Global Assessment of the Emergency Patient
Janet Aldrich

The goal of global assessment is to identify all the patient’s problems in the order of their importance to survival so that action is taken at crucial points. Caring for emergency patients is a team effort led by the veterinarian. Skill in performing the physical examination is essential to identifying problems. An organized approach is essential so that all the important questions are asked. A format for global assessment is provided.

Approach to the Patient with Respiratory Distress
Elizabeth Rozanski and Daniel L. Chan

Respiratory emergencies are common presentations to emergency clinicians. Appropriate assessment and timely interventions may be crucial in the stabilization of dyspneic patients. The emergency clinician should be fully prepared and equipped to correctly ascertain and treat the most likely cause of respiratory compromise of a patient. Based on history, signalment, clinical presentation, and brief physical examination findings, the clinician should be able to formulate a plan of action to relieve respiratory distress and communicate with the owner about the diagnostic and therapeutic strategies and overall prognosis of the patient. Prompt recognition of the underlying respiratory disease and complete familiarity with emergency diagnostic and therapeutic procedures can lead to the successful management of many emergency respiratory patients.

Assessment and Treatment of Perfusion Abnormalities in the Emergency Patient
Amanda K. Boag and Dez Hughes

Perfusion abnormalities occur commonly in emergency patients secondary to a large number of underlying disease processes.
The ability to recognize and effectively treat hypoperfusion forms the cornerstone of the emergency management of many of these patients. Global or systemic hypoperfusion can occur secondary to a reduction in the effective circulating intravascular volume (hypovolemic shock) or reduced ability of the heart to pump blood around the body secondary to reduced cardiac function (cardiogenic shock), obstruction to blood flow (obstructive shock), or mal-distribution of the circulating intravascular volume (distributive shock). Global tissue hypoperfusion is initially assessed by a careful physical examination supplemented by measurement of hemodynamic and metabolic parameters. When treating hypoperfusion, the goal is to restore blood flow and oxygen delivery to the tissues rapidly, and the precise treatment used depends on the underlying cause and severity of the perfusion abnormality.

Assessment and Treatment of Central Nervous System Abnormalities in the Emergency Patient
Rebecca S. Syring

Disease of or injury to the central nervous system is a common reason for hospital admission on an emergency basis in veterinary medicine. Head injuries, seizures, and diseases that lead to intracranial hypertension frequently result in significant alteration of neurologic function. A thorough understanding of the pathophysiologic disturbances that occur during these conditions is paramount for providing stabilizing emergent care. A detailed approach that focuses on meticulous physical evaluation, provision of timely and optimal stabilizing treatment, and continued monitoring can aid in improving outcomes in animals with signs and symptoms of neurologic disease or injury.

Urinary Tract Emergencies
Teresa M. Rieser

A review of common emergencies of the urinary system is presented, with a focus on initial stabilization and treatment. Urethral obstruction, uroperitoneum, and acute renal failure are discussed.

Approach to the Acute Abdomen
Matthew W. Beal

Acute abdomen refers to the acute onset of abdominal pain. The underlying etiology of acute abdomen in the small animal patient may be minor and transient or an immediately life-threatening process. This article focuses on the approach to the patient with acute abdomen, including triage, history, physical examination, an emphasis on the diagnostic workup for these patients, and various aspects of acute management. Successful management of the patient with acute abdomen results from a proactive approach to management, including the rapid stabilization of major body
systems, early identification of inciting problem(s), attention to comorbid conditions, and timely definitive therapy.

Reproductive Emergencies
L. Ari Jutkowitz

The emergency clinician is frequently called on to manage problems relating to the female reproductive tract. Because owners seldom have the medical knowledge needed to differentiate normal from abnormal reproductive behaviors, they frequently look to the emergency veterinarian for guidance and information during and after parturition. For this reason, it is essential that the veterinarian have a good understanding of the normal reproductive cycle as well as the common emergencies that may occur. This article reviews the events surrounding normal parturition in the dog and cat and the reproductive emergencies seen most commonly in practice.

Pediatric Emergencies
Maureen McMichael

There are significant differences in the biochemical, hematologic, radiographic, pharmacologic, and monitoring parameters in neonatal and pediatric animals compared with their adult counterparts. Knowledge of these variations is essential for any practitioner with a neonatal or pediatric patient emergency base. This article is intended as a review of these parameters and of the most common emergency presentations seen in this age group.

Anesthetic Protocols for Common Emergencies
Vicki L. Campbell

Anesthesia, sedation, and pain management are everyday occurrences in emergency veterinary practice. Knowledge of and familiarity with anesthetic drugs in conjunction with an understanding of the unique physiology of the emergency patient are crucial in the approach to anesthesia of the emergency patient. This article focuses on the pros and cons of anesthetic agents in the emergency patient; how to approach sedation, anesthesia, and pain management in the emergency patient; and a brief discussion of monitoring the anesthetized emergency patient. The article concludes with several common emergency case scenarios and an approach to sedation, anesthesia, and pain management in these patients.

Ophthalmic Emergencies
Deborah C. Mandell and Elaine Holt

Ophthalmic emergencies are common presenting complaints in an emergency room. Most ophthalmic emergencies can be treated and stabilized until an ophthalmologist can be consulted. Most ocular
emergencies involve loss of vision, compromised globe integrity, or severe ocular pain. Delay in treating true emergencies may result in a blind eye or loss of an eye. This article discusses the clinical signs, diagnosis, and treatment as well as the prognosis of some of the more common ophthalmic emergencies.

Analgesia and Chemical Restraint for the Emergent Patient

Karol A. Mathews and Doris H. Dyson

This article discusses analgesia and chemical restraint for the emergent patient. As illness or injury affect all organ systems, specific recommendations and considerations of analgesic, anesthetic, and restraining regimens are presented. As animals of all ages, from neonates to geriatric and those that are pregnant or lactating, may require management of their illness or injury, recommendations for these patients are also presented.

Practical Considerations in Emergency Drug Therapy

Tim B. Hackett and Tracy L. Lehman

Drug therapy is integral to emergency and critical care medicine but can also be the source of serious medical errors. There are important considerations with regard to drug, route, and interactions that require close attention in critical patients. The continuous development of new therapeutics and new information concerning current therapies requires practitioners to continually review drug therapies. This article addresses general guidelines, routes of administration, dosage calculations, interactions, monitoring recommendations, and resources available to help clinicians improve their drug therapy practices.

Index