

Hip dislocation stabilization



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.

Your pet has had a dislocation of the hip joint that was repaired with a synthetic suture. This implant is surgically attached to the bones, and substitute for the major ligament and joint capsule that once held the head of the femur in the hip socket. It will provide stability until the tissues supporting the joint heal and regain strength. Healing time is required before the joint is strong enough to accept normal activities. The majority of patients will have their implants for their entire life, and do not have long term activity restrictions.

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 postop

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.

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.)

Please look at the incision when you get home; knowing what "normal" looks like is helpful later when trying to understand if the incision is healing abnormally. Photos are helpful for you and us, when communicating from a distance.

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.

BANDAGE CARE (IF PRESENT)

A clear, plastic bandaid may have been applied to the incision (Tegaderm). This will protect the incision from infection from the environment and a wayward pet tongue! It is useful for 2-3 days. You may remove it like a "bandaid" at any time.

Week 1-2 postop

MONITORING

Please look at the incision twice daily. It should be dry, slightly red along the margins, slightly swollen/thick on the edges with a light crust down the center. Over several days, it should lose redness and swelling.

Problems to call your veterinarian about:

- gapping (the edges should be exactly touching)
- ongoing or new discharge (other than small amount of crusting)
- swelling (other than slightly raised skin near edges).

Some bruising is normal and will resolve in 5-7 days.

The occasional patient will have more extensive bruising and/or a puffy ankle on day 2-3. If this develops, please let your primary care veterinarian know; a visit or sending photos will help them characterize the issue and decide on a course of action. The vast majority of the time, this is a transient issue that will follow a typical 5-7 day course resolving.

Do not allow your pet to lick or chew the incision. Pets tend to want to lick early in the healing period and scratch later in the healing period; this can compromise the incision and predispose to infection. If necessary, please prevent access to the incision by using creative clothing options (ex. backward long-sleeved T-shirt worn as “pants”), an E-collar or other devices, if you must leave your pet unattended. See www.directvetsurg.com, Pet Owner portal → Pet Links and DVS Resources

Some patients will come home with an Ehmer Sling (pronounced “ee-murr”) for the first 2 weeks after surgery. This is an extra precaution to protect the joint. This bandaging technique is designed to keep the leg flexed up and the hip held snug. It can be difficult to maintain in some patients, especially male dogs. Check the edges of the Ehmer sling daily for signs of pressure sores, slippage, or soiling. Please see your veterinarian if there are any problems.

TEST PENDING

If there were any samples removed for testing, they will be submitted and results usually will be available in 5-7 days. Your primary care team will contact you with test results and make any treatment changes as needed.

PROGRESS EXAMS

Please return to your primary care clinic in 10-14 days for a progress exam. Skin healing will be evaluated, sutures (if present) will be removed, use of the limb will be assessed and any questions you have will be addressed. (Alternatively, you can schedule a remote progress exam to include a photo of the incision and a videoclip of your pet walking around the room. Include a brief summary for the veterinary team and any questions you have.)

Your pet should start touching his/her toe down within the first 2 weeks. Thereafter, leg use should steadily improve to 90% normal at 6-8 weeks. If you notice a sudden deterioration in leg use at any time after surgery, please see your veterinarian for exam.

Please return for postoperative x-rays in 8wks to evaluate healing and hip stability. It may be beneficial to have some oral tranquilizer/sedatives to use before your visit, since quality x-rays require careful patient positioning (and cooperation). Please discuss with your primary care veterinary team at least a week before your scheduled x-ray visit.

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.

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.

RESTRICTIONS

For the first 1-2 weeks, your pet may need assistance when walking; use a sling under his/her belly or under each rearleg (like a rock climbing harness) to support his/her weight. Continue this protective measure until he/she is very strong on all legs.

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 by the rump to assist your pet to rise and lie down, climb/descend stairs, save from a slippery floor, etc.

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.

Limited, supervised access to stairs is recommended for 8 weeks. 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.

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 by 2 weeks, if you notice a sudden deterioration, or if your pet stops using the leg at any time after surgery, 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.

If your pet’s personality-type challenges these restrictions, discuss options for medicinal-assistance for your pet to make restrictions easier to manage (i.e. Trazadone, Gabapentin, Tramadol, other).

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 ice packs (wrapped in thin cloth) to the incision area twice daily for 10-15 minutes. Baggies of frozen peas work well for this, or make an ice pack by freezing 2 parts isopropyl alcohol to one part water in a ziplock bag. Continue 5 days. (You may also use ice after the exercises below if your pet seems uncomfortable.)

Week 2: Range of Motion Exercise-- Have your pet lie on his/her good side. Apply a warm compress to hip/incision 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. 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.

Swimming is wonderful rehabilitation exercise (for some dogs) when performed correctly. You may allow controlled swimming after week 6. Controlled swimming requires that your pet not jump or leap into the water; walking into the water until it is deep enough to swim is required. Throwing balls to fetch often results in sudden jumping and lunging, which can cause serious problems in the healing phase. Do not over extend your pet; start with short excursions (5 minutes) and increase duration and frequency gradually.

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 luxation 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