

Discharge Instructions – Femur Fracture Repair (Dog)

Surgery: The femoral bone was surgically stabilized with internal fixation

Prognosis: Your pet has a good chance to make a full recovery.

Convalescent period: Weight bearing is typically seen within the first week after surgery. By 2 to 3 months after the surgery the lameness should have resolved. Please give us a call if your companion stops using the operated limb.

Diet: If your companion will not eat the regular diet, a homemade bland diet (50:50 mix of lean hamburger, chicken breast, lean turkey meat and a carbohydrate source such as rice, potato, or pasta) should be offered for 3 days and then wean back onto the regular diet over the next three days.

Bowel movements: Your companion may not have a bowel movement for the next 4 days after surgery. If your companion does not have a bowel movement after 4 days or is straining to defecate, constipation may be present. Unflavored Metamucil or Miralax at a dose of 1 teaspoon/50 lb body weight can be mixed in canned food (in each meal) as a laxative. If this treatment is not effective, other laxatives can be prescribed.

Exercise:

1. Cover all slippery floors with throw rugs or indoor/outdoor turf carpet for the first 8 weeks after surgery.
2. Limit activity to very short leash walks for bowel and urinary purposes until the bone is healed (typically 8 weeks). Do not leave your companion off the leash for 3 months or as recommended by the surgeon. No jumping, climbing stairs or rough-housing with other pets or people. Strenuous activity may result in failure of the surgical implants to hold the fracture together.

Rehabilitation therapy

1. First 3 days after surgery: Apply a cold compress (frozen peas, frozen corn or a cold gel pack) to the operated surgical site (humerus) three times daily, twenty minutes each time for the next three days. Place a thin towel between the cold compress and the humerus for patient comfort. The cold compress will reduce swelling, bruising and pain.
2. Day 4 to day 14: Three steps are taken during each rehabilitation therapy session: warm compressing, passive range of motion exercises followed by cold compress.
 - a. Apply a warm compress (warm water bottle or microwaved raw rice in a cloth bag) to the surgical site three times daily, ten minutes each time. Monitor the temperature of the compress so that it does not burn the skin. Place a thin towel between the warm compress and the surgical site for patient comfort. This step helps to loosen connective tissue in preparation for passive range of motion exercises.
 - b. Passive range of motion exercises should be started on the 4th day after surgery and should be done after application of the warm compress. Passive range of motion exercises are done by flexing and extending the hip, stifle and hock joints three sessions daily for five minutes. This step helps to break down adhesions and scar tissue so that your pet will attain normal or near normal range of motion.

Massage the muscles of the hind limb, because these may develop cramps (trigger points). This can be done after the passive range of motion session.

- c. After the range of motion exercises, apply a cold compress to the surgical site for five minutes. This step reduces inflammation.
3. Day 14 to the 8th week postop: As long as your pet is bearing a moderate amount of weight on the limb, leash walks are permitted. Ten-minute walks three times daily are permitted in your yard. Explosive activity such as running, sprinting, jumping, twisting/turning are not permitted as injury to the soft tissue, bone or metal implants may occur. Continue range of motion exercises, as described above 5 minutes (or about 20 repetitions) for 6 weeks; during this time, the warm and cold compress therapy is not needed.
NOTE: If possible, we also recommend rehabilitation therapy at by a professional rehabilitation therapist of your primary care veterinarian's choice, which can start in 2 weeks after surgery.
4. Week 9 to 12 postop: Range of motion exercises can be discontinued. Leash walks should be gradually increased to a normal duration (start with 15 minutes three times daily and gradually work up from there). Climbing stairs and jumping on elevated surfaces (2 feet or less) is permitted.

Incision:

1. Please remove the band aid that is covering the incision tomorrow. When the incision is exposed, daily, check the incision for signs of infection: redness, swelling, pain or discharge.
2. Do not allow licking of the incision as this could cause an infection or open the incision. An Elizabethan collar obtained from us or a pet store, should be kept on your companion for 2 weeks to prevent licking of the bandage and incision when exposed.

Follow-up examinations:

1. Please send a photo of the incision and a video of your dog walking in 2 weeks to your pet's surgeon via text message or email.
2. Radiographs (x-ray) of the operated limb should be done in 8 weeks to check the healing process. Please make an appointment today for this appointment.

IV catheter bandage: Your companion had an intravenous catheter for the administration of IV fluids during anesthesia. The catheter has been removed and a small bandage has been placed over the site (typically on the lower part of a front or hind limb) to prevent bleeding. Please remove this bandage when you arrive home.

Implant removal: The implants can be removed after complete bone healing is present, if the metal is irritating the tissues or if a chronic infection develops.

Medications: A pain management protocol has been prescribed which should be very effective. If your pet seems to be uncomfortable (whining, restless), the most common cause for this is that your pet needs to urinate. Take your pet outdoors to eliminate. If your pet still seems painful, please give us a call.