see company website; or similar) is a very useful tool that your dog can wear during the restricted period that allows you to have a quick "handle" to grasp by the shoulders and/or by the rump to assist your pet to rise and lie down, climb/descend stairs, save from a slippery floor, etc. The rear portion of this harness can be fitted over the tape sling as needed to assist with walking.

Restrict your pet from any rigorous activity for 12 weeks. No running, jumping, playing. For dogs, short, leashed walks around the yard to urinate/defecate are fine. Walking around one level of the house is fine. Prevent all pets from jumping up and down from furniture, etc. A bad landing or an awkward take-off can result in serious repercussions.

Confine your pet, when unattended, to one level/section of the house on carpeted floors or crate confine. Rugs can be used to reduce the risk of slipping on slippery surfaces. Restrict access to stairs when your pet is unattended (baby gates, etc.) Use caution and direct supervision on stairs (up and down) with a hand on the collar and a safety strap/leash under the belly to prevent falls. Or carry your pet if you are able; do not allow the rear legs to spread apart as you pick up and carry your pet.

Please always use a short (6 ft) leash when taking your pet outside to urinate/defecate during this restriction period. Use a belly band/sling/strap for safety when walking across slippery floors & icy sidewalks to prevent falling

If your pet is not using the limb with every step after sling removal, or if you notice a sudden deterioration, please call your veterinarian for advice.

While it is not unusual for brief episodes of discomfort over 2-3 months of healing, limping that continues for more than 24 hours should be examined. X-rays or other tests may be needed to diagnose significant problems.

PHYSICAL THERAPY REGIMEN

Our lives are often very busy, so if you must err, err on the "do less" side of these instructions. Less physical therapy will result in a slower return to function, but more aggressive physical therapy by a non-professional too early may result in failure of the implants and surgical repair. Cats (and some dogs) often resist physical therapy dramatically; avoid any activity that results in major uncooperative behavior.

Studies have shown that a formal PT program can decrease post-operative recovery time. Please let us or your veterinarian know if you are interested in a professional physical therapy referral in the Twin Cities.

Week 1: Apply warm packs (wrapped in thin cloth) to the hip area twice daily for 10-15 minutes. A sock with dry white rice (microwave for 10 seconds at a time until comfortably warm when placed on your own lower arm for 5min) work well for this. Continue 2wks.

Week 4: Range of Motion Exercise-- Have your pet lie on his/her good side. Apply a warm compress to hip area. Grip the foot with one hand and slowly and gently push the foot up into flexion of all joints; hold for 5 seconds. Slowly pull the foot and push the leg down and back into full extension of all joints; hold for 5 seconds. Repeat this motion 15-20 times twice daily. This exercise should not be performed to the point of pain or Resentment. Do not allow the legs to spread apart as you do this exercise. Continue 4 weeks.

Month 1-2 postop

PHYSICAL THERAPY REGIMEN

Week 6: Active exercise (for dogs) - Place your pet on a short leash and have him/her walk at your side. Walk outside on even/solid footing for 10 minutes twice daily. Continue 4 weeks.

Long-term lifestyle

After the hip is healed, there are no restrictions on activities for your pet. A gradual return to full function should occur, to allow for a smooth return of muscle function and strength following the restricted period.

There may be a slightly increased risk of hip dislocation later in life. It is advised to avoid vigorous jumping activities, like catching Frisbee, etc. Please have your veterinarian

evaluate any lameness or pain you notice associated with the operated leg.

Checklist:

HOME MONITORING AND PROGRESS CHECK-IN WITH VETERINARY TEAM

- Pet attitude and appetite—Are these improving daily? What are your observations? What are your specific concerns?
- Pet mobility—Is this improving daily? What are your observations? What are your specific concerns?
- Incision health—Is redness and swelling going away? Is there discharge or moisture? (Photos taken close-up and at different angles are helpful for your primary care veterinary team,)
- Pet pain level—What are your observations? What are your specific concerns?
- Other

Based on your own experience through this, we welcome and encourage suggestions to this information that may help future patients and their people. Pay it forward! (directvetsurg@gmail.com)

--The DVS Crew