

CK 2003 / 036840 / 23

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DATE: 23/10/2025

To whom it may concern at SAN Parks,

We are all very sad to hear of Rocky's passing, as I understand that he has passed away due to the surgical site dehiscence.

Attached below, you will find my medical notes from the day of Rocky's surgery.

Upon discussion with Rocky's handlers and seeing photos- the skin sutures had all been removed, I'm assuming by Rocky getting around the e-collar. Additionally, the caregivers report that he was extremely active post op, despite their attempts to keep his activity restricted.

It is my opinion that the surgical line broke due to him removing his own sutures and failure of the internal sutures to hold with his high level of post op activity.

Without seeing him in for a post mortem exam, this would be the suspicion but a post mortem exam would further our ability to identify a cause.

Please let us know if you have any further questions and we are all very sad to hear of Rocky's passing.

Dr. Elisabeth Broussard

Surgical notes from 16/10/25

2025-10-16 16:32:23 Unilat cryptorchid

intensely aggressive dog- took multiple attempts at sedation w/ handler getting bitten despite arriving on chill protocol

intra op abs and nsaids



PRINCIPAL: G.P. KOURY BVSc MRCVS.

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GA:

sx. the scan that was performed at previous DVM said it was the L teste but it was the R that was cryptorchid

ventral midline incision made and the vas def can easily be found and traced into the inguinal canal HOWEVER it never developed into obvious testicular tissue- a sample/ what looked like it might be a very underdeveloped test was removed and will be sent to VDX for histopath if we can get permission

regular open castration on L side was performed

closed all sites w/ 2-0 pds, inc. body wall w/ modified simple interrupted/ continuous, SQ, and intradermal w/ 2-0 pds w/ the addition of horizontal mattress skin sutures for added strength in case e-collar doesn't work/ stay on (handler initially declined but we really do need one in place)

recheck prn

we can reassess once we see histopath result

s.o would be good, but the skin sutures are absorbable, as removing them is not likely an option

eb

