

Urethral prolapse removal



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 dog has had a prolapsed (i.e. everted) portion of the penile urethral removed. This involved removing a portion of the urethra and using very small stitches to reconnect the urethral tube. The tip of the penis is a very vascular area and postoperative bleeding is an expected occurrence; quiet, restricted activity is necessary to keep blood pressures low and allow the site to seal.

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. Our surgery group will contact your primary care team on **Day 2** (after their phone follow-up with you) and **Day 14** (after your recheck visit with them) to check in on your pet's progress and see if you have had any concerns or questions. This method will maintain continuity in care and an accurate patient medical record.

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, 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. Limit activities to necessary events only (on leash/out to go to the bathroom; access to food/water.)

MONITOR FOR BLEEDING

You can expect blood at the end of urination; at times it can be a spurt or short stream of blood. Ideally this stops after 5min of occasional bloody drips.

You can expect some blood dripping if he gets excited or runs around; higher blood pressure will create bleeding. Ideally this stops after 5min of occasional bloody drips.

If bleeding is a steady drip for 5-10min, try quietly sitting with him and apply firm pressure to the prepuce over an icepack wrapped in light cloth for 10min.

If after trying this conservative technique 1-2 times the bleeding persists as a steady drip, seek veterinary attention. Veterinary care may require sedation, direct compression to the surgery site and/or topical clotting powders. Rarely is it indicated for additional surgical attention.

If bleeding has been frequent during healing period (daily), it may be a good idea to have his blood level checked for anemia. Rarely is it indicated to actively treat any anemia, but staying on top of his condition is helpful for decision making.

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 postop

Do not allow your pet to lick his prepuce/penis. Pets tend to want to lick early in the healing period; this can compromise the incision and promote excessive bleeding. If necessary, please prevent access to the incision by using creative clothing options (ex. boxer shorts; 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

Closely supervise your pet’s movements over the first 3-4 days when s/he will be groggy from anesthetics and pain medications. Limit activities to necessary events only (on leash/out to go to the bathroom; access to food/water.)

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 7-10 days for a progress exam. Urethral healing will be evaluated, sutures (if present) may be removed and any questions you have will be addressed.

RESTRICTIONS

Avoid any rigorous activity for 4 weeks; no running, jumping, playing or anything that feels like “exercise”. 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 excess bleeding.

Minimal, supervised/assisted access to stairs is advised during restricted period. Use baby gates, etc. to prevent free access to stairs during this restricted period. When navigating stairs (up and down), have a hand/leash on collar/harness and a leash/safety-strap under the belly to prevent slips, stumbles, falls.

Please use a short (~6ft), hand-held leash when outside to urinate/defecate. Confine your pet to a small area/room/crate when unattended. Please do not allow your pet to run, jump or play during this restriction period.

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).

Long-term lifestyle

Excessive scarring or "stricture" may develop many months after surgery and require further evaluation and treatment. If you notice smaller than normal pools of urine, a weak urine stream or excessive straining to urinate, please have your pet evaluated by your primary care veterinarian.

It is uncommon but possible for more of the penile urethra to prolapse in the future. If new swelling or bleeding is noted months to years after surgery, please have your pet evaluated by your primary care veterinarian.

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