Post-operative Considerations

 Removal of Foreign Body causing Intestinal Obstruction in a Goat

**<24 hours**

* Animals should be released in to a quiet and clean environment.
* If general anesthesia was used, the animal should be monitored for recovery.
* Clean water and food should be available when the animal is fully recovered.
* Administer antibiotics, NSAIDs such as Flunixin
* Monitor for signs of pain and discomfort.
* Monitor for Post-operative infections and toxemia should be closely monitored for.
* If there is evidence of shock, intravenous fluid therapy can be administered.
	+ 2-3 litres of hypertonic (7.2%) sodium chloride given intravenously followed by access to fresh drinking water.

**>24 hours**

* Repeat medication is necessary, if the animal still experience discomfort
* Transfaunation or the use of probiotics may be needed if long-term antibiotic use has been implemented.
* Treat any surgical site infections.
* Monitor for Pyrexia, depression, inappetance and diarrhea which may indicate the presence of peritonitis.
* Sutures can be removed 2-3 weeks following surgery. This is because at 10-14 day sutures are still vulnerable to trauma and may burst.

**Possible Complications**

* Surgical done on a farm has risks of bacterial contamination even if best practice surgical preparation is followed.
* Poor surgical handling of abdominal contents can also lead to inflammation, hemorrhage and adhesions, all of which may result in post-operative complications.
* Wound dehiscence is a risk
* Peritonitis.
* Unresolved clinical signs
* Inappetance. (if this occur stimulants can be increase interest in food.
* Abdominal adhesions.- Instillation of sodium carboxymethylcellulose may decrease adhesion formation.
* Ketosis [Ketosis](https://www-vetstream-com.ezproxy.sastudents.uwi.tt/treat/bovis/diseases/ketosis-%28acetonaemia%29-and-fatty-liver).
* Toxemia.
* Death.

**Reasons for treatment failure**

* Contaminated surgical site.
* Wound dehiscence.
* Abdominal adhesions.
* Toxic shock.
* Unidentifiable/unresolved clinical problem.