

Avian Physical Exam

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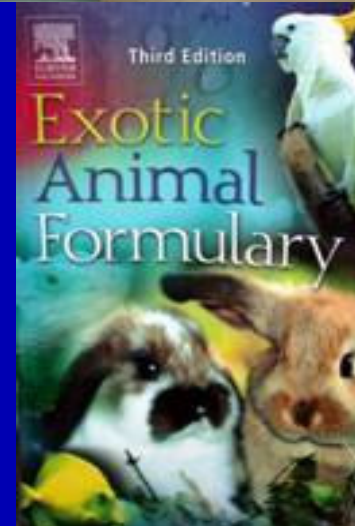
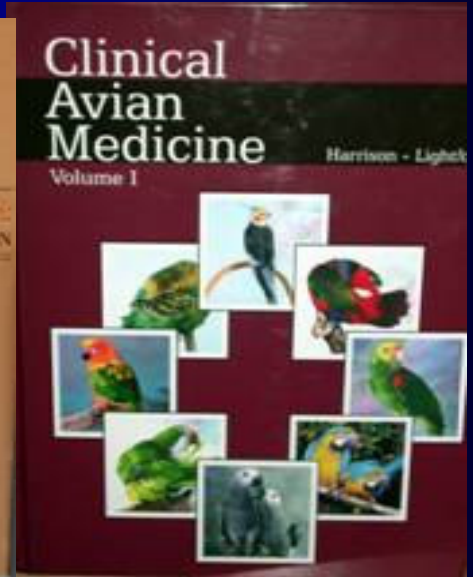
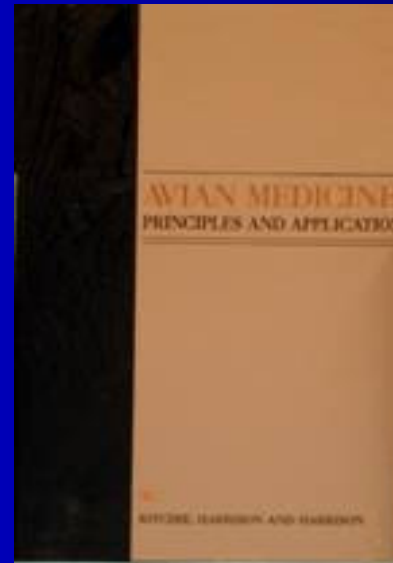
Companion Avian/Exotic Pet Medicine & Surgery

Veterinary Medical Teaching Hospital

University of California @ Davis

References

- Books & references
- Normal reference ranges.
- Keep good records on your patients.
- Patients previous routine blood work serves as base line.
- Continuing education
 - A MUST!



Compassion and Knowledge

- Patient experience
 - Non-threatening and safe
- Pets are **FAMILY MEMBERS**
 - Treat them like the pet is their child
- Client experience
 - Pleasant and informative



Client Education

- Know proper care of the *species* and be able to facilitate the client's and patient's needs
 - HUSBANDRY = animal care in captivity
 - Appropriate diet
 - Appropriate cage & home environment
 - Handouts
- Improper husbandry & diet are the #1 reason for visit to veterinary clinic

BOX NO.

DESTROY

Rhanna



CONTENTS

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Well Bird Exam

- Start with a thorough patient history.
- Physical exam should be done annually.
 - Allow at least $\frac{1}{2}$ - $\frac{3}{4}$ hour for 1st visits & sick birds.
- Become familiar with the normal bird.
- Hands on PE should only be approximately 5 minutes
- Develop a systematic approach to the PE.
- Have instrumentation ready.
- Quality restraint is required.
- Anesthesia is rarely required.

Get a Detailed History

This is more like detective work.

What is the husbandry like?

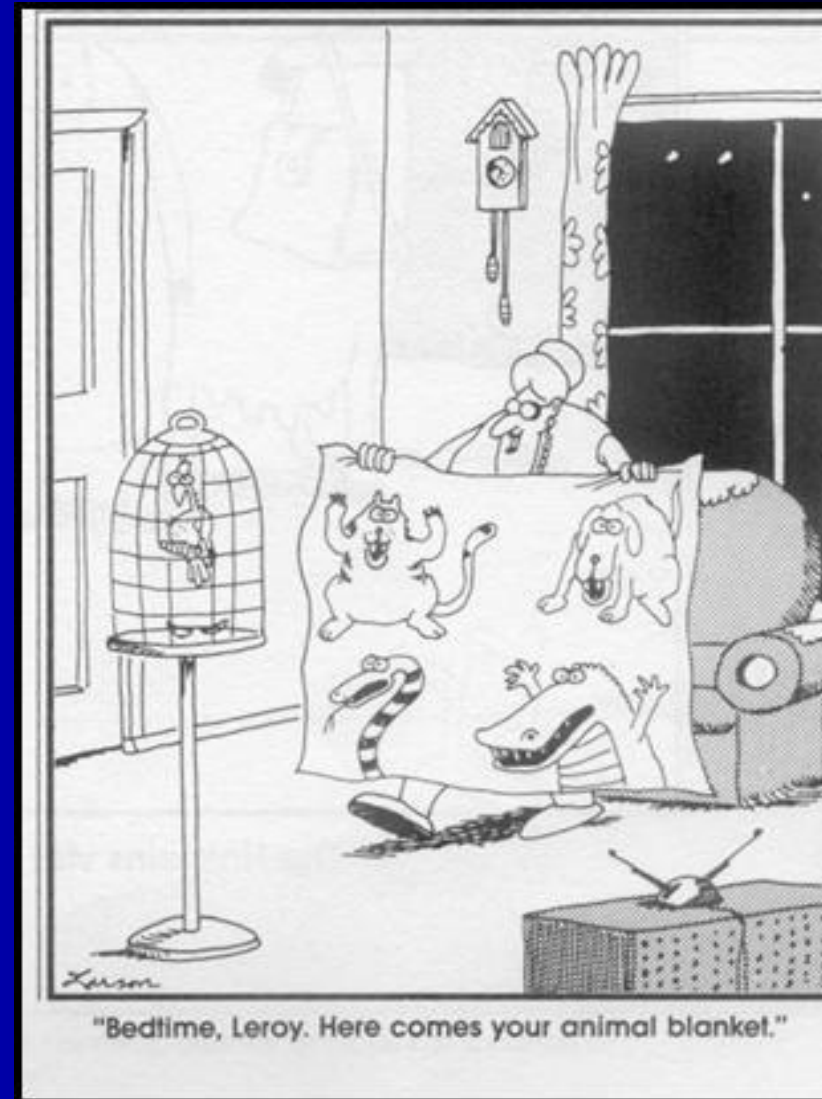
- Improper husbandry is a common cause of illness.

Inquire about everything.

- New pets in the house?
- Diet & droppings.
- Cage type and location.
- Perches, substrate and toys.

Create a history form for clients to fill out.

- ensuring important questions not be forgotten.



AVIAN HISTORY FORM

General History

Name _____ Sex: M ___ F ___ UNK _____

Was bird sexed? Blood Test _____ Surgical? _____

Specific Identification? (ie: tattoo, band, microchip) _____

If female, has she produced eggs in the past? (if yes, please describe) _____

Use: Pet _____ Breeder _____

How did you acquire the bird? Store _____ Breeder _____ Other (describe) _____

Where acquired? _____

Do you have any other pets? Y ___ N ___

If yes, please specify including ages and when acquired _____

Living

Where is bird kept: Indoors _____ Outdoors _____ Both _____ (if both, please specify % time in each) _____

How is your bird housed? Cage _____ Aviary _____ Free in the house _____

Is bird housed alone? Y ___ N ___ If no, describe _____

If caged, what type of cage? _____

What do you use on the bottom of the cage? _____

How often is the cage cleaned? _____

How often/ frequency of cleaning food/ water dishes _____

Is bird in the cage? Y ___ N ___ If yes, describe _____

Has the bird's environment changed recently? Y ___ N ___ If yes, describe _____

Does it, do you cover the bird? Y _____ N _____

How many hours of darkness does the bird have each day? _____

Foods are offered to your bird/ in what total percentages? (ie: 50% seed,
c) _____

percentages of these foods do you remove from the cage at
night? _____

Supplements offered? Brand name? _____

Grains offered? Type? How often? _____

Recent diet changes or new foods? Y____ N____ If yes, describe _____

How much water offered? (ie: sipper bottle, bowl) _____

Reason For Today's Visit:

Signs have you noticed that prompted today's
visit? _____

How long have you noticed the problem? _____

Has your bird been sick previously? _____

Has the bird ever been seen by any other veterinarian? Y____ N____ If yes, when/
why? _____

What tests have been performed previously on your bird? Please circle all that apply:
CBC; CBC; Psittacine Beak and Feather Disease; Polyoma Disease; Parasites; Other bloodwork; Other (please
describe) _____

Additional comments (your comments regarding the reason for this visit):

Reproductive Activity

Is the sex of the patient known?

- How was it determined.

Any reproductive behavior?

- Hiding in dark places.
- Paper shredding.
- Regurgitating for owner & mirrors.
- Spending more time at bottom of cage.
- Masturbation.



Cage Toys

Birds require stimulation.

No quality control for avian toys.

Organic toys.

- Origami with food.
- Manufactured organic toys.

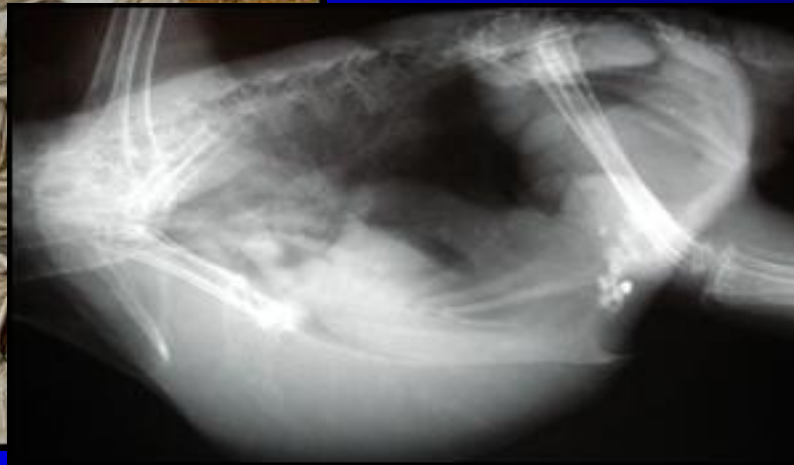
No small toys for large birds.

Chewed rope can be hazard.

Beware of toxic toys.



What's For Dinner?



- What is the client offering?
- What is the bird actually consuming?
- Treats?
- People food?





Normal Droppings

- Fecal component
 - Green to light brown
 - May vary in consistency
- Urine
 - Should be clear
 - Stress can create polyuria
- Urates
 - White to pale tan



Weigh The Patient

Weigh in grams at each visit.

- Well bird exams & grooming.

Container for flighted birds.

Compare weight with body mass.

Normal weight range but emaciated?

- Indication of a problem.



Initial Assessment

- Visual physical.
- Evaluate the bird in its cage.
 - Respiratory rate and effort.
 - Mentation & stance.
 - Droppings.
 - Diet.
 - Cage and toys.
 - Substrate & perches.



Trouble Perching or Fluffed

- May indicate that the bird is very sick.
- Advanced stage of disease.
- Birds are experts at hiding illness.
- Inform client of the fragile state and potential for death.

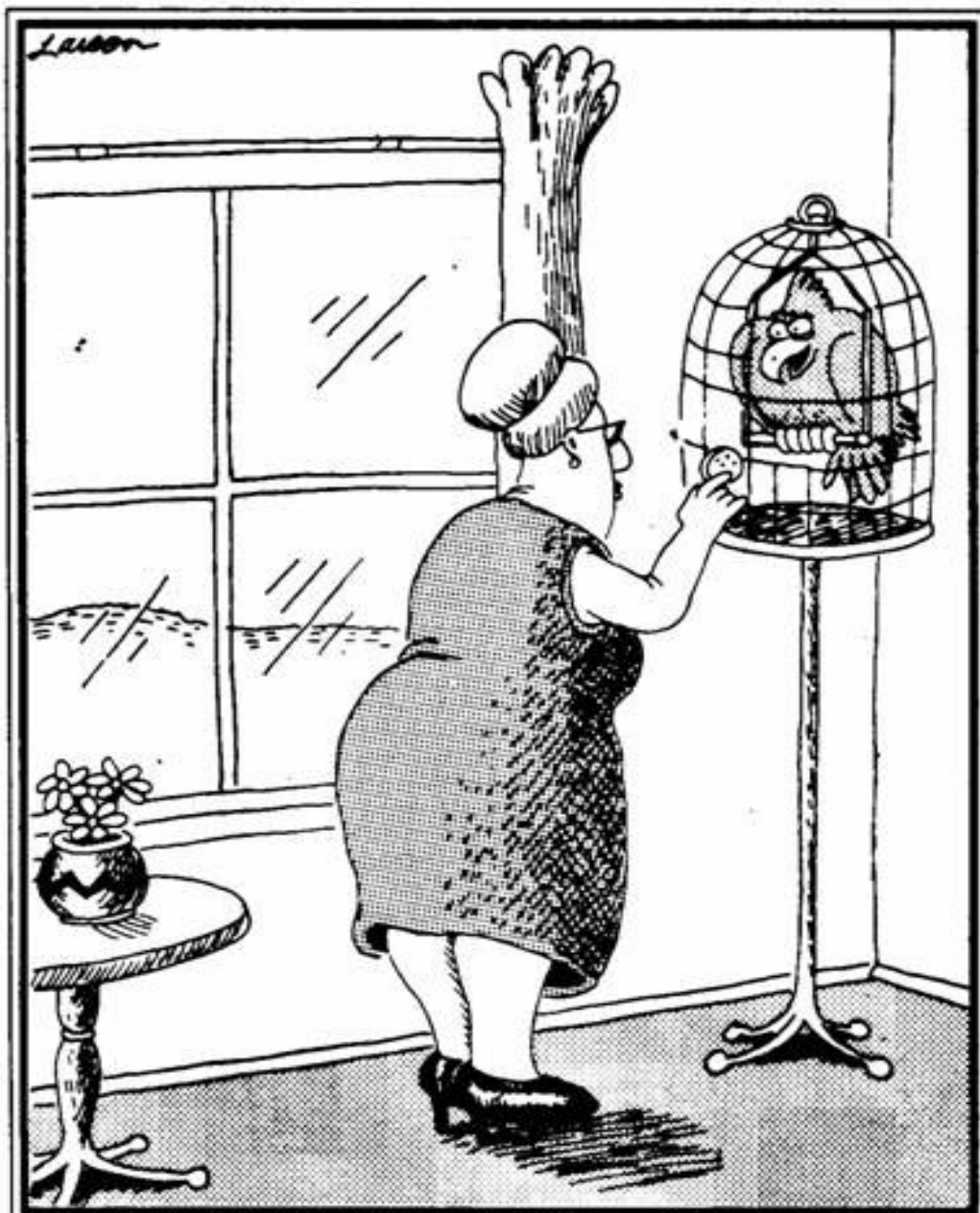


Supportive Care

- Thermal support.
- Oxygen therapy.
- Quiet, dark environment.
- SQ fluids.
- Diagnostics.
 - Prioritize.
 - Do in stages.
- Nutritional support when the patient can tolerate it.
- Calculate emergency drugs.







"Polly wanna finger."

Capture and Restraint

Know the patient's limitations

Establish priorities

- Physical exam & diagnostics

Monitor stress level during restraint



Normal Avian Respiratory Tract

Upper respiratory tract—

- Nasal passages/choana
- Sinuses
- Cervicocephalic air sac (2)

Lower respiratory tract

- Lung
- Air sacs

Large respiratory capacity

Need keel movement for air exchange



Capture and Restraint

- Gloves are not ideal for capture & restraint.
- Have nets available.
- Don't grab off the shoulder.



Capture and Restraint

Close the window blinds.

Close and lock doors.

Remove cage accessories.

- Perches & dishes.

Use towels for capture.

- For your protection.
- Disguises hands.
- Fear of hands.

Turn off or dim the lights.



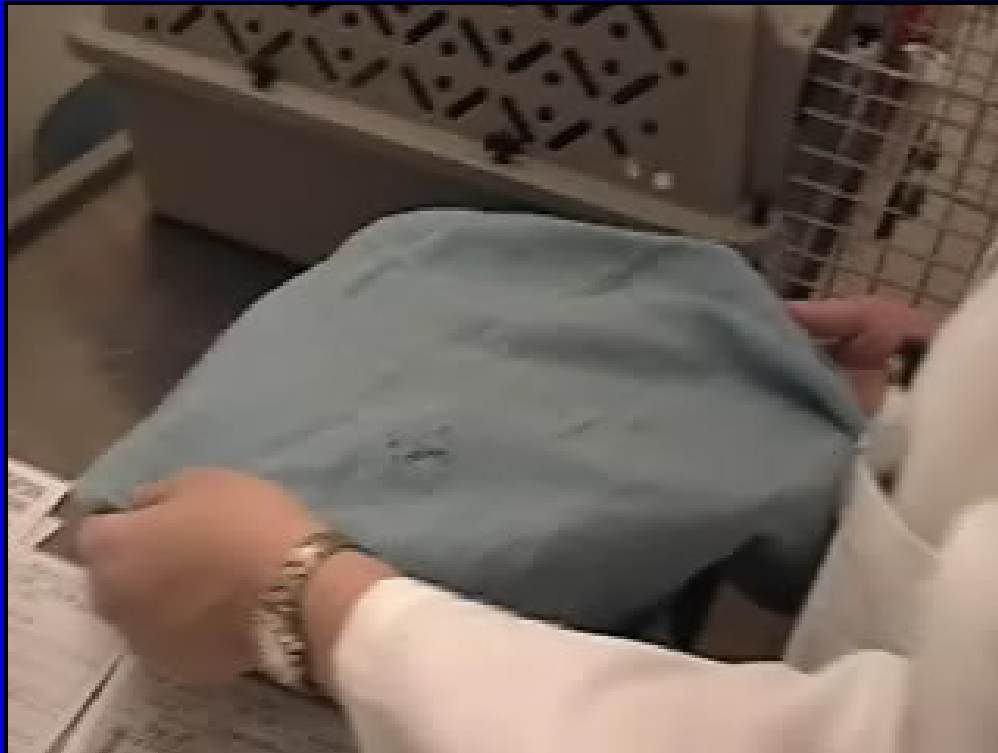




CAPE 8



Falling Ceiling



Capturing a Macaw







Hands-on Physical Exam

- Be systematic and develop a routine.
- Have instrumentation ready.
- Requires a skilled restrainer.
- Monitor closely for stress.
 - Responsibility of the restrainer.
- Careful not to place pressure on keel.



Examining The Very Tame Bird

- Most of exam can be performed during a petting session.
- Oral and cloacal exam will require full restraint.



Eye Exam

Bilaterally symmetric.

Free of discharge.

Corneal evaluation.

- Can stain with fluorescein stain.

PLR check.

- Focal light source.
- Voluntary control.

Severely dehydrated--sunken









Nares

Symmetrical.

Free of discharge.

Evenly colored.

Different appearances.

- Round openings.
- Slits.

Operculum normal
keratinized plate.

- Debris can plug the nare.
- Don't mistake debris for operculum.



The Beak

Proper length.

- Different sizes for different birds.

Firm.

Not excessively flaky.

Should not require trimming.

Excessive growth.

- Improper wear.

Malnutrition or systemic disease.

- Liver disease.



Oral Exam

- Extremely important part of exam
- Window to the GI and respiratory systems
- May need speculum
- Requires skilled restrainer.
- Requires good light.
- Great place to assess hydration.





Oral Cavity

Smooth & evenly colored.

Glistening.

Choanal Slit

- V shaped cleft in the palate.
- Sensory papillae
- Sharp





Assess Hydration

History of:

Inadequate water intake are suggested to be **5% dehydrated**.

Trauma or disease are suggested to be **10% dehydrated**.

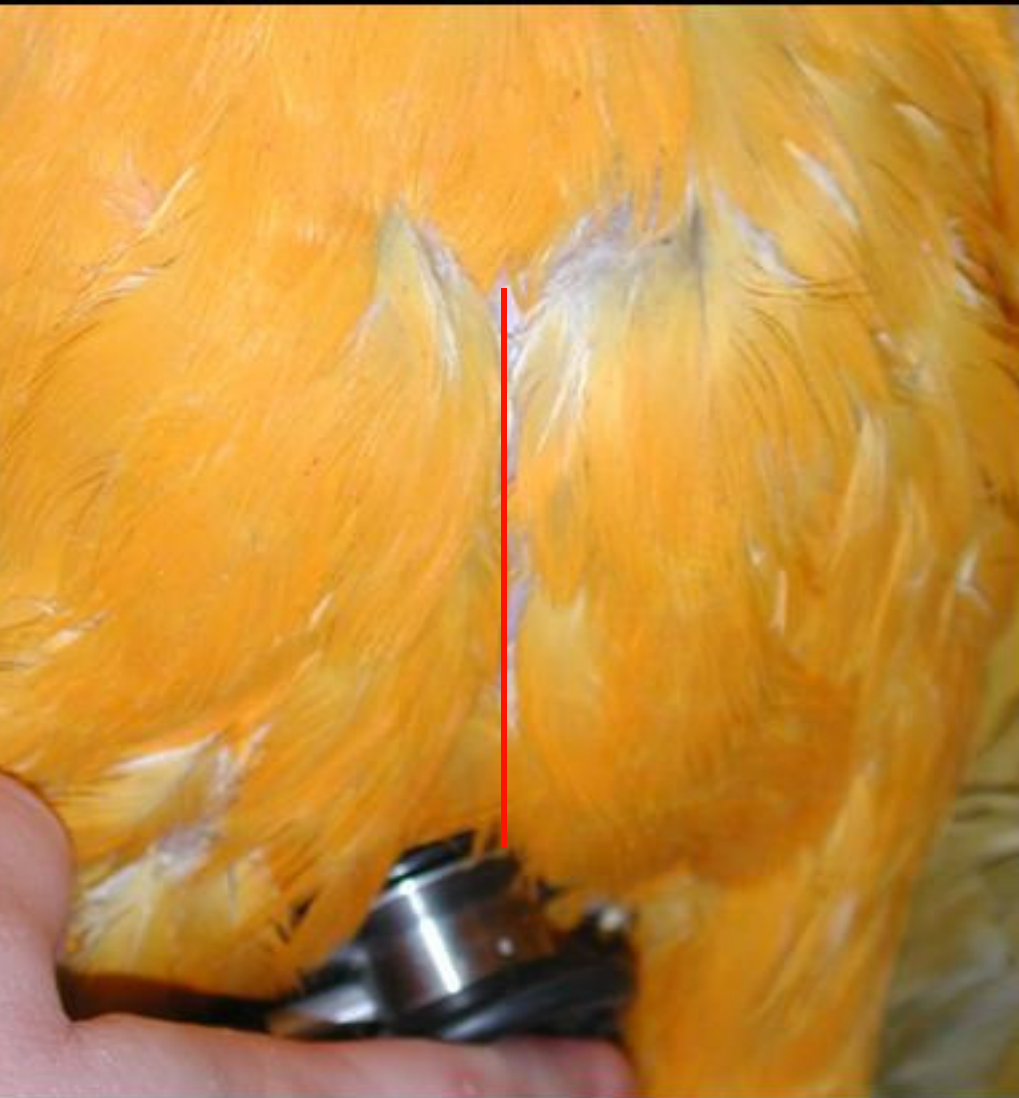


Assessing Hydration

Areas to assess:

- Oral cavity:
 - Moist not tacky.
- Skin tenting-reflects decreased water content of skin.
 - Skin over feet.
 - Upper eyelid.
 - Wing web.
- Ulnar vein refill time.
- Eyes will be sunken in severely dehydrated birds.

Body Condition



- Indicator of overall health
- Palpate the ratio of pectoral muscles to sternum.
- Pectoral muscles should be solid, well formed and rounded.
- Body scoring of 1-9.
 - 1= emaciation
 - 9=obesity



Feather Condition

Should be smooth & regular.

Stress marks:

- Structural changes.
- Color alterations.
- Increased translucency.

No frayed edges.

Pain.

Disease.

Poor nutrition & husbandry.

Boredom.



Check the Feet

Plantar surface

- Epithelial thinning

Pododermatitis

Lameness

Obesity

Perches

- Variety of sizes
- Rough texture



Cloacal Examination

- Clean uniform feathers around the vent.
- Pasting of feces around vent—
 - Cloacal disfunction
 - Polyuria
 - Enteritis
 - Down at cage bottom
 - Can prevent elimination



Everting The Cloaca

- Insert dampened or lubed CTA into cloaca
- Gently advance
- Slowly pull the cloacal tissue out
- Smooth pink appearance







Uropygial Gland

- Preen gland.
- Located dorsal to the cloaca.
 - Absent in some birds.
- Smooth & evenly colored.
- Yellow creamy material.
- Infections and neoplasias.







Auscultation

Pediatric stethoscope.

Heart rate 45-600 bpm.

- Count in groups of 10 for 6 seconds.

Slight rush of air.

Audible cracks & wheezes are abnormal.

Inspiration = upper airway.

Expiration = lower airway.



Well Bird Exam

Base-line Diagnostics

- Base line blood work.
 - CBC & biochemistries.
- Fecal exam.
 - Fecal float and direct.
 - Gram stain.
- *Chlamydophila psittaci* testing.
- Virus screening.
 - PBFD virus--PCR.
 - Polyoma virus--PCR.
- Whole body radiographs.
 - VD and lateral views.

Special Thanks!

- * AAHA
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