



**SURGICAL CONSENT & AUTHORIZATION (Perineal Hernia Repair w/Neuter)**

Date: \_\_\_\_\_ Referring Hospital: \_\_\_\_\_

Pet's name: \_\_\_\_\_ Client's name: \_\_\_\_\_

Pet's DOB: \_\_\_\_\_ Breed: \_\_\_\_\_ Sex: Male Female Altered: Yes No

\_\_\_\_\_ This document acknowledges that I have been informed by Dr. \_\_\_\_\_ that my pet is suspected to have a Perineal Hernia. I have been informed of the treatment options, including surgery.

\_\_\_\_\_ I elect and consent for Perineal Hernia Repair and Neuter surgery to be performed on my pet by Dr. Jessie Sutton, DACVS-SA.

\_\_\_\_\_ The surgery will be performed on the RIGHT \_\_\_\_\_ LEFT \_\_\_\_\_ BILATERAL \_\_\_\_\_.

\_\_\_\_\_ I understand the risks associated with this procedure that include anesthetic risk, hemorrhage, infection, wound healing complications, dehiscence (opening of the incision), hernia recurrence & rarely death.

\_\_\_\_\_ The reported recurrence rate for perineal hernia repair is 10-35%. Recurrence is more likely to occur if straining to defecate continues. Soft formed stools (achieved with stool softeners) are recommended for approximately 4 weeks post-op to minimize straining.

\_\_\_\_\_ There is a small chance of fecal incontinence (temporary or permanent) after surgery, if the nerves supplying the anal sphincter are damaged.

\_\_\_\_\_ I understand that successful outcomes require proper home care and restrictions.

\_\_\_\_\_ I understand that no guarantees are being made regarding the outcome.

\_\_\_\_\_ I understand that my pet will be administered Nocita (local anesthetic lasting up to 72 hours) for additional pain management.

\_\_\_\_\_ I consent for photographs and videos to be obtained of my pet for use by Roam Veterinary Surgery for case presentations, monitoring, and/or website or social media. CIRCLE ONE: YES NO

I hereby grant permission for my pet to have Perineal Hernia Repair and Neuter surgery by Dr. Jessie Sutton, DVM, DACVS-SA

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Client's signature

Client's phone number

Date