Laparoscopic surgical techniques allow for less invasive surgery, leading to less postoperative pain and surgical stress, but still requiring several incisions. Each incision has the potential to cause pain, bleeding, internal organ damage, cosmetic concerns, infection, and herniation of abdominal contents. Laparoscopic single-site surgery (LESS) or single incision laparoscopic surgery (SILS) has been used extensively in humans to minimize trauma from multiple-port access. The technique requires an operating telescope and working channel (ie, access port). A multi-instrument access port can accommodate 2 instruments while also leaving space for a telescope and an insufflation cannula through a single incision.

This study described the use of a multi-instrument access port, the SILS Port (silsport.com), using straight standard laparoscopic instruments. The SILS Port may allow laparoscopic ovariectomy to be performed with or without a suspension suture with equal ease, safety, and speed. Data from 40 client-owned dogs were collected, including placement of a transabdominal suspension suture, fat score of the ovarian ligament, surgery duration, ovarian resection duration, and peri- and postoperative complications. The study concluded that ovariectomy can be successfully performed with minimal complications in dogs of different signalments and variable ovarian pedicle fat. The lack of a transabdominal suspension suture increased collision between the instruments and telescope. Surgical time (range, 16 min–39 min) did not vary between groups with or without the suspension suture. No significant surgical complications were noted and the dogs recovered uneventfully.

**Commentary**

Among the many benefits of laparoscopy, smaller incisional length (thus less morbidity than routine open abdominal procedures) has always been a major point. Traditional laparoscopy uses 3 ports, 1 for the camera and 2 for instruments. With decreasing portal numbers, maneuverability of instruments becomes more difficult.

This described use of 1 port and 1 incision, but within the single port 3 instruments can be inserted. Drawbacks include more difficult triangulation from tight quarters and a larger incision than would be used with an average single instrument portal. This study used a vessel sealing device, as opposed to ligatures which likely increased success in such tight quarters.—**Krisy Broaddus, DVM, MS, DACVS**

**Source**