

Crossing the Road- Poultry Getting Veterinary Care

A Chicken Walks Into an Exam Room - Introduction to Poultry in Practice

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General Stabilization of the Poultry Patient –

Assessment of Your Patient – Limited physical examination and handling if obviously stressed

- Visual assessment – Know what is normal --- BAR or not, Color – Capillary Refill Time (Comb), Breathing and tail bobbing, Ability to move and walk, Drooping evaluation
- Temperature may be used to assess hypothermia and monitor improvements.  
normal temperature = day old chick 103 degrees      adult 105-107 degrees F
- Respiratory Rate – 15-30 rpm – gurgling, rales, snicking      Heart rate up to 300 bpm

Pulse oximeter simple and easy to use with proper placement

- PLR/corneal reflex --- menace reflex is not as good

Stabilization of the Fragile Patient

Dim lights, No sudden movements or loud noises, Minimize handling, Use of light cloth to cover head

Placement of patient into an oxygen chamber

Can be a simple plastic tub/crate/cage with a cover and O2 tube

Hypothermia - Bring body temp to acceptable level (normal 105-107F)

Stabilize first, Collect minimal samples (CBC/panel/diagnostic swabs), Imaging

Monitoring Your Patient

- Temperature – prevent hypothermia
- Capillary Refill Time – use comb or wattle (if red)
- Cardiovascular (150-300 bpm) - Stethoscope, ECG, Doppler
- Respiratory – Visual, Pulse oximeter, Capnograph

Sedation and Anesthesia

Midazolam – wide safety margin, well absorbed IM (compared to diazepam), reversal

Butorphanol- mammals more sedative/birds more analgesia, used in combination with midazolam

Alfaxalone- IM/IV.SQ, minimal CV depression, no/low analgesia, used in combination with midazolam

Isoflurane/Sevo- Used to deepen anesthetic plane. Can be used via endotracheal tube on non-rebreathing system or mask. Not used alone.

IV Fluid Administration – IV (3 sites) or IO

Good review article of additional sedation and anesthesia protocols

Backyard Poultry and Waterfowl Sedation and Anesthesia, Molter et al. ,

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Imaging – Both radiographs (bones, foreign bodies) and ultrasound (coelomic, reproductive) are useful.

Surgical Interventions that will be illustrated include infraorbital sinus surgery, ingluviotomy, pododermatitis (bumblefoot), celiotomy, and others.