



Surgical Release Form for Perineal 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 perineal hernia that requires surgical repair. Perineal hernias result from weakening of the perineal muscles and external anal sphincter. The exact cause is unknown but any condition that causes chronic straining (constipation and an enlarged prostate common in dogs that are not neutered), hormonal imbalances, and degenerative changes to the levator ani musculature are thought to contribute. The objectives of the surgery are to replace the contents of the hernial sac into the abdomen and reconstruct the pelvic diaphragm. Many different surgical techniques are available to the surgeon but using the obturator muscle to close the defect is the most commonly utilized procedure due as it is associated with fewer problems postoperatively and a lower recurrence rate. On occasion, if your pet has very weak muscles, a synthetic Marlex mesh is used to rebuild the pelvic diaphragm. If your pet is not neutered, neutering is necessary to allow proper healing and prevent recurrence. Although every effort is made to prevent or minimize complications, any surgery near the rectum has a higher complication rate than other areas of the body. Besides the obvious issue of fecal contamination that can lead to infection, pets frequently lick or scoot after surgery which can irritate the incision or prematurely tear out any sutures. Additionally, bowel movements can

be affected due to post-operative discomfort and many times your veterinarian may prescribe stool softeners for a short time until the surgical wound is healed.

The urethra (tube that carries urine from the bladder) is very close to the surgical site and every effort is made to prevent inadvertent sutures from entrapping this structure including placing a urinary catheter in your pet before surgery. Additionally, the nerves that control the rectum are frequently involved in the hernia and all attempts are made to protect these nerves. Your pet can function adequately with loss of nerves on only one side of the rectum, but if your pet has bilateral hernias, there is the possibility of permanent nerve injury to the rectum. Although most surgeons will repair both sides at the same time if bilateral hernias are present, sometimes we will stage the procedure 4-6 weeks apart.

The biggest complication of perineal hernia repair is recurrence. If your pet has a recurrence, there are several salvage procedures available to the surgeon. Remember that neutering your male pet at a young age dramatically reduces the incidence of perineal hernias.

In some cases, your pet's bladder may "retroflex" into the hernial sac causing a large swelling that may get bigger and smaller as the bladder empties and fills. Sometimes, the neck of the bladder can bend in a way that your pet can no longer urinate and this is a surgical emergency. If your pet's bladder is involved in the hernia, it is very important to do an additional surgical procedure called a cystopexy, where the bladder is anchored inside the abdomen by one of two techniques depending upon the surgeon's preference. Failure to perform this procedure increases the risk of recurrence many fold. Unfortunately, this adds expense and anesthetic time but is critical to a successful outcome.

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 is 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

Procedure: Unilateral or Bilateral Perineal Hernia Repair, Castration, Possible Cystopexy or Vas Deferens Pexy (if bladder is involved), Epidural Anesthesia

Major Surgical Risks:

1. Infection, usually seen in the first few days
2. Recurrence of hernia necessitating additional salvage procedures at additional cost

3. Rectal incontinence (inability to control bowel movements) which is extremely rare
4. Straining to urinate suggesting iatrogenic trauma to the urethra by a suture
5. Rectal prolapse (more common in bilateral repairs)
6. Opposite side could herniate in the future if weakened and need a second surgery
7. Urinary incontinence can occur if your pet's bladder retroflexed into the hernia before surgery
8. Epidural complications are extremely rare but include transient (temporary) urinary retention, allergic reaction, itching at site of injection, infection and transient rear leg weakness for 1-2 days.

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 _____

Date	Pet Owner/Agent Signature	Phone I Can Be Reached At Today
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