

Administration of medication (P/O, S/C, I/V, I/O, I/P)

- Subcutaneous (S/C);

The rabbit should be secured as much as possible potentially with an extra handler, a portion of loose skin should be gently elevated away from the rabbit's body slightly and the unused needle (e.g. not previously used to draw up medication) should be inserted in a controlled manner into the subcutaneous layer of skin at an angle parallel to the rabbit's body.



The syringe should be drawn back to ensure no blood (puncture of a vessel) or air (not in the subcutaneous layer) is achieved and then a small amount of the medication can be administered but by feeling either side of the needle-tip/insertion site.



If the skin develops a hard swelling and the rabbit shows discomfort this could indicate injecting into the intradermal layer for which there is not sufficient space for the volume being injected and the needle should be carefully advanced, the syringe drawn back to check position and administration can continue. Most rabbit breeds will tolerate 20mls of fluids being administered into one site and as few as possible injections should be administered.



Subcutaneous fluids in large volumes may also be given via a butterfly catheter especially if the rabbit is moving about a lot.



By K.Eatwell

- Intramuscular (I/M);

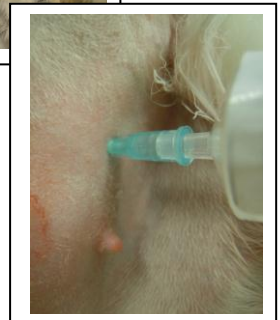
Secure the body of the rabbit as much as possible, use a small needle for volume <1ml (25G) and larger for larger volumes >1ml (23G). Position and insert the needle gently perpendicular (90° angle) to the rabbit's body, and steadily but not too rapidly inject the drug, and remove the needle immediately. If the rabbit jumps remove the needle, and the rabbit should be monitored for any locomotion changes or bleeding if there was a struggle (e.g. needle touched a nerve or vessels or was removed bent).



- Intraperitoneal (I/P);

This route can be risky in conscious rabbits as the large intestine or bladder can be punctured if the needle is not placed correctly. However, large quantities of fluid can be administered via this route

There are different techniques employed but in general ensure the rabbit's bladder is emptied first and a short needle inserted at right angle to the body wall in the lower left quadrant to avoid the caecum, and the syringe plunger drawn back before fluid administration.



- Assisted/syringe feeding and oral medication

There are a number of products available for supportive nutritional care in rabbit patients that are palatable and specifically designed for the rabbit digestive system.

Catheter tip syringes are best for administering the formula to ensuring direct insertion into the mouth, and avoid soiling the head.



The rabbit can be placed in the 'bunny burrito' position to keep the back secure, while having all feet planted on a table surface.

The rabbit should be positioned facing away from the handler. The handler's first hand should secure the head by placing fingers under the jaw and the thumb placed dorsally between the eyes. It is advisable to feed using only one handler in order to assess the rabbit's body movements and therefore avoid annoying it by poking the syringe on its nose by accident. Movements should be slow and gentle as rabbits hate having their chins touched!

The rabbit's head should be slightly lifted and the handler should be able to see the bottom of the nose / septum.



The diastema should then be gently located by placing the syringe (with the other hand) directly over the incisors and moving to the side but keeping the syringe straight until it slips into the diastema. It should lie parallel to the tongue. It is uncomfortable to try and force the mouth open or to angle the syringe as you would with a cat or dog, but rabbit's don't have a corner to their mouths as such.

Showing location of diastema



Once in place inject 0.5-1ml as a 'mouthful' and then remove the syringe in order to allow the rabbit to chew and swallow the solution.

Some rabbits will freeze and refuse to swallow but can be encouraged if the handler relaxes off securing the rabbit so much and strokes or allows it to move a little.

Once treatment is finished the rabbit's mouth should be cleaned of any spillages otherwise their fragile skin becomes sore when it dries. Damp swabs work well but the nose must not be touched and the chin should be wiped gently, in a rolling motion, to avoid the rabbit panicking.

