



Post-Operative Instructions: Soft-Tissue Sarcoma (STS) or Mast Cell Tumor (MCT) Excision

Summary: Thank you for trusting us with the care of your pet. The following guidelines for post-operative care of STS/MCT excision are provided for your review.

STS – tumors are a general category of cutaneous (skin) tumors that are relatively common in geriatric canine patients. These tumors have a fairly stereotypical growth pattern in that they grow and expand locally and rarely (<15%) spread to distant locations – however it is important to understand that the portion of the tumor you can ‘see’ with your eyes and ‘touch’ under-represents the true tumor burden. In other words, a larger than expected excision needs to occur to ensure complete removal. It is sometimes recommended to have a pre-operative CT Scan performed prior to surgery to better define the margins of the tumor. Histopathology (biopsy report) post-excision is helpful to determine completeness of excision, as well ‘grading’ the tumor – higher grades of tumors are statistically more likely to recur or spread to other locations.

MCT – are tumors of white blood cell origin. Mast Cells are normal immune system cells that protect our body from outside infection from various organisms. Generally through some genetic mutation, a portion of these cells will begin to coalesce and form cutaneous (skin) tumors. These tumors can occur anywhere on the body, but have a high propensity for developing in the skin. Wide excision is the mainstay of treatment – and completeness of excision is generally regarded as the single most important factor determining whether regrowth will occur. Even with complete excision, once a pet makes one of these skin tumors, they are statistically more likely to make another.

Recovery Instructions:

1. Activity (12-14days)

- a. No running, jumping, free access to stairs, or rough playing with other pets or children.
 - b. Do not allow any unrestricted or off-leash activity, or free access to stairs or slippery floors.
 - c. Restrict activity for the next 2 weeks to allow complete healing of the surgical site.
 - d. Activity must be limited to very short leash walks three times daily for the purpose of going outside to the bathroom only.
2. Incision:
- a. Monitor the incision daily for signs of infection such as increased redness, swelling or discharge. If you observe any of these signs or if the surgical site suddenly becomes painful to the touch please call us immediately.
 - b. If your pet licks the incision, he/she must wear an E-collar until the staples are removed as licking can provide a source of infection.
 - c. Keep the incision clean and dry (do not apply anything to the incision). No bathing or swimming for 14 days.
3. Medications:
- a. Give all medications as directed and call us if you believe your pet is having an adverse reaction to any of the prescriptions.
 - b. If your pet loses his/her appetite, begins vomiting or develops diarrhea or dark/tarry stool please call us immediately.
4. Food:
- a. Your pet should have access to water at all times and eat their normal diet.
5. Recheck:
- a. Please schedule an appointment for suture/staple removal 12-14 days after surgery.
6. Questions:
- a. Our foremost interest is your pet's rapid and complete recovery: Do not hesitate to call if you have any questions or concerns.

NOTE: Stents

If stents were used to relieve tension along the suture line – these will need to be examined and likely removed in 3-5 days. These are 'plastic' tubes on the side of the incision that allow for tension to be evenly distributed along the entire incision, and reduce the chance for post-operative complications. However, these can only really be left in for a maximum of 5 – in some cases – 6 days. If tension relieving stents were used to manage the incision of your pet, you will need to be especially vigilant about restricting the activity level of your pet during the entire 14 days post-operative. Explosive activity can open the incision line!