

## FIGURE 10

Approach to Fluid Therapy for Dogs and Cats with Traumatic Brain Injury

- \* Fluid resuscitation techniques can be any one of the following or a combination thereof: (1) 10–20 mL/kg crystalloids (Plasma Lyte or Normosol-R) IV rapid infusion up to 60–90 mL/kg. (2) 5–10 mL/kg 6% HES (tetrastarch) IV rapid infusion up to 40–50 mL/kg. (3) 5–10 mL/kg plasma rapid infusion IV up to 20–30 mL/kg. (4) 3–4 mL/kg 7% HTS IV over 10–15 min. (5) Whole blood or pRBC, if indicated.
- \*\*Altered level of consciousness with or without bilateral or unilateral miotic pupils; unresponsive mid range pupil(s) or mydriasis; loss of the oculocephalic reflex; bradycardia with hypertension (Cushing reflex); posturing (opisthotonus, decerebellate, decerebrate); alteration of the respiratory pattern.
- \*\*\*1 g/kg mannitol IV up to 3 doses q 60–90 min OR 3–4 mL/kg 7% HTS IV.
- <sup>d</sup> Reprinted with permission from Pigott A, Rudloff E. Traumatic brain injury—a review of intravenous fluid therapy. *Front Vet Sci.* 2021;8:643800.

## The 2024 Fluid Therapy Guidelines for Dogs and Cats are available at aaha.org/fluid-therapy.

These guidelines were prepared by a Task Force of experts convened by the American Animal Hospital Association (AAHA) and were subjected to a formal peer-review process. This document is intended as a guideline only, not an AAHA standard of care. These guidelines and recommendations should not be construed as dictating an exclusive protocol, course of treatment, or procedure. Variations in practice may be warranted based on the needs of the individual patient, resources, and limitations unique to each individual practice setting. ©2024 AAHA.

