

Clinical examination of reptiles



Clinical examination

- Anamnesis!!
- Species!!!!
 - Normal / abnormal?
 - Management
- Origin
 - Captive-bred vs wildcaught (~species)
- Age
- Accompanying animals



Management

- Temperature
- Ventilation / location in room
- Humidity
- Light
- Nutrition
- Occupation
- Terrarium contents



Anamnesis

- Behaviour
 - Feed intake
 - apathy
 - “vomiting”
- Faeces / urine



General impression

- Vivid - apathy - sopor - death
- Aggression / shyness
- ~ prognosis
- ~ stress, temperature







Clinical examination

- Feeding condition
- Hydration
- Skin
 - disecdysis
 - ectoparasites
- Body temperature...
- Respiration
 - Breathing: shallow + frequency?
 - open mouth breathing, CA
 - mucus / foam
 - auscultation?





Clinical examination

- mouth
- Cloaca
- Ossification
 - Carapax / plastron
 - mandibula
- Faeces / urine
- Parasitological examination of faeces





Additional...

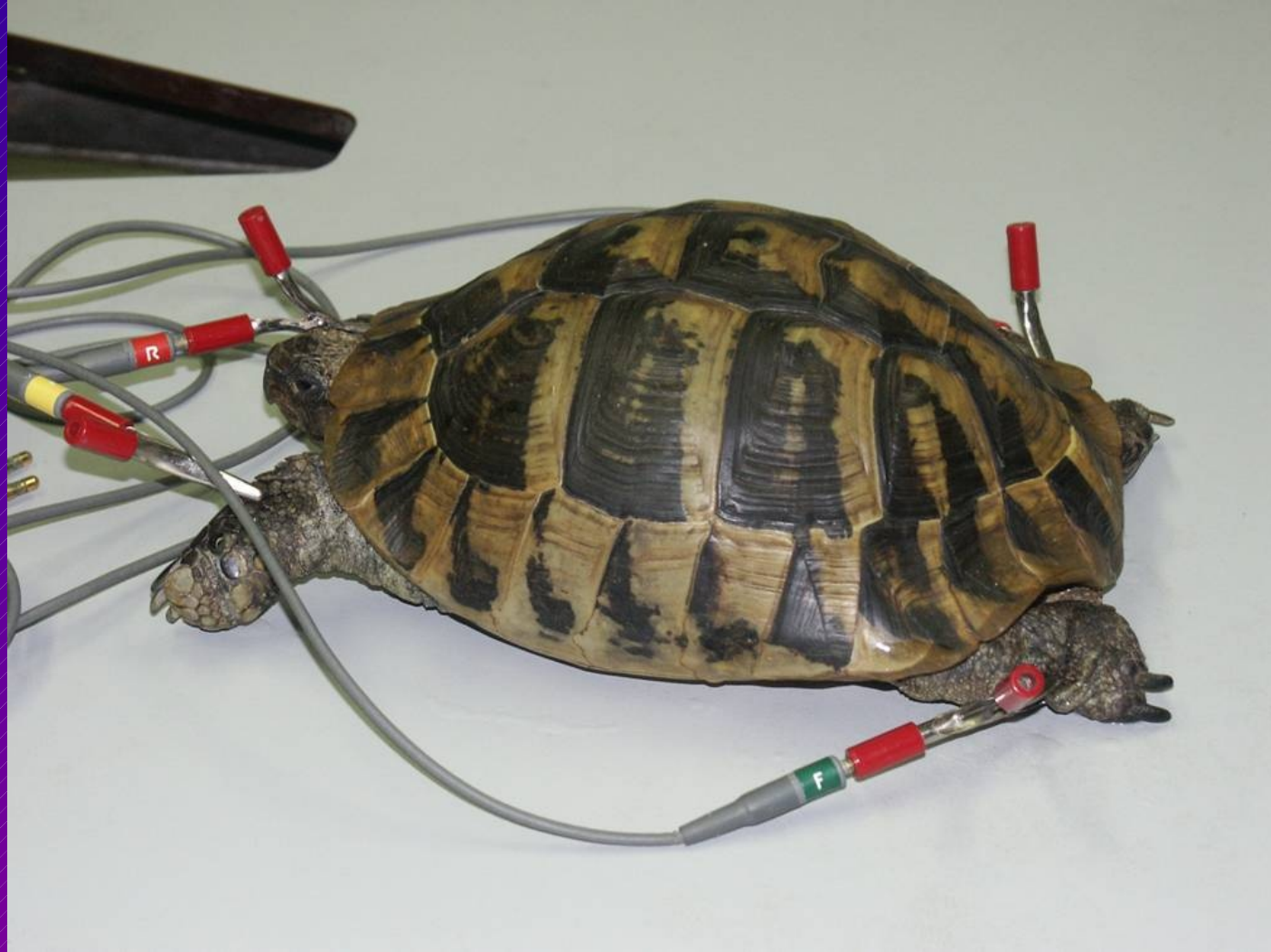
- RX
 - dystocia, SNHP, fractures, pneumonia
- Haematology
 - Kidney / liver

Echo

organs (kidney! Liver!), gestation, follicles, bladder, heart...

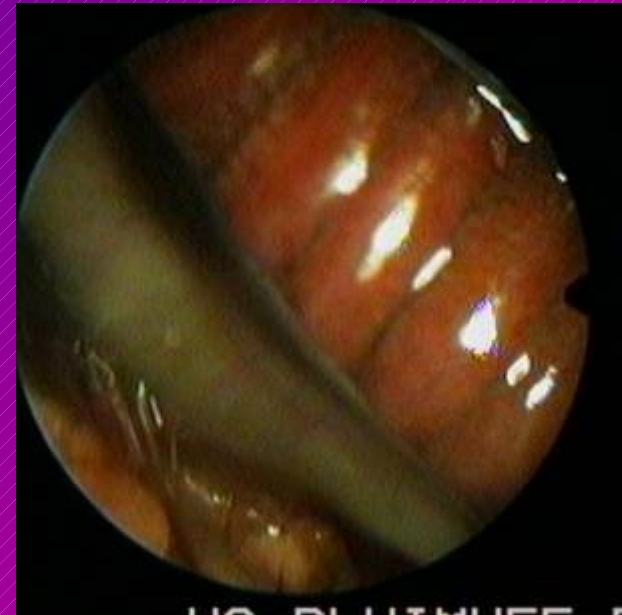
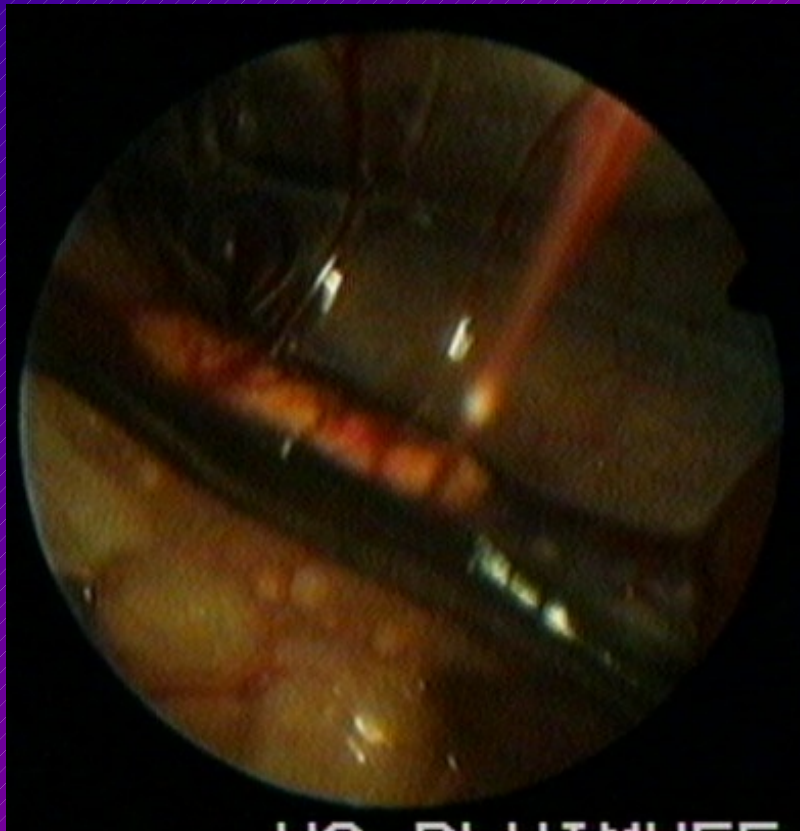


ECG



Endoscopy

Coelomic cavity,
trachea...



Anaesthesia and euthanasia of reptiles



Anaesthesia

- Difficult!!!
 - Induction / recovery
 - eg. ketamine / isoflurane
 - doses anaesthetics
 - eg. ketamine
 - depth
- PBT
- fast?

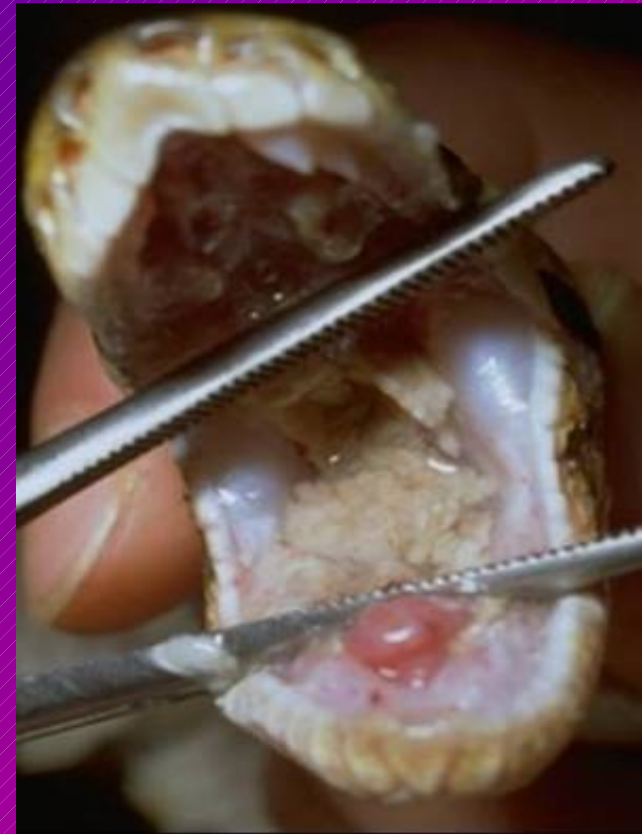
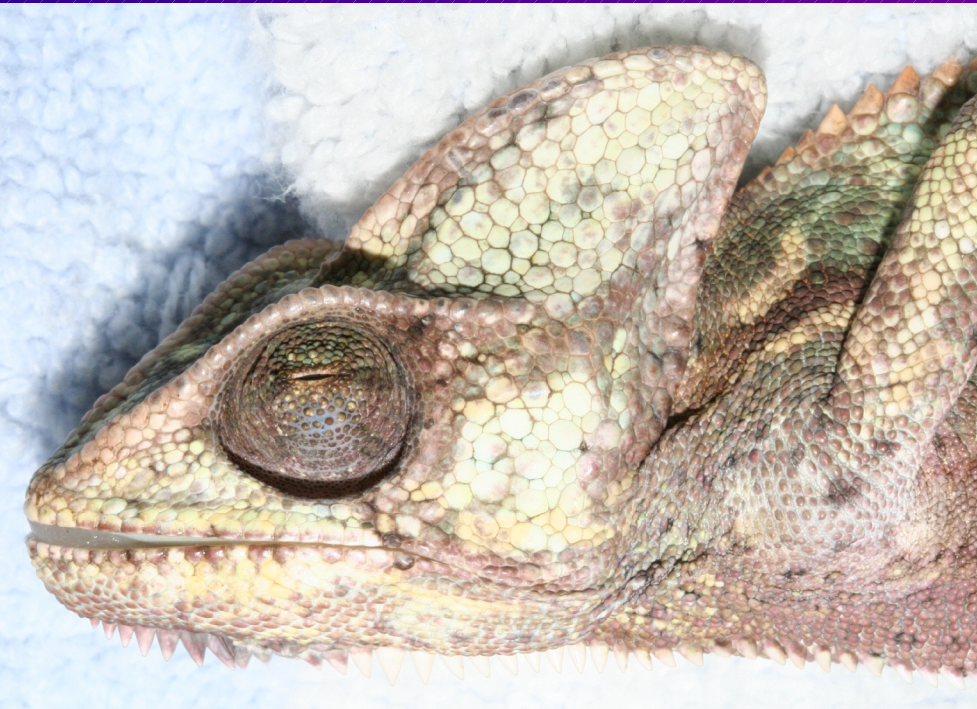


Anaesthesia

- Advantages of reptile anaesthesia
 - NO hypothermia
 - Apnoea
 - Low anaesthetic risk



Pre anaesthetic examination



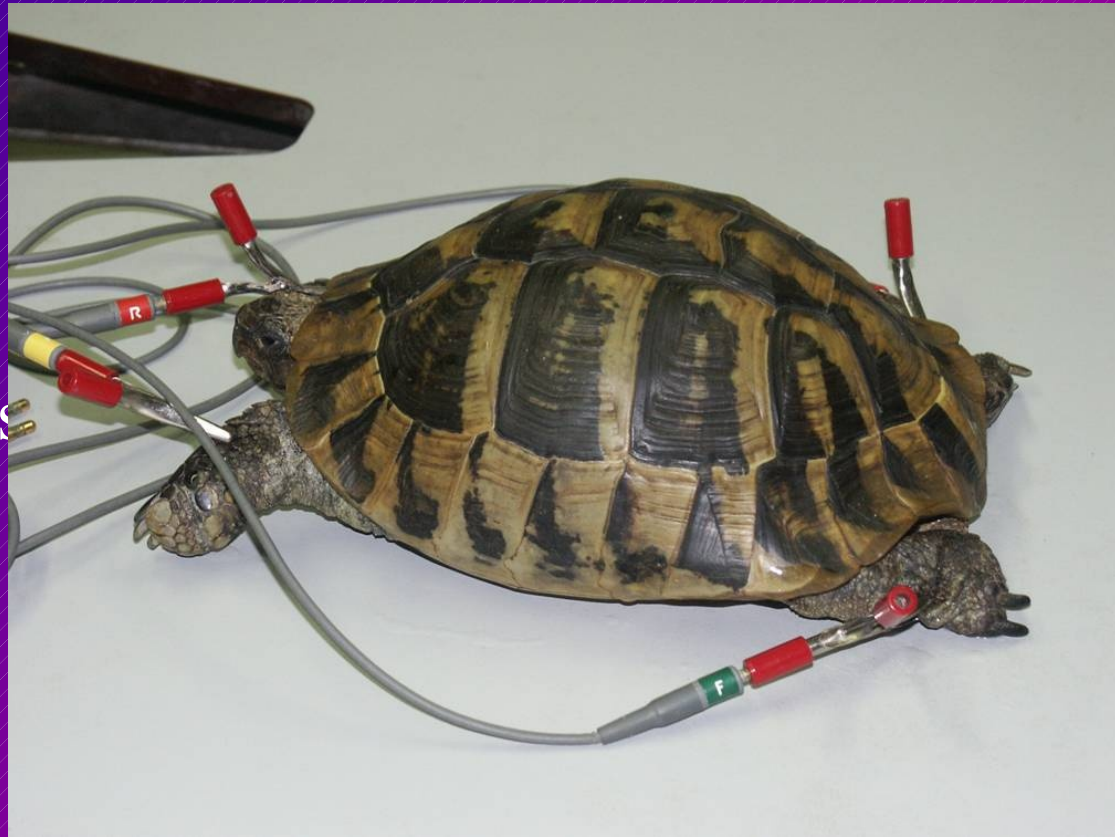
Anaesthesia

- depth:
 - Rightening reflex
 - spinal reflexes
 - Pain reactions
 - Corneareflex, tong withdrawal reflex
 - Cloaca reflex



Monitoring

- ECG?
- Pulse oximetry
 - Small animals
 - Epidermal scales
 - Rectal probes?
- Capnography?



Anaesthesia

- Muscle relaxation
 - Benzodiazepines
 - Succinylcholine / curare derivatives
 - (α_2 agonists)

Anticholinergics?

Analgesia

- ketoprofen, meloxicam
- Buprenorphine, butorphanol
- α_2 agonists



Injection anaesthesia

- Injection
 - ketamine
 - Sedation, induction, maintenance
 - high doses (50 mg/kg *Trachemys!*)
 - Variable results
 - Extremely long recovery
 - Not when renal insufficiency
 - apnoea > 100 mg / kg
 - Muscle relaxation and analgesia?
 - > xylazine, medetomidine ↓
 - barbiturates?
 - NO (ex methoxital, advantage: SC administration)



Injection anaesthesia

– Propofol!!

- Induction
- high doses (7-20 mg/kg)
- apnoea



Inhalation anaesthesia

- Anaesthesia of choice
- Induction:
 - propofol / methoxital
 - Mask
 - Open drop (breath keeping! Premedication)
 - Intubation!
- Carrier gas: O₂ / N₂O (?) / air





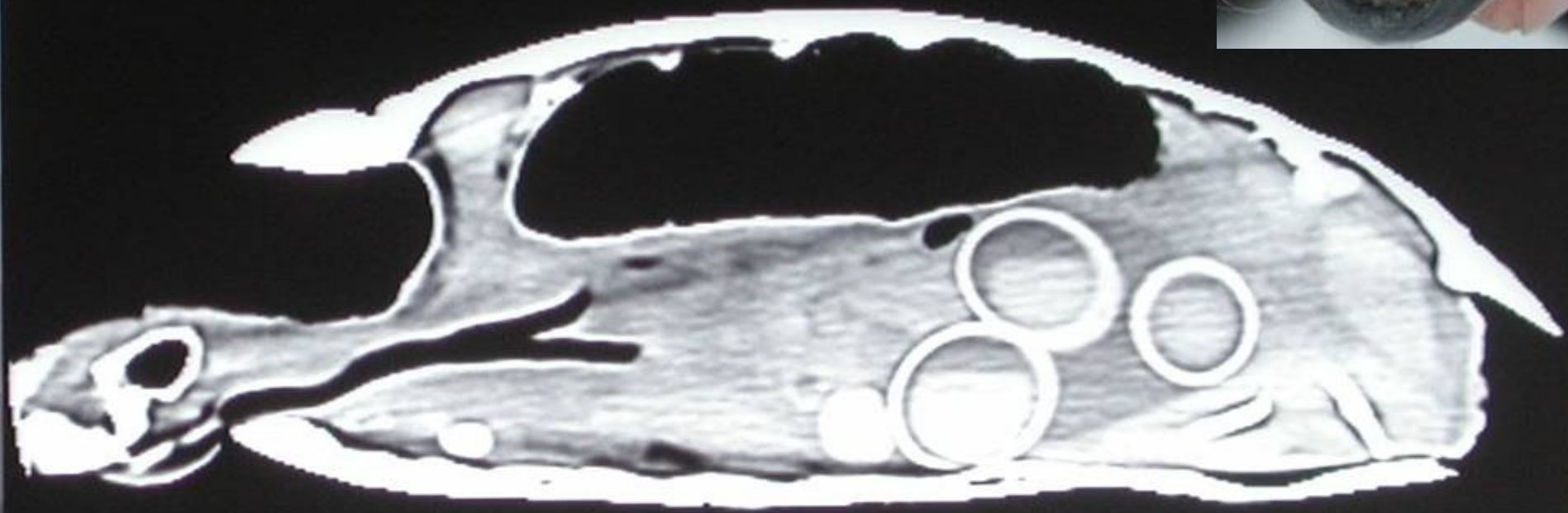


Inhalation anaesthesia

- Isoflurane
- Induction and maintenance
- mask / intubation (no cuff!) / open drop
- Poor analgesia
- IPPV!!
 - 12 cm water
 - 20 ml / kg







Recovery



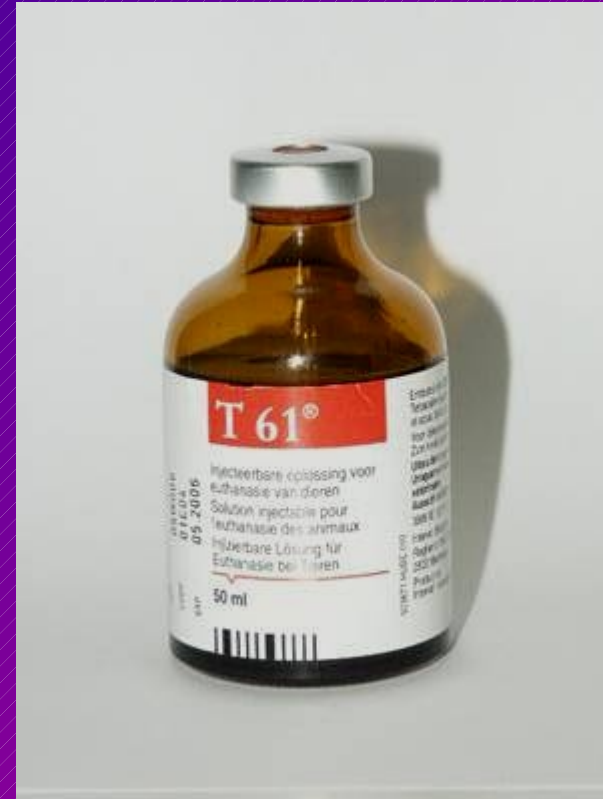
& Danger: Promotes nitrogen narcosis. Do not use
anesthetics
& Warning: The Snake does not smell well around the
the nitrogen

Warning
Cyanide
Snake Failure
Power Failure



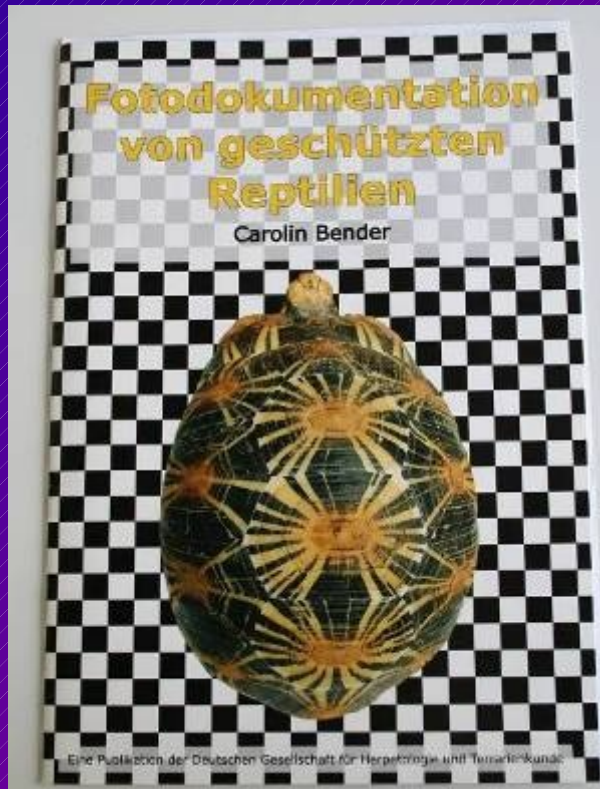
Euthanasia

- Difficult!
- Preferably IV, IO, IC
 - barbiturates, T61
- Never decapitation!!
- NEVER freezing!!
- DEAD?



Identification of reptiles

- Microchips /
- transponders (ISO!)
- photo ID



Transponder

