



ON THE SPOT
veterinary surgery

Surgical Release Form for Patella Luxation Repair

Owner Name: _____ Patient Name: _____ Date: _____

Referring Hospital: _____ Your Veterinarian: _____

On the Spot Vet Surgeon: _____ Surgery to be Performed: _____

Please read the following surgical release form carefully. By signing at the end of this form, you are agreeing that you have read and understand the terms and conditions for your pet to be under the care of On The Spot Vet Surgeons.

Surgical Plan: Your pet has been diagnosed with a luxating patella that needs surgical repair. Additional damage discovered during this procedure may include other torn or stretched ligaments, meniscal damage (cartilage), rotation of the tibial crest, and stretching of the joint capsule.

Surgical Procedure: The surgeon may utilize one or more methods of repair depending upon the damage found in the joint. These methods include, but may not be limited to, deepening of the trochlear groove, realignment of the patellar ligament, and tightening of the soft tissue structures. The goal of any orthopedic surgery is fast return to function of the injured joint. In most cases, there will be no complications and your pet's joint will heal fully in 8-12 weeks.

General Anesthetic Risks: Although every effort is made to ensure anesthesia is as safe as possible, there are inherent anesthetic risks to your pet. The incidence of complications from anesthesia are extremely low and we do not anticipate any in your pet, but, on rare occasions the following may occur:

1. Allergic reaction to the anesthetic agents.
2. Heart rhythm abnormalities.
3. Untoward reactions to gas anesthesia including drops in blood pressure or respiratory difficulties.
4. On very rare occasions, general anesthesia can result in death due to unforeseen cause.

Our highly trained veterinary medical team will take every precaution to take care of your pet while in our care. We monitor your pet's vital signs diligently and utilize only the most up-to-date anesthetic agents and equipment.

Surgical Risks:

1. Infection (less than 3%) which may require additional testing and medication at an additional cost.
2. Blood clots that can lodge in major organs causing stroke or rarely death.
3. Hemorrhage, especially from the popliteal artery.
4. Bruising and edema postoperatively.
5. Implant breakage or failure, requiring additional surgery at an added cost.
6. Fractures of the tibia.

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7. Relaxation of the patella (up to 5-10% in more severe cases) but most have a lower grade of luxation and no pain.
8. Allergic reaction to the suture material utilized in the repair causing a seroma to form (small pocket of fluid) which usually resolve over time without drainage or revision.
9. Advancing arthritis that makes the joint stiff and sore, especially after exercise or in cold weather.
10. Implant failure, migration, or loosening of tibial crest is transposed (especially if pet is overactive).
11. If utilized in a tibial crest transposition, the metal pin can sometimes protrude into the back of the joint after the bone is healed and cause slight discomfort and lameness. Removing the pin with sedation and a local anesthetic is sometimes necessary to alleviate the discomfort.
12. Pivot shift which results in stifle turning out while walking. In most cases, this is temporary and causes no problems if it persists.

Strict adherence to post-surgical care and the proper medicating of your pet will minimize these potential complications. Serious problems are very uncommon in most cases.

Surgical Consent to Medical Treatment and CPR Directive: In the unlikely event that your pet will require resuscitative measures, please read the following directive, and choose one of the options for cardiopulmonary resuscitation (CPR).

During anesthesia, life threatening complications such as respiratory and/or cardiac arrest may occur, requiring medication treatment and/or CPR. If my pet stops breathing or his/her heart stops beating, I realize even the most successful CPR measures may not restore him/her to good mental and physical health.

- **Level 1:** NO CPR procedures are to be administered. DO NOT PERFORM CPR ON MY PET.
- **Level 2:** Endotracheal tube intubation, positive pressure respiration, administration of emergency drugs, external cardiac massage (chest compressions).

Print or Type your CPR choice here: _____

I accept that if the On The Spot Medical Team are unable to reach me within twenty (20) minutes after the initiation of CPR and if after administering reasonable treatment there appears to be virtually no hope for medical success, CPR will be withdrawn.

I consent to the following surgical procedure(s) for my pet: Patella Luxation Repair of the **LEFT, RIGHT or BOTH LEFT & RIGHT** (please circle the correct leg to be repaired) rear leg or choose from the drop-down menu (if electronic form is utilized): _____

I have discussed the aforementioned surgery and the importance of pre-surgical blood testing with my primary veterinarian. I understand that there are risks and hazards involved with the recommended surgical procedure, including general anesthetic risk. I agree to follow post-operative instructions and restrict my pet from full activity until approved by Dr. Reynolds or my primary veterinarian. I realize that no guaranty or warranty can ethically or professionally be made regarding the results or cure of my pet.

By signing below, I authorize the surgeons and/or associates of On The Spot Veterinary Surgeons, LLC, to perform surgery on my pet. I am also aware that Dr. Reynolds is not a board certified surgeon and I understand that there are small-animal board-certified surgeons available in the area.

Pet Owner Name: _____ Pet Owner Signature: _____

E-mail Address: _____ Phone Number: _____

Post-operative go-home instructions will be e-mailed directly to you. Please provide an accurate e-mail address that you can access the day of your pet's surgery.

Social Media Release: On the Spot Veterinary Surgeons LLC 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. We would be grateful that you'll be helping other pets by educating pet owners, veterinary technicians and veterinarians.

Please choose one of the following options for social media permissions:

- Yes, On The Spot may mention your pet on social media channels.
- No, please do not share my pet's picture, video or story.

OTS Medical Team Use only:

Pet last meal prior to surgery?

Current medications and when last given?



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1. Do you have an **e-collar** (cone) or Licksleeve at home for your pet?
Type of E-collar/Licksleeve:

2. **Allergy Medication** (Ex: Apoquel, Cytopoint, Shampoos)
 - a. Is your pet currently taking any medications/shampoos for allergies?
 - b. Name, dosage and how often your pet is receiving this medication and/or bath?

3. **Antibiotic** (Ex: Cephalexin, Cefpodoxime, Simplicef)
 - a. Is your pet currently taking an antibiotic medication?
 - b. Name, dosage and how often your pet is receiving this medication?

 - c. What date did you start this medication?
 - d. Do you have enough medication to give as directed 2 weeks after surgery?

4. **Anti-inflammatory** (Ex: Rimadyl, Carprofen, Vetprofen)
 - a. Is your pet currently taking an anti-inflammatory medication?
 - b. Name, dosage and how often your pet is receiving this medication?

 - c. When will the last dose of this medication be given (date and specific time?)
 - d. Do you have enough medication to give as directed 2 weeks after surgery?

5. **Pain Management** (Ex: Gabapentin, Tramadol, T-Relief)
 - a. Is your pet currently taking any pain management medications?
 - b. Name, dosage and how often your pet is receiving this medication?

 - c. Do you have enough medication to give as directed 2 weeks after surgery?

6. **Anti-anxiety/Sedative** (Ex: Trazodone, Acepromazine)
 - a. Is your pet currently taking any anti-anxiety/sedative medications?
 - b. Name, dosage and how often your pet is receiving this medication?

 - c. Do you have enough medication to give as directed 2 weeks after surgery?

7. **Additional medications and supplements:**