

## New Vet Jumpstart Twenty Emergency Medicine Cases Edits

Edits to Pay Attention To for Anyone who purchased a book that was printed prior to November 15, 2023. Pls make these changes into your existing books!

Chapter/Page in Book	Correction (bolded)
Page 67, the Addisonian Crisis in a Dog Chapter	<p>Added the below text that is blue/bolded to further clarify '2. Decrease potassium levels.... This IV slowly over 20 minutes' blurb.</p> <p><b>Dr. Jess Tip: If you're giving more than one dextrose bolus, you want to dilute this more - Plumb's says 1:2 to 1:4. This 1:1 dilution should be fine for a one-off, but more than that runs a risk of phlebitis because dextrose is quite hypertonic.</b></p> <p><b>If it's a bit confusing to remember when to dilute how much, just pick 1:2 or 1:4 and stick with that all the time for boluses and you'll be safe.</b></p> <p><b>And remember if you're running dextrose as a continuous solution, it can't be more than 5% or you're definitely asking for phlebitis. If your patient needs higher concentration than that, you can place a second peripheral line and give it through that as well or place a central IV catheter.</b></p> <p><b>At my practice, we check IV sites every 2-4 hours when on 5% dextrose so we can catch any phlebitis before it gets nasty!</b></p>
Blocked Cat Chapter Pg 98 "Sedation Options to Consider" Correction of suggested dose of prop/alfaxalone	<p>Should say: Propofol or Alfaxalone Calculate <b>1-4 MG/kg</b> to draw up and have available to give SLOW to effect</p>
Page 224 in Pyometra in Cat Chapter says:	<p>Should say: <u>Pain management:</u> An opioid and anti-inflammatory is appropriate here. We like Methadone or Hydromorphone along with Robenacoxib (can do a post-op SQ injection until they are eating).</p> <ul style="list-style-type: none"> <li>○ T.G.H.: Gabapentin and</li> </ul>

	<p><b>Robenacoxib</b> to go home is our typical plan for 5-7 days</p>
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