



## Surgical Release Form for Diaphragmatic Hernia

Owner: \_\_\_\_\_ Patient: \_\_\_\_\_ Date: \_\_\_\_\_

Referring Hospital: \_\_\_\_\_ Veterinarian: \_\_\_\_\_

Surgery to be performed: \_\_\_\_\_

I have discussed the aforementioned surgery and the importance of pre-surgical blood testing with the referring veterinarian. I understand that there are risks and hazards involved with the recommended surgical procedure, including anesthetic risk. I realized that no guaranty or warranty can ethically or professionally be made regarding the results or cure.

I authorize the surgeons and/or associates (Drs. Harper and Franklin) of Texas Specialty Veterinary Services, PLLC to perform surgery on my pet. I am also aware that Dr. Harper is board certified in large animal surgery only but have retrained in small animal surgery as well, therefore, offers their services to small animal clients and their animals. I have also been made aware that Dr. Franklin is small animal surgery residency trained, but has not become board certified at this time. At this time Dr. Franklin's title is Practice Limited to Surgery. I understand that there are other board-certified surgeons in small animal available in the area.

Your pet has been diagnosed with a diaphragmatic hernia. In most cases, these are the result of some sort of trauma. Sometimes, like in Weimaraners, the hernia is a congenital defect that was present since birth. Rarely, the hernia is present within the pericardial sac surrounding the heart. Since the large thin muscle that makes up the diaphragm is not visible on plain radiographs (if they were taken at the time) you cannot diagnose the underlying injury until organs from the abdomen inadvertently work their way into the chest cavity and interfere with respirations.

Acute hernias tend to be less complicated than the others as there is little time for adhesions to form between the organs and the lungs. In chronic cases, the organs not only adhere (stick) to the lungs in some cases, but the original tear tries to heal and sometimes we have to enlarge the hole in the diaphragm in order to be able to safely return the organs to the abdomen. Additionally, it is not uncommon for there to be inadvertent damage to the lungs that could require additional treatment at additional cost. Sometimes the lungs can be repaired with small sutures or glue, and sometimes the damage is so severe that the lung has to be removed. This requires extending the abdominal incision into the chest by cutting across the sternum.

There are some patients where the hernia is a congenital defect from birth. These present additional unique challenges to chronic hernias. Sometimes there is a portion of the diaphragm missing and we need to utilize expensive marlex mesh to build a new diaphragm. Since many times the stomach, spleen, pancreas, liver, and intestines are all in the chest cavity, the abdominal wall shrinks down making it sometimes impossible to return all the organs and safely close the incision. In these cases we occasionally have to wait for the muscle to stretch enough to allow complete closure at a second surgery. Although things are very taught, we usually are able to get things back where they belong and close the incision in one surgery. Chest tubes are placed after surgery in chronic cases and must be cared for in the hospital and have 24 hour supervision. If your pet chews on a chest tube or uses a back leg to pull it partially out without anyone to intervene, life threatening pneumothorax can occur.

The undersigned owner or authorized agent of admitted patient \_\_\_\_\_ hereby authorize the admitting veterinarian (and his/her designated associates or assistants) to administer such treatment as is necessary to perform the below-mentioned procedure. The nature of the procedure(s) has been explained to me and no guarantee has been made as to results or cure. I understand that there may be risk involved in these procedures.

I consent to the administration of such anesthetics or tranquilizers as are necessary.

Anesthetic Risks: (Although every effort is made to make anesthesia as safe as possible including vital sign monitoring and use of the most up to date anesthetic agents and equipment, I understand that anesthesia carries inherent risks) The incidence of complications from anesthesia are extremely low and we do not anticipate any complications in your pet but on rare occasions the following can occur:

1. Allergic reaction to the anesthetic agents
2. Heart rhythm abnormalities
3. Untoward reactions to the gas including drops in blood pressure or respiratory difficulties
4. Just like in humans, on very rare occasions, general anesthesia can result in death.

Procedure: Diaphragmatic Hernia Repair, Possible Thoracotomy and Lung Lobectomy or Damaged Lung Repair

Surgical Risks:

1. Dehiscence (suture breakdown) of the repair resulting in a recurrence of the hernia
2. Allergic reaction to marlex mesh (if utilized)
3. Infection in the abdomen or thorax (peritonitis)
4. Blood clots can break loose and cause strokes to heart, lungs or brain.
5. Hyperperfusion injury to lungs or reperfusion to the entrapped organs can occur in chronic cases that leads to acute death within 72 hours after surgery
6. Sometimes a second surgery is needed if lung damage is not apparent during first procedure

7. If your pet has a hernia into the pericardial sac, sometimes there are additional defects of the body wall that need repair.
8. In very rare occasions, with chronic cases, the pressure in the abdomen right after surgery can cause the stomach to push through into the esophagus and re-herniate into the chest cavity in a different manner than the first time.

Texas Specialty Veterinary Services (TSVS) occasionally features patients on its Facebook page, YouTube channel, other social media sites, and in publications (print or online). With your permission, we may share your pet's picture, video or story. We may mention your pet by name, but never the owner's name. TSVS would be grateful that you'll be helping other pets by educating pet owners, veterinary technicians, and veterinarians.

Please initial to allow TSVS to mention your pet \_\_\_\_\_.

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**Date**

**Pet Owner/Agent Signature**

**Phone I Can Be Reached At Today**