Case Description: A 10 year-old cockatiel hen (Nymphicus hollandicus) was presented for a two day history of sitting on the bottom of the cage and straining to pass an egg. It had been fed a formulated diet (pellets) supplemented with vegetables and given millet spray as a treat once per week. Physical exam revealed that the patient was distressed, but alert and responsive. A firm egg was palpated in the caudal coelom. The patient was anesthetized using sevoflurane and oxygen and then intubated and maintained on sevoflurane and oxygen. Radiographs were obtained and blood was drawn using the right jugular vein. Stat blood work revealed mildly elevated calcium. Radiographs showed a well-calcified egg lodged in the distal uterus. Since the hen had been egg bound several times prior to this episode, it was decided to perform a salpingohysterectomy. Surgery was performed the following morning using the same anesthetic protocol. Fluids were administered via intraosseous catheter. A left lateral approach was used and the last two ribs were transected. The ventral suspensory ligament of the uterus was located and broken down with bipolar forceps and then stretched out to provide better exposure. The cranial oviductal artery was identified and ligated using hemostatic clips. The blood vessels of the dorsal suspensory ligament were coagulated via bipolar forceps. The uterus was exteriorized and hemostatic clips were applied at the junction with the cloaca. The entire uterus was dissected free and removed. The body wall was closed using 4-0 PDS in a simple interrupted pattern and the skin was closed in the same fashion.

Outcome: The hen recovered uneventfully and was discharged 48 hours after surgery. Prophylactic antibiotics were not administered. The owner was warned that since the ovary was not removed, the bird could still become “broody.” In fact, she required injections of leuprolide acetate on several occasions after surgery.

Implications/Applications: This was a straightforward salpingohysterectomy in a cockatiel. At this time, the ovary is not routinely removed and this procedure is not done as a prophylactic surgery as in dog and cat medicine. Perhaps this will change in the near future.
