



Houston Mobile Veterinary Surgery

www.houstonmobileveterinarysurgery.com

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Femoral Head and Neck Excision (FHO) Discharge Instructions

DIAGNOSIS:

PROCEDURES:

Femoral head and neck excision arthroplasty (FHO)

PROGNOSIS: Good with surgical repair. FHOs can help to restore near normal function after trauma, hip luxations, fractures, or severe degenerative joint disease. The ball and socket joint has been removed and a pseudoarthrosis will develop. This will rely on the muscles of the hind limb (gluteals) to support the leg. Your pet's gait will be altered but this is due to a mechanical change and not a lameness associated with pain. Complications of this surgery include infection, seroma formation, decreased range of motion, and incisional dehiscence.

Although long term exercise restriction is not needed, recovery from an FHO can take up to 8-12 weeks or longer before full function is reached.

INCISION CARE:

- Please monitor the incision for dehiscence (opening) or for any signs of infection including redness, swelling, heat and discharge. If you see any of these signs, please contact your primary care veterinarian.
- Do not allow your pet to bother (lick, scratch or rub) the incision site. Your pet should wear an Elizabethan- collar at all times when not directly supervised until the incision is healed and sutures or staples are removed. Failure to follow this recommendation could lead to complications at your pet's incision site.
 - E-collars can be purchased from your regular vet, most pet stores or amazon.com
- Do not allow the incision to get wet (no baths or swimming) until the incision is healed.
- Skin sutures or staples, if present, will need to be removed in 10-14 days. Please make an appointment with your primary care veterinarian for this.
- You may continue to cold pack your pet's incision site 3 to 4 times daily for 10-15 minutes each time for the next 3 days to decrease postoperative pain and inflammation. Always place a protective layer, such as a thin towel, between the ice pack and your pet's skin.
- After the 3 days, you may switch to a warm compress 3 to 4 times daily for 3 to 5 more days if the surgical site appears bruised, painful or swollen. Always test the warm pack to make sure it is not too hot and place a protective layer, such as a thin towel, between the warm pack and your pet's skin.

ALLOWING YOUR PET TO BOTHER (LICK, SCRATCH , OR RUB) THE INCISION, EVEN FOR SHORT PERIODS, SIGNIFICANTLY INCREASES THE RISKS OF INCISIONAL COMPLICATIONS AND INFECTION.

EXERCISE RESTRICTION:

WEEK 1

- Your pet should be confined to a kennel or small room when not directly supervised.
- No running, jumping, playing with other pets, or uncontrolled off leash activities are allowed.
- Your pet should be allowed to go out only for urination and defecation 3 to 4 times daily and should always be on a leash.
- During the first week your pet can be taken on a short leash walk. This should be limited to 5-10 minutes. Walk them slow enough that they use the operated leg with each step.
- **It is very important to inform your veterinarian if your pet is not using the operated leg consistently.**

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WEEKS 2-6

- If the incision is healed you can increase the length of the leash walks. There is no limit to the duration of the leash walks. Make sure that you are walking them slowly enough that they place weight on the affected leg with every step.
- They are allowed to have unrestricted activity **IN ADDITION** to the leash walks. Often, when unrestricted, they will run on three legs and this will not provide adequate rehabilitation to the operated leg. It is very important to continue the leash walks.
- **It is very important to inform your veterinarian if your pet is not using the operated leg consistently.**

WEEKS 6-12

- Keeping them in a kennel is no longer needed
- Leash walks can be continued and there is no limit to the duration of the walks.
- **It is very important to inform your veterinarian if your pet is not using the operated leg consistently.**

INADEQUATE RESTRICTION OF ACTIVITY IS A COMMON CAUSE OF POSTOPERATIVE COMPLICATIONS AND INCREASED VETERINARY COSTS.

REHABILITATION:

Rehabilitation sessions for post-operative orthopedic patients are very important.

- Passive range of motion can help retain a good range of motion in the joints. This is **ESPECIALLY** important for FHO care. Failure to do adequate rehabilitation can lead to decreased range of motion, scar tissue formation at the joint and poor functional outcome.
 - Lay your pet down with the operated leg up.
 - It may help to place a warm pack over the hip joint for 5-10 minutes prior to the ROM exercises.
 - Gently and slowly flex the toes until there is minimal resistance. At this point hold the toes in flexion for 1-2 seconds, then extend their toes until there is minimal resistance and hold them there for 1-2 seconds.
 - Repeat these procedures 10-15 times and then move up to their ankle, knee, and hip repeating the flexion and extension in a similar manner for each joint for 10-15 repetitions.
- You can also move their leg in a bicycle motion forwards and backwards for 1 minute. Afterwards take them on a very slow leash walk for 5 minutes.
- After these exercises your pet may be a little sore. You can ice pack the surgical site with a bag of ice or frozen vegetables to their hip area. It should stay on for 5-10 minutes, and a protective layer should always be placed between the skin and the ice.

Your pet may benefit from additional rehabilitation. Please contact the clinic below and schedule an evaluation if you would like to pursue rehabilitation:

Dr. Rick Wall, DVM, CCRP, DAAPM

281- 298-5509

www.animalclinicofthewoodlands.com

DIET: Your pet can resume their normal diet. If they are not interested in their regular diet you can try plain white rice, chicken breast (unseasoned), and/ or cottage cheese.

MONITORING:

- Your pet should increase the amount of weight that they put on the operated leg. They should be using the leg consistently within the first 7-10 days. If they are not using the leg consistently within this time period please call your regular veterinarian so that they can re-evaluate them.
- Your pet may have a decreased appetite following anesthesia and surgery. This is not unusual and is often due to the pain medications and stress of hospitalization. Please monitor your pet's appetite and call us if they are not eating in the next few days.
- Anesthesia and pain medications can cause constipation. It is not unusual for pets to go several days without a bowel movement.

MEDICATIONS:

The most common medications used after surgery are pain medications and anti-inflammatories. Please follow the directions provided by your veterinarian.

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Non steroidal anti-inflammatory drugs (NSAIDS) are used to treat post operative pain and inflammation. They are typically given for 10-14 days following surgery. Side effects include vomiting, diarrhea, and decreased appetite. If you notice any of these signs or dark tarry stools please discontinue this medication and call your regular veterinarian. If you pet has been on any NSAID or steroid (prednisone) make sure to tell your veterinarian. **Giving more than one type of NSAID, suddenly switching from one NSAID to another, or giving NSAIDS and steroids at the same time can significantly increase the risk of side effects.**

Antibiotics can help decrease the risk of infection but will not replace proper incision care. Most antibiotics are given for 7-10 days following surgery. Just like their use in people not giving the correct dose or not finishing the antibiotic may lead to antibiotic resistance.

RECHECKS:

- Your pet needs to have their incision checked in 10-14 days. Sutures or staples, if present, will be removed at that time and we will evaluate your pet's progress. Please call your veterinarian to make an appointment for this.
- Re-evaluation is required 6 weeks after surgery. Please call for an appointment.

Thank you for trusting us with your pet's care. They have been a great patient.

NOTE: Additional charges may be incurred for any future office visits, radiographs, anesthesia, or procedures.