

Veterinary Ophthalmology Specialty Practice, Inc.

Animal Eye Clinic

Dennis K. Olivero DVM, DACO 4053 Highway Seven St. Louis Park MN 55416

"SMOKEY 2" Feline Rescue

Phone: (952) 929-8299
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Web: PetEyeClinic.com
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March 1, 2017

Patient Name:

Owner/agent

Procedure:	Estimate:	
Conjunctival Graft = Left Eye	\$1354.00 - \$1390.00	
Average Follow Up Appointment Schedule:	Estimate:	
Rechecks = Two	\$70.00 each	
Please be advised that estimates for surgical treatment include all of the creatments to ready a patient for surgery, intravenous catheterization, corticosteroids, intravenous fluids, anesthetic drugs and anesthetic mo professional surgical fees, postoperative recovery and monitoring, hose and resolution of each individual case. Unless indicated otherwise about medications needed or recheck evaluations to determine the progress	preoperative eye medications, intravenous ant nitoring, EKG monitoring, operating rooms fees pitalization and our best estimate of necessary we, the estimates do not include the cost incurred	ibiotics and/or s, surgical supplies, medications for home care
Please provide forty eight hours notice on any cancellation of a surgica	l appointment.	
understand that the estimate above is valid for a period of 60 days from may be necessary if surgery is delayed greater than two months.	om the evaluation and reexamination of the pat	cient to assess for changes
understand that payment is due at the time that services are rendere	d and can be made with cash, debit card or visa	/mc.
have read the above policy and estimate memo and by signing below	I agree to comply with the terms indicated abo	ve.
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March 1, 2017

Veterinary Ophthalmology Specialty Practice, Inc 4053 Highway Seven, Minneapolis MN 55416

(952) 929-8299

Patient: Smokey 2 from FELINE RESCUE

DIAGNOSIS:

Clinical Background:

Smokey 2 has no abnormalities with the right eye and good vision.

The left eye is not visual at the moment because the eye is partly collapsed. Smokey developed an ulcer or injury in the left eye then complicated by bacterial infection and the bacteria have dissolved the cornea. There is a larger central area of perforation and leakage of fluid out of the eye. Please stop all topical medications. Ointment introduction into the inside of the eye can complicate any efforts to restore vision.

You have two options in this situation

The eye can be removed and the lids closed. This will make Smokey much more comfortable in a short period of time.

A conjunctival graft procedure can be done. Tissue is harvested from under the eyelid and sutured over the central defect to seal the cornea and replace tissue lost from infection. The graft will necessarily be large and cover most of the pupil. I don't think he will have good vision. He may have partial vision. The aftercare with a graft involves four times daily topical antibiotics and oral antibiotics. An Eliz collar is necessary the first ten days. After ten days usually medications are reduced to twice daily for another two or three weeks. Conjunctival grafts take and are successful in 90-95% of cases. There is a slight chance of graft failure, usually due to underlying infection in the cornea and the sutures pulling out.

Risks

There is a risk associated with general anesthesia

There is a risk that a graft would not take and he would need another procedure

There is a significant risk of reduced or poor vision due to central opacification of the cornea where
the graft is made.

The cornea is approximately 1mm thick in animals. Infection in the cornea may develop following injury. The cornea is ill equipped to slow infection because it lacks a blood supply and does not efficiently transport immune cells from the blood stream to the location of infection. Progressive infection causes deterioration of the cornea, a structure which does not regenerate. Progressive thinning of the cornea to the final remaining layer is called a descemetocele. Descemetocele is considered an urgent or emergency situation because perforation of the cornea and loss of fluid from the eye is likely with ongoing unchecked infection or any slight bump or even a sneeze or cough. A corneal infection can produce descemetocele situation quickly, in 1-2 days. Descemetocele describes a very weak and unstable cornea.

The cornea is unable to regenerate tissue lost from infection. Infections that are controlled before 50% or more loss of the cornea can be managed with topical antibiotics alone. Although the cornea will have a permanent thin area, even 25% residual stroma is sufficient to provide good strength and integrity to the cornea.

Deep infections progressively weaken the cornea and can result in a spontaneous rupture of the eye with introduction of bacteria inside the eye and loss of fluid from the anterior chamber. This is imminent in the descemetocele situation.

In humans, after the infection is controlled, thin areas in the cornea are repaired with a corneal transplant. The success rate of corneal transplants in animals, particularly in dogs, is low due to rejection. Therefore, in pets, we harvest their own tissue to graft the cornea, using the conjunctiva or membrane that lines the inside of the eyelid. Under general anesthesia, a conjunctival graft is rotated over the defect in the cornea and sutured directly into the ulcer crater. The conjunctiva has a good blood supply and is able to rapidly deploy immune cells from the blood stream directly into the area of infection. It is also rapidly regenerative. The conjunctiva, however, is not clear, so large central grafts may prevent loss of the eye but may result in variable loss of vision. Peripheral grafts on the edge of the cornea have little or no effect on vision.

After surgical grafting, patients are monitored in the hospital for several hours before release for home care. Most require topical antibiotic and pain medications 2-4 times daily at home. A protective Elizabethan collar is necessary for 7-10 days. The blood supply to the graft is checked after ten days. Often topical cortisone medications can be started at this point to shrink the graft and prevent excessive scarring in the cornea. In some cases, one month after surgery the pedicle to the graft is removed.

Conjunctival grafting is very successful in animals. Over 95% of grafts successfully stop infection and provide normal strength to an infection weakened cornea. Graft failure can develop if infection persists under the graft causing the sutures to fail. Please be aware that conjunctival grafts never become completely clear, although over time they may approach this particularly in cats

When giving eye medications, it is important to remember that individual medications should be spaced by at least 3 to 5 minutes to prevent washout of the first drop by following eye drops. One drop is plenty for liquid medications. Ointments are to be given ½ inch to ½ inch strip applied directly on the surface of the eye. Avoid contacting the container with the eye to prevent trauma and introduction of bacteria into the medication. Atropine is a strong dilator. Wash after handling. If you get this medication into your own eye it will dilate your pupil. It can be very harmful if eaten or swallowed by animals or humans.

POST- SURGICAL TREATMENT INSTRUCTIONS

Veterinary Ophthalmology Specialty Practice, Inc. 4053 Highway Seven, Minneapolis MN 55416 (952) 929-8299

March 1, 2017 Smokey 2 from Feline Rescue

Eye Medications

Gentamycin ointment: Apply a very small amt on the left eye four times daily.

Atropine ointment: Apply a small amt on the left eye once daily in the am with the antibiotic.

Atropine blocks pain. It is also a dilator. We need to have the pupil dilated to prevent the iris from sticking to the graft or cornea which could produce very poor vision or glaucoma. Wash after handling. Trace medication can cause your pupil to dilate if you later touch your finger to your eye. Cats have a tear duct that drains to the back of the mouth. If you give a large amount of atropine or atropine drops they will taste this medication which is bitter. This will produce foaming and excessive salivation. If you see this reaction, remain calm, it will quickly pass. Try to deliver less medication next time.

Oral Medications:

Amoxicillin suspension: 1 cc twice daily until gone.

Buprenorphine 0.2ml syringe. Give one syringe contents in the mouth every 8 hrs the first 24 hrs for pain. This medication may cause sleepiness.

Exercise Restrictions
Quiet indoor rest
Leash walk outside to urinate and defecate
No bath ■ No bath No bath
☐ No swimming
Elizabethan collar should be picked up here or regular veterinary office if excessive rubbing noted
☐ Elizabethan collar should be worn at all times until next recheck
Quiet rest for the remainder of today and then no special restrictions
Follow up examination recommended in 10-14 days to check viability of graft.

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Care after general anesthesia

Hair was clipped from an area on the front leg to allow placement of an intravenous catheter. This is used to administer the initial anesthetic agent and to give fluids during surgery. The catheter has been removed. A bandage is covering the catheter site and should be left in place several hours at home. An antiseptic has been placed on the bandage to keep the catheter placement site sterile. The general anesthetic is generally

administered by means of an endotracheal tube. This may result in a dry cough for a few days after surgery. If a cough persists greater than 48 hours, please phone the clinic.

Generally food and water can be offered the evening after surgery. It is best to offer a small amount of water first and then offer a full bowl of water. If water is well tolerated solid food can be offered. If your pet is a diabetic and insulin is given once daily, resume normal insulin and feeding schedule the day following surgery. If you normally give insulin in the evening, feed a normal meal first. If your pet eats normally, you may administer the regular full dose of insulin in the evening. If your pet is not hungry or only partially finishes the food offered, give only half of the normal insulin dosage for the evening. If you have questions regarding care after general anesthesia, feel free to phone the hospital.

Case Summary

Following conjunctival grafting of the cornea in animals, it is important that the graft be carefully monitored. It will initially appear pale white to pink in color becoming more and more red with the passing of time. This is normal and is a sign that the graft is healthy and developing a strong blood supply and therefore a lasting connection to the cornea. It is important that you verify that the graft has not shifted or become loose from the cornea with each treatment interval. During the first 6-7 days following surgery, if infection persists under the graft, the stitches will loosen and the graft can fail to adhere to the cornea and will pull away from the cornea. If you believe the graft is becoming loose or weakening please contact the hospital.

The graft was harvested from the conjunctiva overlying the sclera or white part of the eye. In this area, the white of the eye will become very red after surgery as the conjunctiva is replaced in this area. This is normal. It is also normal to see some squinting the first few days but each day your pet should seem more and more comfortable and more willing to hold the eye open. Mucoid discharge is particularly common the first week following surgery. In fact, during the first day after surgery you may note traces of blood in the discharge. Wipe away discharge as necessary from the area around the eye.

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