

Discharge Instructions – Proximal Tibia Growth Plate Fracture

Diagnosis: Salter Harris type II fracture of the proximal tibia

Treatment: Pins were used to stabilize the fracture.

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 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 their regular diet, a home-made 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 per 50 lbs 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. When not under direct supervision, put your pet in a large cage. 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 (when the fracture is deemed to be healed with radiographs). Do not leave your companion off the leash for 2 months. 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. Initially apply a cold compress to the surgical site for 10 minutes, three times daily for 4 days.
2. Rehabilitation therapy can start on the 4th day after surgery. This involves the following:
 - a. Apply a warm compress to the knee for 5 minutes to help loosen the connective tissue
 - b. Put the knee through full range of motion for 20 reps
 - c. Apply a cold compress for 5 minutes after the exercises have been complete
 - d. Do rehabilitation exercises twice daily for 3 weeks or until your pet is using the limb very well.

Incision:

1. Please remove the dressing covering the incision tomorrow. When the incision is exposed, daily, check the incision(s) 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 should be kept on your companion for 2 weeks to prevent licking of the incision.

Follow-up examinations:

1. Please make an appointment for a recheck with your primary care veterinarian in 2 weeks for an evaluation.
2. Radiographs (x-ray) of the operated limb should be done in 8 weeks to check the healing process.

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 the fracture has healed, 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.

PRESCRIBED MEDICATIONS:

1. Nocita – if performed as an open procedure
2. Cephalexin – 5 days
3. Tramadol – 4 days
4. Sedative – trazodone or acepromazine

Animal Surgical
Center of MI