**Post-Operative Considerations**

CARE

* The wound is protected with a teat bandage and the quarter is treated appropriately for mastitis.
* NSAID and antimicrobials therapy are continued post-operatively for 3 days.
* Depending on the severity of the lesion and the structures involved, milking with the machine may or may not be used at the following milking. A larger teat cup is recommended if a machine is used.
* Hand milking should be avoided for 10 days. It is associated with wound dehiscence due to uneven pressure being applied to the wound. This may encourage milk to leak into the sutures which may lead to reopening of the teat canal. If the machine is not used, a cannula is introduced carefully at every milking.
* When the streak canal is involved in the laceration, a cannula with a lid can be left in the streak canal for a few days (no more than 3 days). When the cannula is removed, a natural teat insert (wax implant) can be placed in the streak canal between milking. It will promote the healing of the damage streak canal.
* Severe post-operative edema can be treated by applying ice around the teat for a few days. Crushed ice in a rectal sleeve can be placed around the teat. Commercial udder bags can be used to hold the ice in place. Twenty minute applications can be performed several times per day.
* The skin sutures are removed no more than 9 days after the surgery. If the sutures are left in place longer, excessive fibrosis and suture tract infection may occur.

CLIENT INFORMATION

* Inform the client of possible complications or side effects that may occur.
* Ensure the patient is kept out of dirty, wet environments and the wound site is kept clean and dry.
* Ensure the patient receives ample food and water so as to encourage wound healing.
* Inform the client if there are any drugs needed to be given to the patient after the procedure and the reason for use of each drug and common side effects that may occur. Eg pain medication.
* Inform the client of the dosage regimen of any drugs needed.
* Keep the patient as comfortable as possible- Clean environment to prevent infection, even surfaces and wooden
* Inform the client of expected recovery time.
* Withdrawal intervals of drugs used.
* The prognosis for teat laceration repair is usually good and milking can begin via machine one day post op.