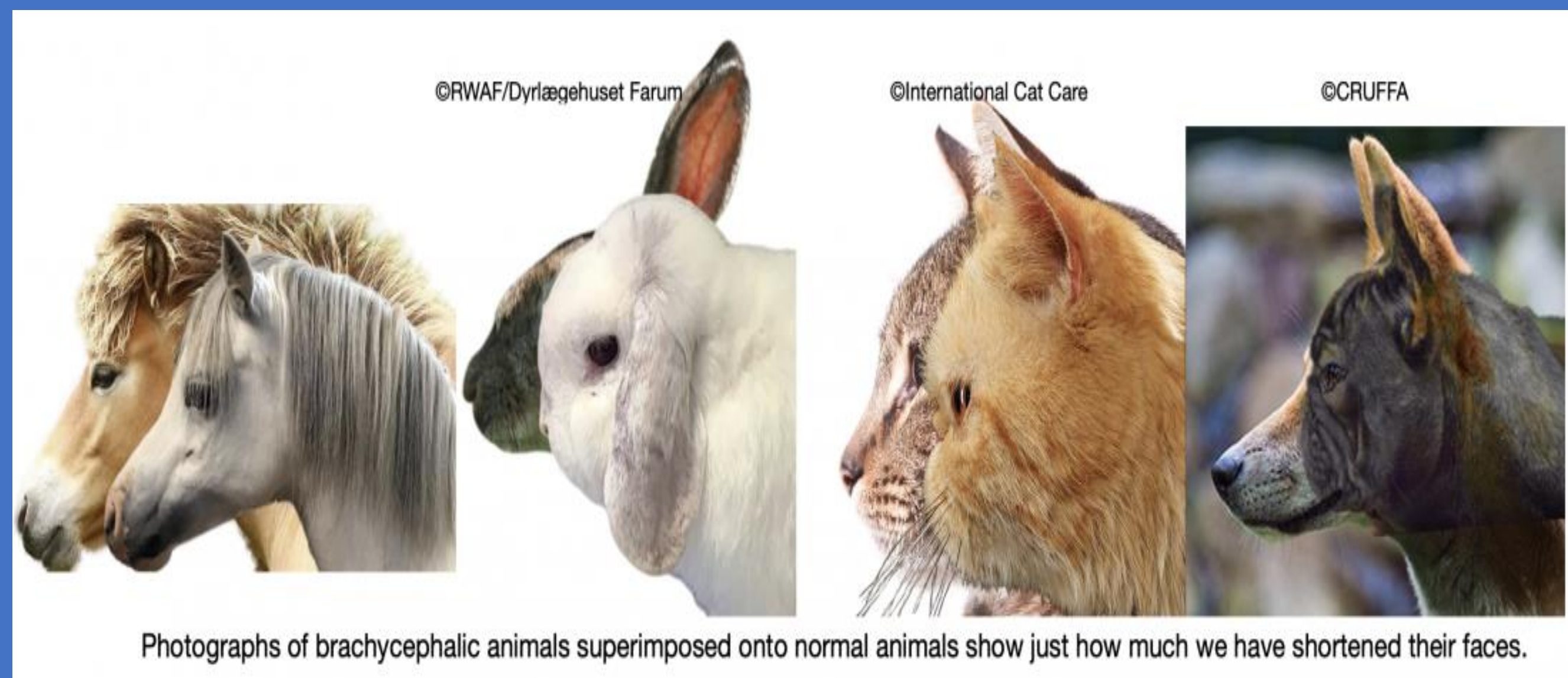


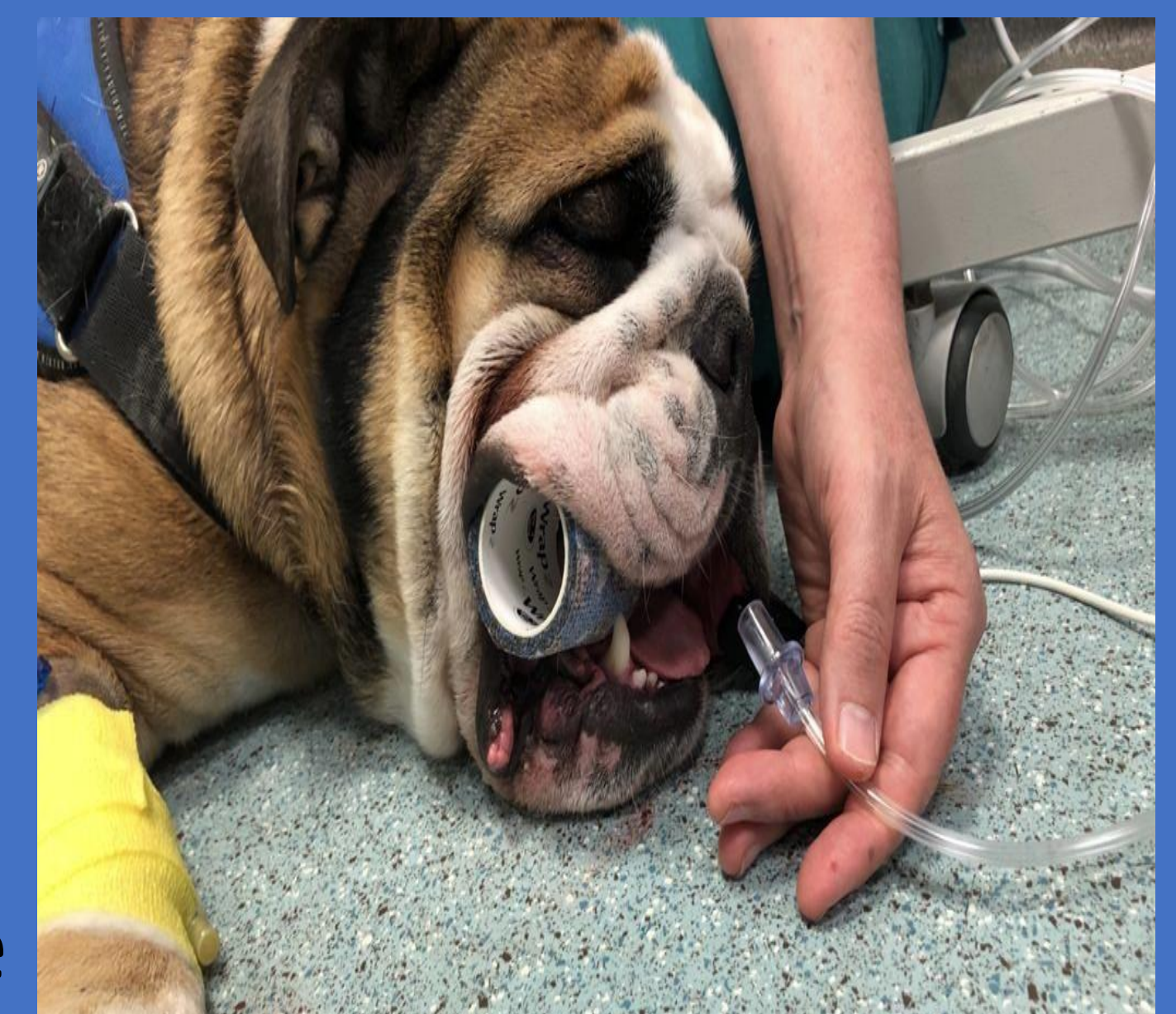
NURSING THE BRACHYCEPHALIC PATIENT

Lindsey Ashburner VTS (ECC) Cert VNECC AFHEA RVN



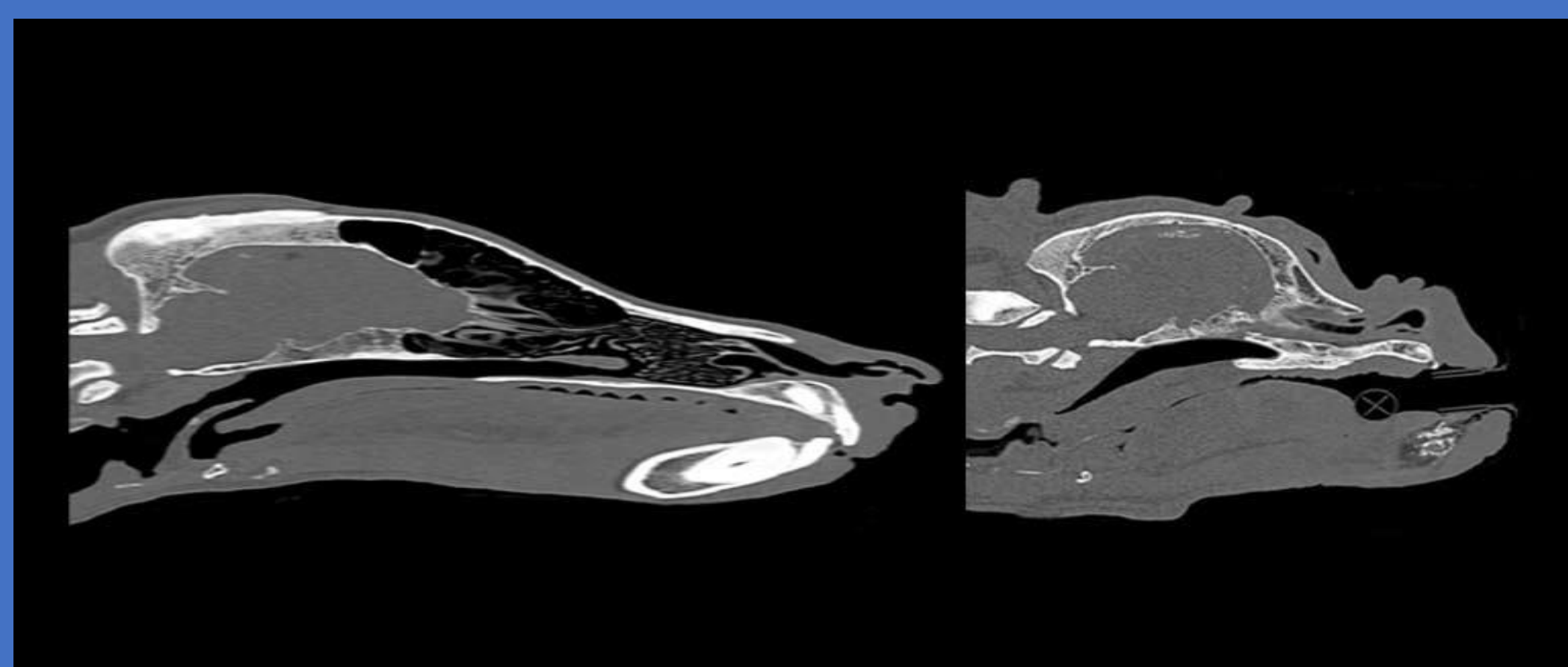
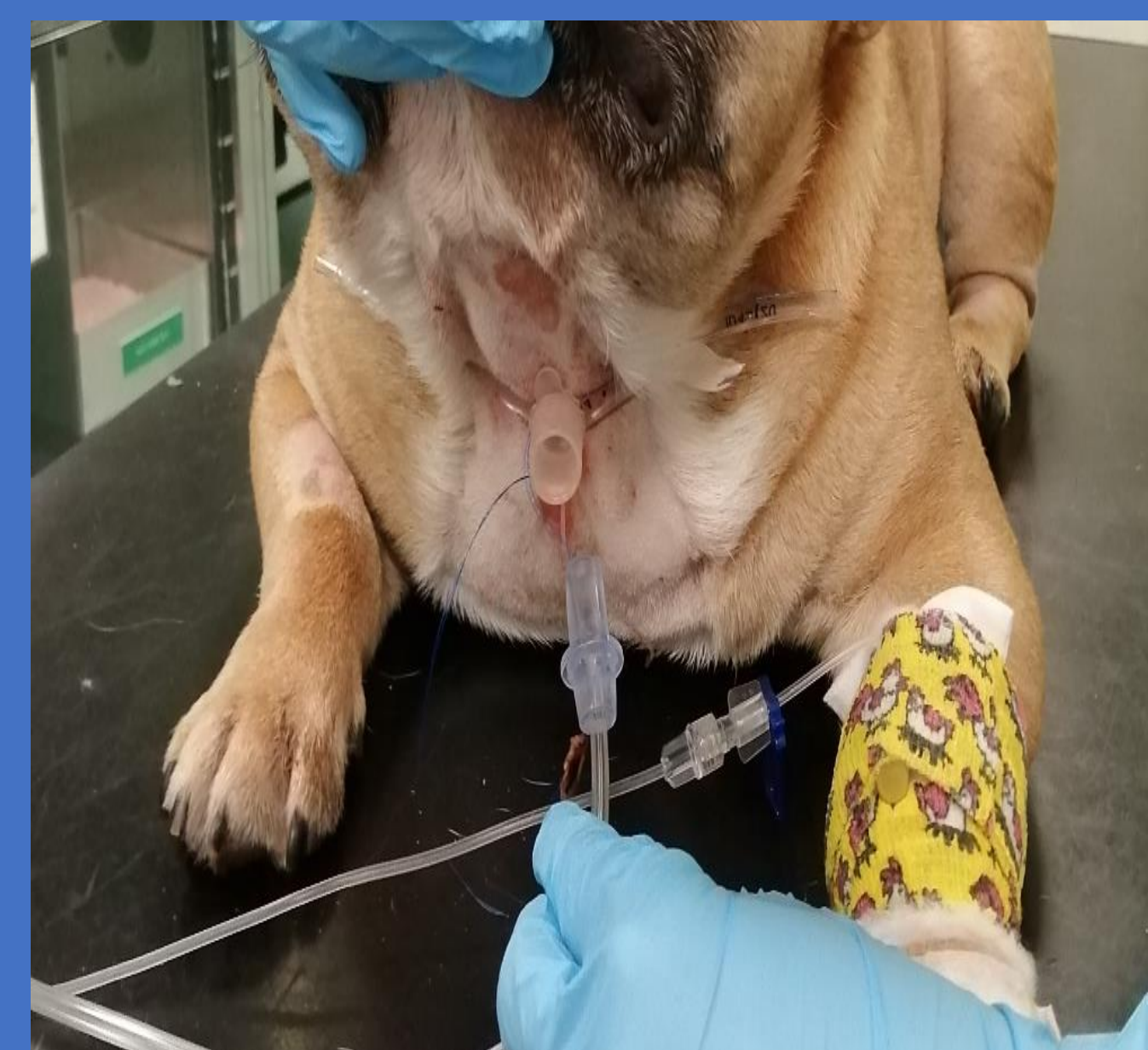
Emergency stabilisation

- Reduce stress & relieve respiratory distress
- Sedation – IV or IM
- Oxygen therapy
- Active cooling
- Induction and intubation
- Temporary tracheostomy tube



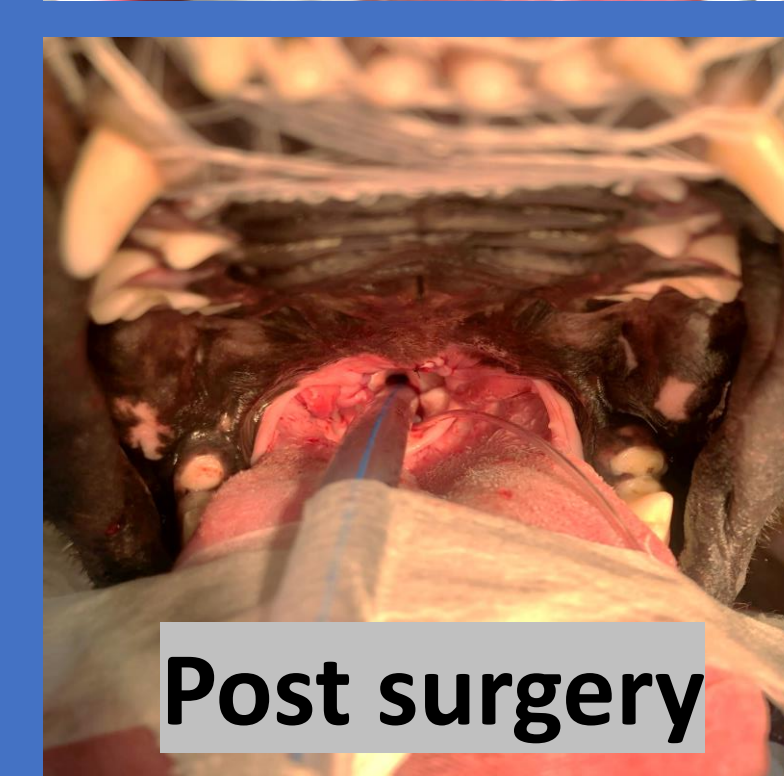
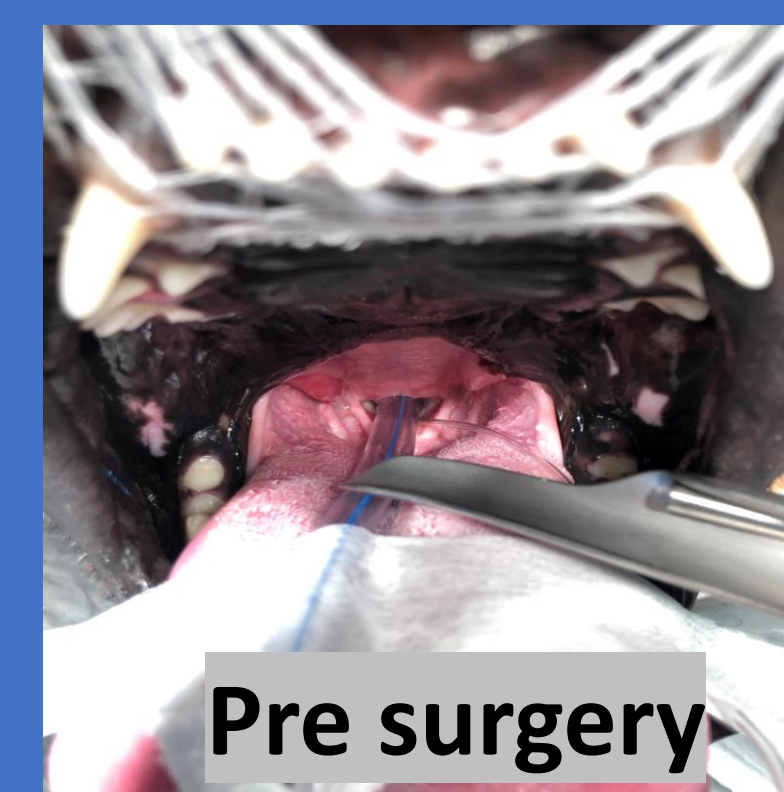
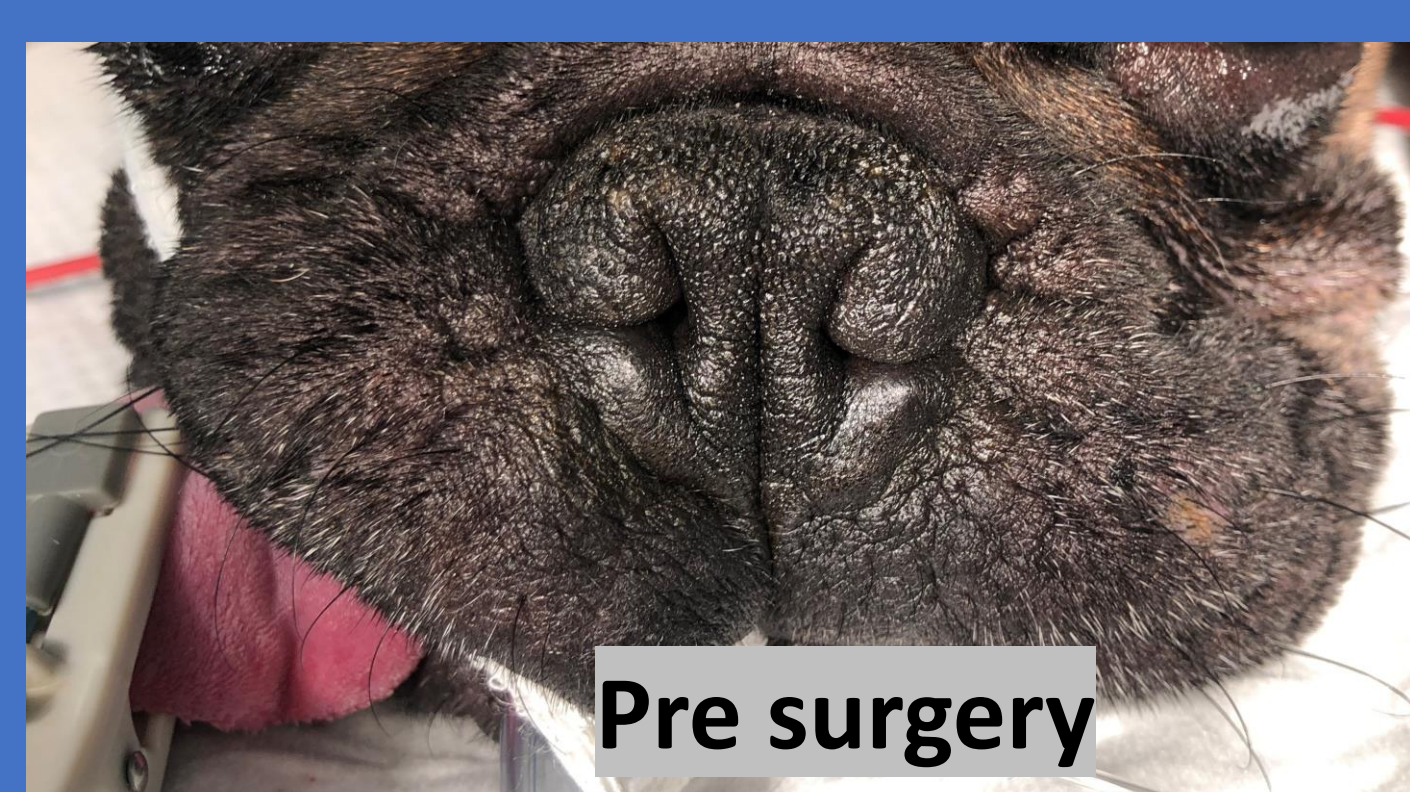
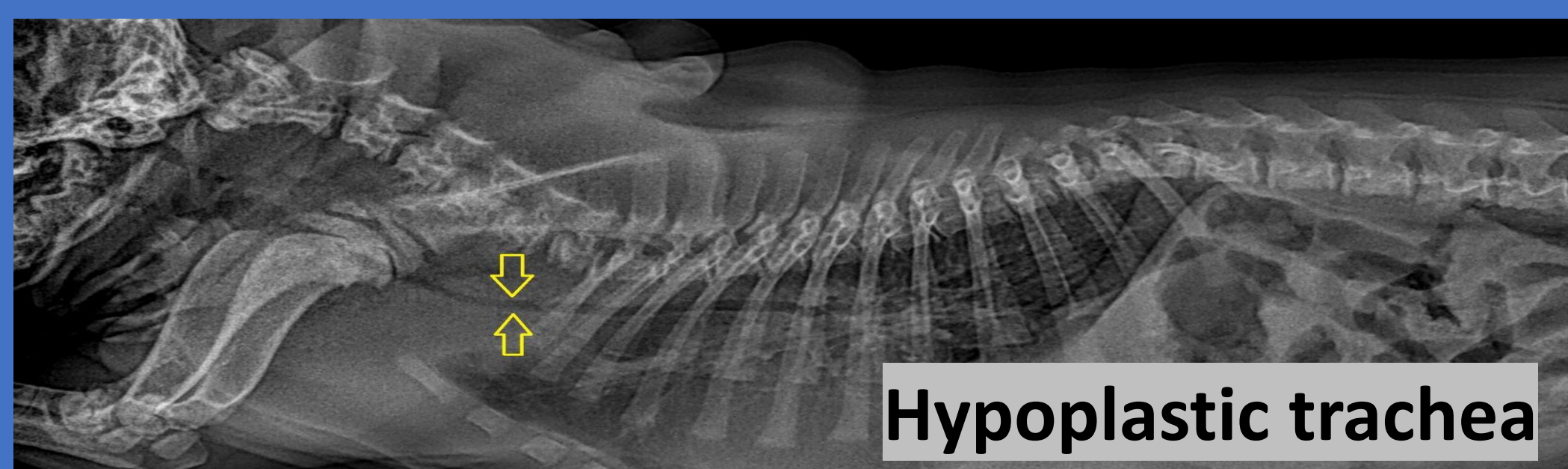
Multiple health & welfare problems associated with extreme brachycephalia

- Skin fold pyoderma
- Protruding globes
- Spinal cord compression
- Dystocia
- Dental malocclusion
- GI disorders
- Neurological disorders
- Brachycephalic Obstructive Airway Syndrome (BOAS)



BOAS

- Stenotic nares
- Elongated, hypertrophied soft palate
- Aberrant, abnormal nasal turbinates
- Enlarged tongue
- Tracheal hypoplasia
- Everted laryngeal sacculles
- Tonsillar eversion
- Laryngeal & tracheal collapse
- Syncope



Surgical interventions

- Rhinoplasty
- Palatoplasty
- Tonsillectomy
- Laryngeal saccullectomy
- Turbinectomy
- Laryngeal tie-back
- Permanent tracheostomy

Post-operative management

- Slow, controlled recovery
- Head elevated
- Oral cavity open
- Nebulisation
- Oxygen
- Sedation
- Supervised feeding
- Eye lubrication
- Supportive medication

