Patients with limited mobility should be kept away from stairs or high furniture from which they may inadvertently fall. When not directly supervised, they should be kept in a single small room or crate with sufficient room to turn around and stand up if they are able.

**Appropriate bedding is vital to the immobile patient.** The ideal bedding is chosen based on the animal’s physical status, its ability to remain sternal and the size of the patient. In general, a thick soft bed with 1 inch of padding for every 10 pounds of weight is recommended. Some animals may benefit from pillows or rolled up blankets for bolsters to help keep them sternal or to provide support to the head. Large dogs in lateral recumbency may also benefit from padding in between the limbs so that the legs are not resting on top of each other. The top-most layer of bedding should be absorbent to collect any urine or feces. Training pads work well for this function. The layer beneath this can be waterproof to make cleaning easier. Bedding should be changed at least daily or anytime it is soiled.

**Physical therapy is a dynamic process that will evolve over time depending on the needs of the patient.** There are several simple techniques that can be easily implemented at home. Other therapies may be recommended by a veterinary rehabilitation practitioner. A custom program can then be implemented for your pet which can be key in returning full mobility and preventing muscle atrophy and contractures.

**Recumbent animals should be turned every 4-6 hours.** If the animal is able to maintain a sternal position, only the hips may need to be rotated. Limb massage is important to provide good circulation to the muscles and skin, alleviate muscle cramps and provide sensory input to the nerves. The limbs and areas around pressure points should be massaged several times daily to promote blood flow to the area. Use a kneading motion to the back and front of each leg for 3-5 minutes. Rub feet (area between the ankle and paw) up to 1 minute; it is okay of your dog kicks a little, if it is excessive discontinue. Withdrawal exercises can also be helpful. Touch lightly between toe pads up to 1 minute to stimulate the nerves. It is okay of your pet kicks a little, but if it is excessive discontinue. Apply pressure in between the toes to get the animal to flex the limb. Repeat 10 times. Passive range of motion exercises help maintain flexibility and tone. Specifics are covered in a separate handout.

**Caring For a Pet with Limited Mobility**

Caring for patients that have limited mobility can be a challenging and time-consuming. However, good nursing care is an important factor in the recovery process and can make the difference between recovery and failure in some cases. There are several aspects of nursing care that are unique to these patients, including bedding, bladder management, nutritional support, physical therapy and respiratory care. Common complications that may be minimized by these measures include decubital ulcers, lung lobe consolidation, aspiration pneumonia, profound muscle atrophy, urinary tract infection etc.
Animals should be assisted to stand several times daily. This is important for muscle tone, circulation and respiratory system health. Using a help ‘em up harness or a sling to assist you in supporting under the chest and belly, place your pet in a standing position with all four limbs placed squarely under the dog to promote stability. Placement of limbs in correct physiological position helps stretch the muscles and tendons to prevent contracture. Have the animal hold this position up to 1 minute. This will re-enforce the muscle tone in the hind legs. If the skin is healthy (ie. not infected and any incisions are completely healed) standing in water is very beneficial because the buoyancy of the water helps the patient to maintain a standing position, even if weakness is present.

Time outdoors is vital for psychological health but also provide an opportunity for exercise and voluntary urination and defecation. Carry or sling walk outside. A leash should be utilized along with a chest harness rather than a neck collar. Provide gentle support beneath the belly and chest as needed to prevent falls or slips. The Help ‘Em Up Harness is ideal for this purpose, but slings, sheets and towels may also be helpful. We recommend taking outdoors 3-5 times a day for 5-10 minutes initially.

The control of urination is complex and often problematic in recumbent patients. There are several factors that may influence this including reluctance to urinate while laying down or on an unfamiliar substrate, leakage of urine from a lower motor neuron injury or from an overlarge bladder with an upper motor neuron injury and inability to void urine with upper motor neuron injury. It is safer to assume that a recumbent animal is unable to urinate on its own until proven otherwise. Manual bladder expression is often needed for these patients and is covered in a separate handout. Medications are often utilized to facilitate bladder function as well. Urine should be monitored for reduced volume, blood and changes in odor. If any of these factors are present, the pet should be evaluated by a veterinarian. All patients should be kept clean and dry and carefully monitored for any sores or redness of the skin.

Patients at high risk for aspiration pneumonia (those with neuromuscular disease, brachycephalic breeds etc.) may also benefit from nebulization and coupage. Nebulization may be achieved at home by having the animal lay in the room with a hot, steamy shower going (not in the shower itself). Coupage is typically done immediately following nebulization by gently striking soft, cupped hands against the sides of the chest for 1 minute. If coughing, increased respiratory rate (>60 breaths per minute when not panting) or increased respiratory effort is observed, the pet should be evaluated by a veterinarian.

It is very important that immobile animals receive daily required nutrients to allow their bodies to heal. Feeding patients with decreased mobility will require physical assistance to keep them sternal during feeding and for at least 15 minutes afterward. Animals with megaesophagus require additional consideration that is not reviewed here.