



## **Surgical Release Form for External Abdominal Hernias (Inguinal, Scrotal, Femoral and Umbilical)**

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 an abdominal hernia (inguinal, scrotal, femoral, or umbilical) hernia that requires surgical repair. Hernias result from weakening of the abdominal musculature or normal opening where organs pass through. This can be congenital or traumatically induced.

- Umbilical hernias occur through the umbilical ring
- Inguinal hernias are protrusions of organs or tissue through the inguinal canal adjacent to the vaginal process
- Scrotal hernias occur when defects in inguinal ring allow abdominal contents to protrude into the vaginal process through the ring
- Femoral hernias occur through a defect in femoral canal

The objectives of the surgery are to replace the contents of the hernial sac into the abdomen and reconstruct the holding layer to the ring or defect in abdominal musculature. Many different surgical techniques are available to the surgeon but using a variety of suture techniques is done most common to remove the hernia sac or repair the defect in the abdominal wall. On occasion, if your pet has very weak or insufficient muscles, a

synthetic Marlex mesh is used to rebuild or reinforce the area. If your pet is not neutered, neutering is necessary to allow proper healing and prevent recurrence. There is some belief that sex hormones can contribute to the formation of the defects. Although every effort is made to prevent or minimize complications, any surgery near these important structures are not without complications. Besides the obvious issue of repair failure due to obesity or straining from pain, pets frequently lick or chew the sutures 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 biggest complication of hernia repair is recurrence or dehiscence. It is critical that your pet should have an e-collar placed postoperatively to avoid issues with suture. Additionally, strict confined, controlled activity (leash activity only) is imperative for several weeks till defect has healed from surgery.

Postoperative swelling or pain should be brought the prompt and immediate attention of your veterinarian.

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: Hernia repair (Inguinal, Scrotal, Femoral or Umbilical), Epidural Anesthesia

Major Surgical Risks:

1. Dehiscence (suture breakdown) of the repair site necessitating additional repair
2. Infection, usually seen in the first few days
3. Reaction (immune) to the marlex mesh if used
4. Recurrence of hernia necessitating additional salvage procedures at additional cost
5. 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 \_\_\_\_\_.

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**Date**

**Pet Owner/Agent Signature**

**Phone I Can Be Reached At Today**