



**Surgical Release Form for  
Brachycephalic Airway Surgery (Elongated Soft Palate, Stenotic Nares, Everted  
Laryngeal Saccules)**

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, Franklin, Lew and McFadden) 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. Drs. Lew and McFadden are board certified small animal surgeons.

Your pet has been diagnosed with brachiocephalic airway syndrome. The major components of this syndrome include stenotic nares (nostril openings too small), an overlong soft palate which interferes with normal breathing resulting in noisy respirations, and everted laryngeal saccules (eversion or prolapse of the mucosal lining of the laryngeal crypts) which also interfere with normal respirations. Surgery is designed to correct these abnormalities thereby making it easier to breath and reducing the noise associated with the syndrome. The goal of surgery is not to completely eliminate all the noise that is present pre-operatively, but to reduce it to a level that allows your pet to breathe easier and stop the progression of the syndrome. Without surgery, further collapse of the larynx can occur which can result in complete obstruction of the airway and collapse of your pet with strenuous exercise. Please be aware that although your pet should be improved after surgery, their breathing will never be completely normal. Any patient with a compromised airway should avoid stress whenever possible. Also, activity should be limited to moderate levels and on hot days they should be kept in a cool environment. Lastly, an ideal body weight should always be maintained.

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: Soft palate resection, stenotic nares resection (if needed), and everted laryngeal saccules transection (if present)

Surgical Risks: Although serious complications are extremely rare in this procedure with an experienced surgeon, complications that occur can be quite serious and even fatal if not recognized and treated immediately.

1. Hemorrhage, gagging, or coughing from the soft palate bleeding or swelling can occur immediately post-operatively necessitating re-anesthetizing your pet and temporary intubation. We treat all these patients with short acting steroids to reduce any swelling but on rare occasions this can still occur. In very rare instances, patients may need a temporary tracheotomy for a few days until the swelling resolves.
2. Dehiscence (suture breakdown) of the stenotic nares resection can occur if your pet frequently licks or rubs his/her nose and sutures were used by the surgeon. Healing will then occur by second intention leaving a pink scar of depigmented tissue. If your pet is not a show dog, a simpler resection may be done without any need for sutures.
3. Scarring or stenosis after laryngeal saccule resection can cause voice changes, loss of bark, respiratory noise, or progressive signs of upper airway obstruction. This is extremely rare.
4. Lastly, if not enough soft palate is resected initially; a second surgery may be required to remove additional tissue. It is imperative to be conservative in this regard as removing too much tissue can result in aspiration pneumonia and chronic sinusitis. It is far simpler to go back and take a little more tissue than to take too much since we can not undo this mistake.

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**