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# Perineal Urethrostomy & Urethrotomy in Dogs

- Bladder stones in dogs are common, but more so in the female than male. They are often more difficult to handle in the male dog as urethral obstruction is far more common in the male, due to the narrowing of the urethra in the os penis. While obstruction can also occur in the female, it is seldom a surgical emergency.
- Urethral obstruction from stones formed in the bladder that fail to pass will cause partial to complete urinary obstruction; a urologic emergency. Outflow obstruction is acutely painful and an emergency. Uremic toxicity is a fatal disease.
- Clinical signs vary, but general illness and painful attempts to urinate, failure to urinate, or dribbling as they urinate is common and requires emergency care.
- The first attempt to treat this situation should be to catheterize the dog and attempt to flush the stones back into the bladder, relieving the obstruction. A catheter can then be left in place until the stones are removed or otherwise treated.
- Perineal urethrostomy or urethrotomy is an excellent procedure for male dogs that cannot be catheterized and the stones flushed back to the bladder when they obstruct. This is a true emergency!
- If the stones can be flushed back into the bladder, after the medical emergency is past, they are best removed through cystotomy, a much simpler procedure.
- Urethrotomy is a procedure to temporarily open the urethra near the stones to remove them.
- Urethrostomy is a procedure to permanently open the urethra near the obstruction to remove the stones and to prevent any recurrent disease from causing another obstruction. This is done by making the opening before the narrow part of the urethra, allowing any future stones to simply be passed.
- Urethrostomy is good procedure to prevent re-obstruction of male dogs that have a continuing propensity to make stones unamenable to medical therapy. Certain breeds of dogs tend to form these stones, and certain types of stones are commonly recurrent and not possible to prevent with medical treatment.
- The type of stone, its propensity to recur and/or be prevented by medical treatment is easily and inexpensively determined by analyzing the composition of the stone. Results of this analysis typically take a few weeks.
- The complexity of the cases varies. In acute renal failure with an obstruction that cannot be relieved, surgery **MUST** be performed. Intensive care, balanced anesthesia, and aftercare are a must. These are emergent cases that require hospitalization for several days. . Call immediately for an emergency referral.
- Often, stones in the bladder accompany offending stones in the urethra. If the bladder stones are small, as confirmed by x-ray, it may be possible to flush these out of the now wider urethra during surgery. In the event that bladder stones remain, an abdominal incision will likely be needed.
- Hospitalization is typically 3-5 days for emergency admissions, and 2-3 days for more routine cases.
- Surgery is done daily and on an emergency basis. If it is indicated for non-emergent disease, surgery will generally be scheduled for Monday, Tuesday, or Thursday.
- We will coordinate postoperative aftercare with your hospital. Typical care includes:
  - A 4-5 day postoperative incision check.
  - A 10-12 day suture removal.
- Please send any preoperative laboratory tests and radiographs.
- Uncomplicated cases are \$1000 to \$1400, and emergency referrals are representatively more. [January 2011]. Ask for an estimate.