

**Veterinary Surgical Services
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Operative Report

Case No: 5149

Date : 4-11-05

Name: Pitty Sample

Ref Veterinarian :

Pre Operative Notes : A fentanyl patch had been placed on cat. IV cath was placed. Cefazolin 100mg IV. Cat was HBC Has the following problems: 1) Comminuted ilial fracture right hemipelvis 2) 10 cm laceration medial left thigh, 3) 3 cm laceration left lateral tarsal region. 4) de gloving wounds on both front distal limbs and rear limbs.5) Rectum was torn from attachments at integumental junction.





Pre Operative notes : All wounds were clipped and prepped. While clipping around rectum, it was realized that the skin from the 12th rib caudally was avulsed from its attachments to the body. It extended down both rear limbs to the area of the tarsus. The owner was called and advised that most likely surgery will fail and skin would become necrotic and slough.



Operation in Detail: The cat was placed in ventral recumbancy. The skin around the tail was incised. It was now easy to see the avulsion of the skin in its entirety. I could see that the skin had lost all attachment up to the scapulas and that there was little to no blood flow distally. The tail was amputated.. Next, approx 4-6cm of skin was removed and pulled distally. A 2cm incision was made and the rectum was sutured with 3-0 PDS at this location. Noted was the lack of any bleeding at all incision sites. Next the skin was sutured with 3-0PDS in a simple interrupted pattern.



The medial laceration on the left rear was then debrided and sutured with 3-0 PDS in a simple interrupted and a penrose drain was placed distally. The small laceration on the lateral side of the right tarsus was sutured with 3-0 PDS in a simple interrupted pattern. The de-gloving wounds were dressed with telfa pads and bandages.