H&M VetSurg, PC
Hani Korani DVM, DACVS-SA

🐕 Gastrointestinal Resection & Anastomosis (R&A) Discharge Instructions

Provided by your Primary Veterinary Clinic on behalf of H&M VetSurg

Clinic Name/Phone: [**Primary Clinic: Insert Name and Phone Number Here**]

Patient: [Pet's Name] **Procedure:** Resection and Anastomosis (Intestinal Surgery) **Surgeon:** Hani M Korani, DVM, DACVS-SA

Your dog has undergone a successful intestinal Resection and Anastomosis (R&A) performed by Dr. Korani. This surgery is necessary to remove a diseased section of bowel and surgically reconnect the healthy ends. **Strict confinement and adherence to the feeding plan are critical** to allow the intestinal surgical site to heal without rupture.

1. 🐾 General Recovery & Confinement

The integrity of the intestinal repair depends on minimizing stress on the abdominal wall and the repair site.

- **Confinement:** Your dog must be kept on **strict rest** in a secure, small space (crate or small pen) for the entire **14-day recovery period**.
- **Activity: No running, jumping, climbing stairs, or vigorous play** with people or other pets. Limit all outdoor time to slow, controlled **leash walks** for elimination only.
- **Anesthesia Effects:** Expect your dog to be groggy, unsteady, and possibly reluctant to eat for the first **12–24 hours**.

2. 💊 Pain Management & Medications

Controlling pain and preventing nausea are essential to encourage appetite and rest.

- **Prescribed Medications:** Administer all medications exactly as prescribed by your primary veterinarian.
    - **Pain Relief:** [Name of medication, e.g., Gabapentin/Tramadol] – [Dose and Frequency]
    - **Anti-Nausea (Crucial):** [Name of anti-emetic, e.g., Cerenia] – [Dose and Frequency]
    - **Gastroprotectant:** [Name of medication, e.g., Sucralfate] – [Dose and Frequency] (Often prescribed to protect the stomach lining.)
    - **Antibiotic:** [Name of antibiotic] – [Dose and Frequency] (To prevent infection.)
- **Crucial Warning: NEVER** give your dog human medication, especially NSAIDs (Advil, Aleve) or Tylenol (Acetaminophen).

3. 🍽️ CRITICAL Dietary Instructions

The intestinal suture line is at its weakest point 3–5 days post-surgery. You **MUST** transition the diet slowly as directed below to minimize strain on the new connection.

Phase 1: Small, Frequent Bland Meals (Days 1–5)

- **Food Type:** Feed only the **prescribed bland diet** (e.g., canned prescription GI diet, boiled chicken/rice, or ground beef/rice).
- **Feeding Schedule:** Feed **very small amounts** (1/4 to 1/3 of a normal meal size) **4–6 times per day**.
- **Do Not Feed:** No treats, no chews, no human food, and absolutely **no large meals**.

Phase 2: Gradual Transition (Days 6–14)

- **If your dog is tolerating the bland diet well:** Gradually transition back to the pet's normal diet over the next 7 days, following your primary veterinarian's specific guidance.
- **Monitoring Output:** Stools should be soft but formed. Diarrhea, severe straining, or persistent constipation must be reported immediately.

Persistent Vomiting Warning

- **A single episode of vomiting is common.**
- **Persistent vomiting (more than 2 episodes in 12 hours) is a serious concern** after intestinal surgery. Contact your primary veterinarian immediately if this occurs.

4. 🩹 Incision and Suture Care (Abdominal)

The incision is located on the midline of the abdomen.

- **Licking Prevention (E-Collar): The Elizabethan collar (cone) is mandatory.** Your dog **must** wear the cone **24 hours a day** for the full **14-day recovery period** until the sutures are removed/healed. Licking will pull out sutures and may expose the abdominal cavity.
- **Daily Inspection:** Check the incision site twice daily.
    - **Normal:** Mild bruising, slight redness, and a small, firm ridge beneath the skin (buried sutures) are expected.
    - **Abnormal:** Contact your primary veterinarian immediately if you notice **foul odor**, **the incision opening up**, **profuse drainage/discharge**, or **severe redness and heat**.
- **Bathing:** Do not bathe your dog or allow the incision to get wet until after the final recheck appointment.

5. 🚨 Emergency Warning Signs (Anastomotic Leakage/Sepsis)

Intestinal leakage (Anastomotic Dehiscence) is a life-threatening complication and requires immediate emergency care. **Contact your primary veterinary clinic or nearest emergency clinic immediately** if you observe **ANY** of the following, especially between Days 3 and 5:

- **Persistent, unrelenting vomiting.**
- **Severe, sudden lethargy and depression.**
- **Shivering, weakness, or collapse.**
- **Intense abdominal pain** (hunched posture, growling when touched, refusing to lie down).
- **Pale or white gums.**
- **Fever or very cold body temperature.**

6. 📅 Follow-Up Appointments

Follow-up appointments are mandatory to monitor incision healing and ensure the successful function of the intestinal repair. Please schedule these with your primary veterinary clinic.

- **Incision Check/Suture Removal (10–14 Days Post-Surgery):** Necessary to evaluate external incision healing, remove sutures/staples, and authorize a gradual increase in activity.
- **Dietary and Clinical Recheck (4 Weeks Post-Surgery):** A final check to ensure the dog is back on its normal diet, weight is stable, and there are no signs of long-term complication.

📞 Post-Surgical Support

For all routine questions, medication refills, or urgent concerns, please contact **your primary veterinary clinic** at the number listed above.

H&M VetSurg (Specialist Contact): Dr. Korani is available for specific surgical complications or specialist consultation via your primary veterinarian.

- **Specialist Phone:** 415-853-7600
- **Specialist Email:** dr.korani@hmvetsurg.com