

PRE-OPERATIVE PROTOCOL FOR THIRD EYELID REMOVAL

The animal is first sedated using xylazine and ketamine as shown in the extenteration pre-operative protocol in this CMAP. Prophylactic antibiotics, analgesics and reversal drugs are also included in the aforementioned section.

The animal is restrained in a squeeze chute or at least in some head restraint with the head secured to the side. An auriculopalpebral nerve block may be performed to decrease the mobility of the eyelids. Local anesthetic is applied topically to the third lid and then injected across the base of the third lid.

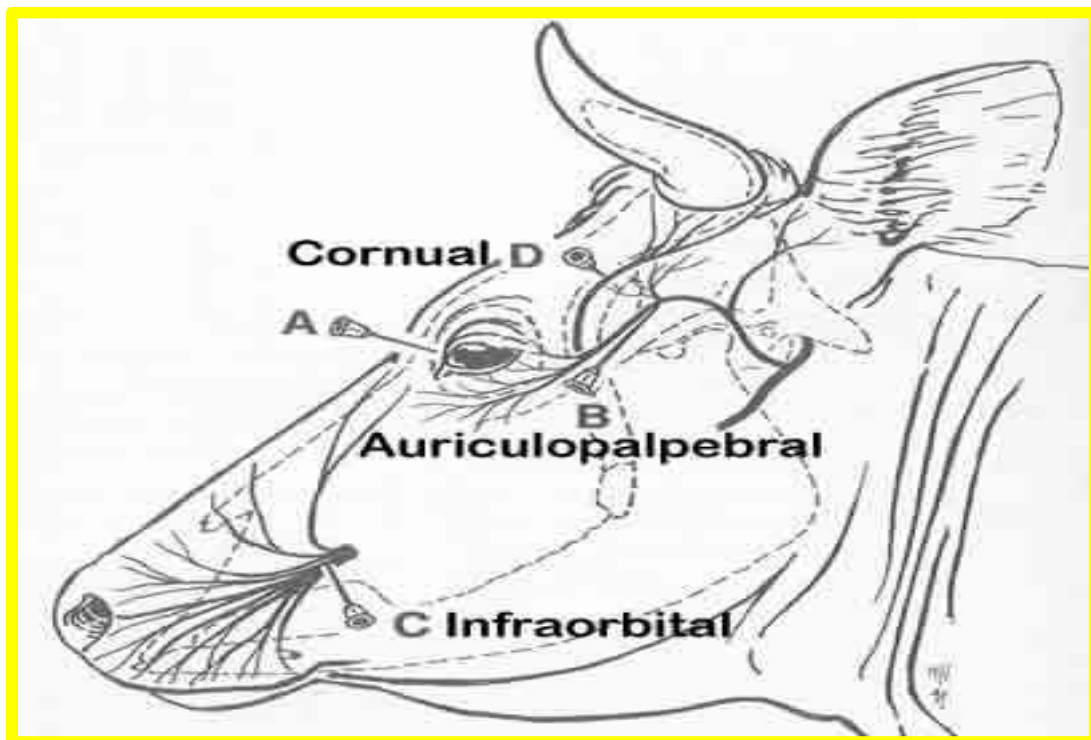
In standing or recumbent animal induce analgesia by local infiltration (5 ml of 2% lignocaine) of base of eyelid after instilling topical anaesthetic solution (e.g. 0.5% proparacaine) into conjunctival sac.

AURICULOPALPEBRAL NERVE BLOCK

Auriculopalpebral nerve supplies motor fiber to the orbicularis oculi muscle.

- It runs from the base of the ear along the facial crest, past and ventral of the eye, giving off its branches on the way
- The needle is inserted in front of the base of the ear at the end of the zygomatic arch and is introduced until its point lies at the dorsal border of the arch. 2% lidocaine 10-15 ml at injection site.

- Onset of analgesia occurs 10-15 minutes and duration of analgesia is approximately one hour. This block does not produce analgesia of the eye or the lids. In conjunction with topical analgesia (2% lidocaine), it is useful for the removal of foreign bodies from the cornea and conjunctival sac. Also used, but less frequently in other species.
- This block has no sensory effects but paralyzes the muscles of the eyelid. It is used to keep the eye open, for example, as an adjunct in ophthalmic surgery.
- This is one of the most commonly used techniques to block the motor function of the upper eye lid for ophthalmic surgery. To prevent eyelid closure during examination of the eyeball. In the case of third eyelid removal, this block was used only to keep the eye open as it does not provide anaesthesia to the eyelids.



Position for Auriculopalpebral Nerve Block

SUBCONJUNCTIVAL INJECTIONS

- A 25G needle is placed bevel up at the dorsal aspect of the eyeball taking caution not to inject into the upper eyelid of the animal
- In one swift motion insert the tip of the needle beneath the conjunctiva of the eye
- Slowly administer the medication (anaesthetic/ antibiotic) subconjunctivally while noting the bleb forming at the site. A maximum of 2ml can be injected at this site

https://www.youtube.com/watch?v=SkKYAAAObh8&list=PLzf8tGKj10zxwef76T3dgd0xpq0VTp_p&index=9



Subconjunctival injection