Specialty veterinary medicine is a relatively new advancement in pet care. Similar to specialists in human medicine, board-certified veterinary specialists focus their education and services in one specific area.

Post-operatively, the recovering patient is carefully observed by the ICU or surgery staff until the swallowing reflex returns and the endotracheal tube can be safely removed. At this time a narcotic may be administered to help smooth recovery and minimize post-surgical discomfort. Vital signs (temperature, pulse, and respiratory rate) are monitored until they are normal.

Any anesthetic procedure has a risk, whether the patient is anesthetized once or multiple times, or whether the patient is ill or healthy. However, with proper examination of the patient’s general condition, appropriate pre-operative screening, careful selection of anesthetics and attentive monitoring, that risk can be minimal. Your OVRS doctor will discuss with you any risk factors your pet may have before sedation or general anesthesia to ensure the safest anesthesia for your special furry friend.

Have you been referred?
Things to bring at the time of your consultation:
• Recent radiographs and blood work
• Medications your pet is being given

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# Is Anesthesia Safe for My Pet?

Most pet owners are concerned about having their pets sedated or anesthetized. A certain amount of risk always exists when these procedures are performed; therefore the patient’s general condition must be considered in that risk. Contemporary veterinary anesthesia is very similar to that available in human medicine. Overall, the use of modern sedatives and anesthetics involves minimal risk for your pet.

Anesthetics are selected for patients based on their health status as determined by physical examination, laboratory results and other diagnostic aids, and the type and length of the procedure to be performed. For example, some injectable anesthetics require breakdown by the liver for the patient to recover from the sedative effects. If the liver is not functioning properly, anesthetic agents requiring deactivation by the liver would not be used, and other agents would be selected for anesthesia.

# How Will My Pet Be Monitored?

Body temperature is maintained by use of a circulating warm water blanket or warm air blanket while the patient is under anesthesia. The heart rate is monitored by use of a stethoscope and/or electrocardiograph (ECG) monitor. Blood pressure monitoring is used to help assess anesthetic depth and maintain major organ blood flow. Red blood cell oxygen saturation is also monitored with a pulse oximeter.

The anesthetist monitors respiratory rate and depth, and respirations can be assisted with a mechanical ventilator if indicated. Additionally, carbon dioxide levels can be monitored to further evaluate the respiratory status of some patients and determine the need for mechanical ventilation. Intravenous fluids are usually administered through one or more intravenous catheters to maintain hydration, blood pressure, and urine production.

Our trained technicians will diligently monitor your pet throughout the anesthetic episode with the help of skilled veterinary assistants. Oakland Veterinary Referral Services also employs a veterinary technician specialist (VTS) with advanced training in the field of veterinary anesthesia.

# What is the Difference Between Sedation and General Anesthesia?

Sedation is used for short, non-painful procedures such as radiographs, joint taps, or bandage changes. Sedation is usually administered by an injection and often involves a strong narcotic. The sedated patient often remains conscious throughout the procedure. Some sedatives will gradually wear off over several hours, while others can be “reversed.” Reversible agents allow the patient to recover rapidly to the pre-sedative state.

Inhalation gases are used most frequently for maintaining general anesthesia. Initially an injection of a short-acting anesthetic agent is administered to facilitate passage of an endotracheal tube. The endotracheal tube is then placed into the patient’s trachea (windpipe), and the anesthetic gas, mixed with oxygen, is delivered to the patient through an anesthetic machine. When the procedure is finished, the patient recovers from the inhalation anesthesia by breathing pure oxygen while exhaling anesthetic gas. Under normal conditions, dogs and cats begin to awaken within 15 minutes of cessation of the anesthetic, with a full recovery usually taking place within 2 hours.