



Abdominal Surgery Aftercare Information Sheet

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Patient: {PATIENT FULL NAME}

Date: January 31, 2022

Presenting Complaint:

Diagnostics:

Diagnosis:

Surgery: {NAME} had an exploratory laparotomy performed. At surgery we found _____. {NAME} did well under anesthesia and recovered without incident.

Exercise: Limit activity for the next 2 weeks. Short leash walks are permitted on a leash. No jumping, running, or rough-housing. Do not leave {NAME} off the leash unattended.

Medications:

1. **Rimadyl (___mg):** Give 1 tablet by mouth every 12 hours with food. Please watch for signs of gastrointestinal upset: loss of appetite, vomiting, diarrhea, and black stools. If these signs occur your pet could be sensitive to these medications and they should be discontinued and a veterinarian contacted. This medication was given in hospital at _____.
2. **Gabapentin (___ mg):** Give 1 capsule by mouth every 8-12 hours as needed for pain relief. This medication may cause sedation. This medication was given in hospital at _____.

Diet: Normal

Incision: Please check the incision for signs of infection: redness, swelling, pain or discharge. Do not allow {NAME} to lick at the incision. An E-collar or t-shirt should be used to keep {NAME} from licking at the incision.

Suture Removal: The sutures can be removed in 10-14 days from the day of surgery. Please make an appointment with Dr. {RDVM} in that time frame.

Biopsy Results: A biopsy of the ____ has been submitted to the lab for analysis. These results should be available in 5-7 business days. Dr. {RDVM} will call you with these results once they are available. These results may lead to further recommendations for {NAME}'s care.

Recommendations: With any incision into the GI tract, there is a potential for leakage. This typically occurs 3-5 days after surgery. The most common clinical signs associated with this complication are vomiting, inappetence, lethargy, and abdominal pain. If you notice any of these signs, please have rechecked. GI leakage is a life threatening complication that would necessitate a second surgery.

Clinician: Joshua Bruce, DVM, DACVS-SA

Thank you for allowing us to care for {NAME}!