

# Quick Tips - Surgery

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## Management of Pelvic Fractures

Pelvic fractures in small animals are most commonly the result of vehicular trauma. Affected dogs and cats generally have multiple injuries and commonly present in hypovolemic shock, requiring initial stabilization with IV fluids and other supportive care. Appropriate analgesia typically requires the use of opioids. Pulmonary injury, diaphragmatic hernia, body wall hernia, urethral or bladder rupture, and blunt liver trauma commonly occur - thoracic and abdominal radiographs and full labwork should be obtained in all patients to evaluate for concurrent injury. Contrast studies may be required if the integrity of the urinary tract is in question – up to 40% of patients with pelvic fractures have urinary injury and the presence of a visible bladder on lateral radiographs does not rule this out. Animals should be assessed for spinal injury, and nerve function of the hind limbs, tail, rectum, and bladder should be closely evaluated. Many pelvic fractures heal well with conservative treatment (strict rest 6-8 weeks), with good long-term outcome. However, any fracture that affects the weight-bearing axis and all articular fractures generally require surgical repair. These include fractures of the acetabulum, ilial shaft, or sacrum, and sacro-iliac (SI) luxation. If the SI joint is minimally displaced, relatively stable, and/or the patient is small, conservative management is sometimes used for SI luxation. However, animals return to normal weightbearing function more quickly after internal fixation. Acetabular fractures can often be repaired surgically, and this results in the best long-term joint function. If significant acetabular comminution is present, femoral head & neck ostectomy (FHO) is a salvage option, with concurrent stabilization of the pelvic segment.

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