

Neurosurgery with BVNS

Neurological conditions can be rapidly progressive and in some cases the time between injury and surgery can be the difference between walking and permanent paralysis, or even life and death. Advanced equipment, and highly trained, experienced staff are needed for these delicate and complicated surgeries. The emergent nature and intricacy of these procedures can be very stressful for the dog and cat and for the family that cares for them.

Please know that your pet is in the most caring and capable hands here at BVNS. We want to make this process as stress-free as possible. While not all the information may apply to your pet specifically, it is our hope that this hand-out will answer your questions and reduce your stress level during this difficult time. We encourage you to please ask questions at anytime and let us know what more we can do to make this process easier for you.

Before Surgery

Food should be taken away 12 hours before surgery, but water is fine. We prefer your pet be dropped off the night before surgery to facilitate the safest anesthetic events and best outcome.

Disk Surgery

The goal of surgery is to remove the disk material that is pressing on the spinal cord and/or nerve root, which is causing pain and/or weakness. A ventral slot procedure is done to remove a herniated disk in the neck and a hemilaminectomy is done to remove ruptured disk material in the back.

A fenestration may be performed at the remaining disk spaces that are thought to be at risk for herniation. This procedure involves cutting a window in the outer fibrous rim of the disk, followed by extraction of the calcified or dehydrated center. This reduces recurrence of clinical signs of disk disease, while allowing normal motion and pain free movement following surgery.

Other Surgeries Performed by BVNS

- Routine and emergency brain surgery for tumors and traumatic injury
- Foramen magnum decompression for caudal occipital malformation
- Ventricular peritoneal shunt placement for hydrocephalus
- Spinal cord tumor removal
- Decompression, culture, and biopsy of infectious disease processes
- Muscle and nerve biopsy

Hospitalization

The in hospital recovery period typically lasts 2-3 days. Recovery is predicted by the duration of the problem, neurological function going into surgery, and findings on MRI or CT. After surgery, your pet generally requires intravenous pain medication, muscle relaxants, stomach protectants, and fluids, and occasionally anxiety medication and help eliminating. Animals are discharged from the hospital once they are eating and urinating on their own and comfortable.

Communications

We will make every effort to show you and explain the results of the advanced imaging tests before surgery is performed. In the event of an emergency procedure we may not be able to review the images with you prior to surgery.

Patient Care during the day

A full neurological examination is performed first thing in the morning on all hospitalized patients and during the day your pet is cared for by the licensed veterinary technicians (LVT) at BVNS. Once examined, you and your veterinarian will be updated as to your pet's progress. You should expect a call with an update on your pet both by late morning after transfer and examination and early evening before your pet is transferred to the emergency and critical care section of The Life Center (TLC). During these calls you will be updated with regards to your invoice up until that point and any visits can be scheduled at this time as well.

Overnight Care

Overnight the LVT of the emergency and critical care section of TLC will be caring for your pet. They are under the direct supervision of an experienced veterinarian, and a BVNS neurologist or resident neurologist is always available to them by phone. You can get an update on your pet during their overnight stay with the emergency and critical care section by calling them at 703.777.5755. They prefer you call for an update on the even hours, as they do their treatments on the odd hours.

The First Two Weeks Following Spinal Surgery

Your pet will require medications and occasionally nursing care and physical therapy at home to assist in their recovery. During this recovery period, your pet's weakness, tenderness, or discomfort will slowly improve. The first few days at home you may notice that your pet may urinate and defecate less frequently, seem sore, and not eat and drink as well as before surgery. Pain medications should be given until your pet is clearly free of all discomfort.

For the first two weeks following surgery please keep your pet crate rested. This means no running, jumping, twisting, turning, or stairs, and very limited walking. It is advised that you confine your pet to a play pen or crate and carry them outside for short, leashed walks to eliminate.

A neck harness is required for pets that have had neck surgery and is recommended for ones that have had back surgery as well. A sling can also be useful to provide stability and support until the limbs are fully functional.

The Period Between Two and Six Weeks After Spinal Surgery

We ask that you return about 10 to 21 days following surgery so we can remove the staples, evaluate your pet's progress, and initiate a walking program consisting of progressively longer leashed walks. Please call about 5 days after surgery with an update and to schedule this no-charge appointment.

At 6 weeks your pet can slowly return to normal activity. If your pet becomes painful or weak, restart crate rest and give one dose of pain medication. Please call us if there is progression or lack of improvement.

Rehab

At home rehab might include hot and cold packs to the incision, or massage and range of motion exercises. If more therapy is needed then we would refer to a rehab facility.

Communicating With Your Veterinarian

Your veterinarian will receive a summary of the consultation, diagnostic tests, and surgery, and updates by phone, fax, or mail.

Please call us if you're pet:

- Vomits
- Is unwilling to eat or drink for 24 hours
- Has black or persistently loose stool
- Becomes weaker or more painful
- Is extremely lethargic
- Has redness, heat, or pain around the incision
- Has not urinated for 24 hours, is persistently dribbling urine, or has a foul smelling or dark colored urine
- Has not defecated for 5 days