A Case Study

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This lecture will be used to present one case (maybe two if time allows) that presented for routine dental examination, radiographs, cleaning, and procedure based on examination (COHAT). Learning objectives will include:

- How was the patient evaluated prior to anesthesia and how did this impact our choices for anesthetic management?
- What co-morbidities were identified that affected this *specific* patient's anesthetic risk?
- Why specific premedications were chosen and why they were administered by the route given (i.e. oral, intramuscular, subcutaneous or intravenous)?
- Why was any particular induction agent chosen?
- What adjunctive medications were administered to reduce the inhalant requirement?
- Why were specific physiologic parameters monitored for this patient?
- What anesthetic complications were encountered and how were they managed?
- How was anesthetic recovery managed and were any problems encountered?
- What post-operative analgesics were given and why?

Veterinary patients require dental examination and procedures on a routine basis and likely represent some of the most common cases that require anesthesia in veterinary practice. While veterinary dentistry is considered routine, the management of these patients' general anesthesia can be quite complicated. For example, many patients may present with age-related co-morbidities such as renal or cardiac disease. Patients may be fractious, anxious, or generally difficult to physically restrain prior to anesthetic induction, making sedative choices pertinent to their management. Dental patients are at a higher risk of aspiration due to water, saliva, etc. in their oro-pharynx, so that must be predicted and monitored. Finally, most of these patients will be discharged at the end of the day, so returning them to their owners in a condition that both provides adequate analgesia without excessive drowsiness is important.

This lecture will present the case via the SOAP approach as an introduction to patient evaluation for general anesthesia for a dental procedure. Each aspect of the SOAP will be discussed in detail. Following the SOAP, the audience will be lead through the sequence of decisions related to patient management while under anesthesia as complications arose, with specific discussion of the treatments and why they were chosen. These may include specifics of fluid therapy, anti-cholinergics, inotropes or pressors, or adjunctive analgesics that were used to decrease the inhalant requirement.

Management of the patient at recovery will be discussed, including emergence delirium or dysphoria. What opioids could be used for analgesia while improving recovery and allowing the

patient to be discharged in a timely manner? And finally, where do NSAIDs fit into the picture and when should they be administered?

This lecture is encouraged to be interactive with questions from the audience as they arise!