



Brachycephalic Airway Surgery Aftercare Information Sheet

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Patient: {PATIENT FULL NAME}

Date: January 31, 2022

Presenting Complaint: Increased Respiratory Noise, Stenotic Nares

Physical exam findings: On physical exam, {NAME} was bright and alert. They had moderately stenotic nares, and inspiratory stertor.

Diagnostics: Preoperative bloodwork was unremarkable. Thoracic radiographs did not reveal any evidence of aspiration pneumonia. Sedated laryngeal examination revealed a moderately elongated soft palate and everted laryngeal saccules.

Diagnosis: Brachycephalic Airway Obstruction Syndrome

Surgery: {NAME} had their stenotic nares widened, as well as a soft palate resection and everted laryngeal saccule excision performed. {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 ____.

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. Also, do not allow {NAME} to scratch at the incisions.

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.

Recommendations: Please closely monitor {NAME} for any respiratory distress (increased respiratory rate/effort, blue mucous membranes, coughing, pale or gray gums, vomiting, not eating, lethargy, etc.). {NAME} needs to have limited access to hot temperatures for the next 2 weeks. A fan can also be used as it helps the air circulate. If you become concerned with {NAME}'s progress, please call anytime.

Clinician: Joshua Bruce, DVM, DACVS-SA

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