

EMERGENCY VETERINARY MEDICINE: ALLIED TECHNOLOGIES, INNOVATIVE TREATMENTS AND THE ROLE OF ARTIFICIAL INTELLIGENCE

VETERINARY EMERGENCY MEDICINE: TECHNOLOGICAL ADVANCES,
INNOVATIVE TREATMENTS, AND THE ROLE OF ARTIFICIAL INTELLIGENCE

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Summary

Emergency veterinary medicine has evolved significantly with the integration of advanced technologies such as artificial intelligence (AI), telemedicine and devices real-time monitoring, transforming the diagnosis and treatment of conditions criticism in animals. This article reviews recent literature on the use of food technologies adas, innovative therapeutic approaches and the impact of AI on emergency practice in species such as dogs, cats, and horses. AI-optimized triage, support systems clinical decision-making and biotechnology-based therapies, such as hypertonic oxygen therapy, baric, are discussed, with emphasis on their practical application and challenges. Studies such as those of Boysen, S.R. et al. (2020) and Hopper, K. et al. (2015) reinforce the effectiveness of technologies emerging tools in reducing morbidity and mortality. Gaps in access to these tools, such as high costs and the need for specialized training are addressed, proposing di-recommendations for future research that promote advances in animal health.

Keywords: Emergency veterinary medicine, artificial intelligence, telemedicine, innovative treatments, animal health.

Abstract

Veterinary emergency medicine has significantly evolved with the integration of advanced technologies such as artificial intelligence (AI), telemedicine, and real-time monitoring devices, transforming the diagnosis and treatment of critical conditions in animals. This article reviews recent literature on the use of allied technologies, innovative therapeutic approaches, and the

impact of AI in emergency care for species such as dogs, cats, and horses. AI-optimized triage, clinical decision support systems, and biotechnology-based therapies—such as hyperbaric oxygen therapy—are discussed, with emphasis on their practical applications and challenges. Studies by Boysen, SR et al. (2020) and Hopper, K. et al. (2015) reinforce the effectiveness of emerging technologies in reducing morbidity and mortality. Gaps in access to these tools, such as high costs and the need for specialized training, are addressed, proposing directions for future research to promote advancements in animal health.

Keywords: Veterinary emergency medicine, artificial intelligence, telemedicine, innovative treatments, animal health.

1. Introduction

Emergency veterinary medicine is a critical field that requires speed, precision, and the integration of advanced technologies to save animals' lives in imminent danger situations. Technological advances, including artificial intelligence (AI), telemedicine, and real-time diagnostic devices, have revolutionized practice, enabling more effective interventions in conditions such as trauma, sepsis, and respiratory failure. Boysen, SR et al. (2020) highlight that AI-enhanced triage improves case prioritization in veterinary intensive care units (ICUs), reducing time to treatment by up to 30%. This article reviews the current state of emergency veterinary medicine, focusing on allied technologies, innovative treatments, and the role of AI, adopting a comparative approach across species such as dogs, cats, and horses.

The relevance of emergency veterinary medicine transcends animal health, aligning with the One Health approach, which recognizes the interconnection between human, animal and environmental health. Animal models, such as dogs and horses, are used to study critical conditions such as septic shock, with implications for human medicine. Hopper, K. et al. (2015) emphasize that advances in hemodynamic monitoring in animals can inform human protocols, especially in emergency settings. However, the application of these technologies is limited by barriers such as cost, access, and specialized training. The lack of standardization in veterinary emergency protocols, unlike the human guidelines established by the American College of Emergency Physicians, hinders consistency in clinical practice.

The most common emergency conditions in veterinary medicine include trauma, poisoning, respiratory failure, and sepsis, with high morbidity and mortality if not treated quickly.

Silverstein, DC et al. (2014) report that trauma from traffic accidents accounts for 20–30% of emergency cases in dogs, requiring immediate diagnosis and intervention. In horses, colic is a prevalent emergency, with mortality rates of up to 10%, as described by Tinker, MK et al. (1997). The integration of technologies such as portable ultrasound and AI for image analysis has improved early diagnosis, but adoption is limited in low-income clinics, especially in rural areas.



Artificial intelligence has transformed emergency veterinary medicine by offering clinical decision support and predictive analytics. Buczak, AL et al. (2018) demonstrate that machine learning algorithms can predict outcomes in critically ill patients based on vital signs such as heart rate and oxygen saturation, reducing human error by up to 25%. In cats, acute respiratory failure is a common emergency, and AI can optimize mechanical ventilation by adjusting parameters in real time. However, the lack of robust veterinary databases limits the validation of these models, requiring greater collaboration between clinics and research centers.

Telemedicine has emerged as a crucial tool, especially in rural areas where access to specialists is limited. Boysen, S.R. et al. (2020) report that telemedicine platforms enable real-time consultations, reducing time to treatment by up to 40% in canine trauma cases. In horses, telemedicine facilitates field management of colic, but limited connectivity and lack of training are significant barriers. Combining telemedicine with portable devices, such as mobile electrocardiograms (ECGs), has the potential to revolutionize emergency care, but requires infrastructure investment.

Innovative therapies such as hyperbaric oxygen therapy and biomarker-guided fluid therapy have shown promising results in veterinary emergencies. Hopper, K. et al. (2015) highlight that hyperbaric oxygen therapy improves tissue oxygenation in dogs with carbon monoxide poisoning, reducing neurological complications. However, the availability of these therapies is limited to specialized centers, highlighting the need for greater accessibility. Biotechnology, including stem cell therapies, is also being explored to treat traumatic injuries in animals, with potential for human application.

This article is organized into seven sections, addressing the evolution of emergency medicine, diagnostic technologies, innovative treatments, the role of AI, telemedicine, implementation challenges, and translational perspectives. Drawing on studies by renowned authors such as Boysen, S.R., Hopper, K., and Silverstein, D.C., the review offers a comprehensive analysis, highlighting innovations, knowledge gaps, and the clinical relevance of the One Health approach. The goal is to provide an integrated view of the technologies and therapies that are shaping the future of emergency veterinary medicine.

2. Evolution of Emergency Veterinary Medicine

Emergency veterinary medicine has evolved from a reactive practice based on basic interventions to a highly technological discipline, integrating advances in diagnosis and treatment. In the past, emergency care was limited to fluid therapy and manual stabilization, with a high mortality rate in complex cases. Silverstein, D.C. et al. (2014) note that the introduction of veterinary intensive care units (ICUs) in the 1990s marked a turning point, allowing intensive monitoring of dogs and cats with trauma.

or sepsis. Technological advances, including mechanical ventilators and multiparameter monitors, have increased survival by up to 20%, but adoption is uneven due to economic barriers.

The standardization of emergency protocols, inspired by human guidelines, has been a significant milestone. Boysen, SR et al. (2020) highlight that score-based triage, such as the Veterinary Acute Patient Score (VAPS), improves case prioritization in veterinary ICUs, reducing waiting times by 30%. In horses, colic protocols described by Tinker, MK et al. (1997) reduced mortality by 15% through timely surgical interventions. However, the lack of global consensus on these scores limits their universal application, especially in resource-limited clinics.

Advanced hemodynamic monitoring has transformed the management of critically ill patients. Hopper, K. et al. (2015) report that the use of invasive blood pressure catheters in dogs allows precise adjustments in fluid therapy, reducing complications such as pulmonary edema in cases of hypovolemic shock. In horses, central venous pressure monitoring is essential in cases of severe dehydration caused by colic. However, the availability of these technologies is limited to specialized centers, highlighting the need for affordable solutions for smaller clinics in rural areas.

Biotechnology has introduced innovative therapies into veterinary emergency care. Silverstein, D.C. et al. (2014) describe the use of platelet-rich plasma (PRP) to accelerate healing in traumatic injuries in dogs, with 25% faster recovery rates. In cats, mesenchymal stem cell therapy has been explored for acute renal failure, but the lack of randomized clinical trials limits validation. These therapies represent a significant advance, but their implementation requires specialized training and advanced infrastructure, which is a challenge in low-income regions.

Artificial intelligence is redefining veterinary emergency practice. Buczak, AL et al. (2018) demonstrate that predictive algorithms can identify sepsis in dogs with 85% accuracy based on vital signs such as temperature and heart rate. In horses, AI aids in the early detection of obstructive colic, reducing time to surgery by 30%. The main limitation is the lack of robust veterinary databases to train these models, requiring international collaborations to create shared data repositories.

Telemedicine has expanded access to emergency care, especially in remote areas.

Boysen, SR et al. (2020) report that teleconsultation platforms allow specialists to guide veterinarians in complex cases, such as canine trauma, improving outcomes by 40%. In cats, telemedicine facilitates the diagnosis of respiratory failure, while in horses, it is used to evaluate colic in the field. Limited connectivity in rural areas and a lack of training in the use of these platforms are barriers that require infrastructure investment.

Challenges in the evolution of emergency veterinary medicine include unequal access to technologies and the need for ongoing training. Hopper, K. et al. (2015) emphasize that training veterinarians in techniques such as portable ultrasound is essential for the integration of new tools. Collaboration between universities, veterinary clinics, and industry can overcome these barriers, promoting more equitable and effective emergency practice, with benefits for animal health and translational potential for human medicine.

3. Diagnostic Technologies in Veterinary Emergencies

Diagnostic technologies have revolutionized emergency veterinary medicine, enabling rapid and accurate interventions in critical conditions. Portable ultrasonography, described by Boysen, SR et al. (2020), is widely used to evaluate abdominal trauma in dogs, with 90% sensitivity for detecting internal bleeding. In horses, transrectal ultrasonography is essential for diagnosing colic, as reported by Tinker, MK et al. (1997), with 85% accuracy in cases of intestinal obstruction. The portability of these tools allows for field use, but their high cost and the need for specialized training limit their adoption in smaller clinics.

Computed tomography (CT) and magnetic resonance imaging (MRI) are increasingly used in veterinary emergencies. Silverstein, D.C. et al. (2014) report that CT is crucial for evaluating head trauma in cats, reducing diagnostic time by 50% compared to conventional radiographs. In horses, MRI is used to detect acute orthopedic injuries, such as fractures, but its availability is restricted to specialized centers due to its high cost. Implementing these technologies in regional clinics requires affordable financing models and public-private partnerships.

Multiparameter monitors, such as those described by Hopper, K. et al. (2015), allow real-time monitoring of vital parameters such as heart rate, oxygen saturation, and blood pressure in critically ill patients. In dogs, these devices detect arrhythmias in cases of poisoning, while in cats, they monitor acute respiratory failure. Integration with artificial intelligence, according to Buczak, AL et al. (2018), improves data interpretation, increasing diagnostic accuracy by 20%. However, the lack of standardization in veterinary protocols and the cost of the devices limit their adoption in low-income clinics.

Biomarkers such as cardiac troponin and D-dimer have gained prominence in emergency diagnostics. Silverstein, DC et al. (2014) report that troponin is a reliable marker of myocardial injury in dogs with thoracic trauma, with 88% sensitivity. In horses, D-dimer aids in the detection of thromboembolism in cases of colic, as described by Tinker, MK et al. (1997). Validation of these biomarkers in veterinary populations is limited by the lack of multicenter studies, requiring greater investment in clinical research.

Artificial intelligence applied to diagnosis has transformed emergency care. Buczak, AL et al. (2018) highlight that deep learning algorithms identify patterns in ultrasound images, increasing diagnostic accuracy by 20% for pneumothorax in dogs. In horses, AI detects intestinal obstructions in ultrasound scans with high accuracy. The main limitation is the need for large veterinary databases to train these models, an area that requires international collaboration to overcome data barriers.

Telemedicine has proven to be a powerful tool for improving diagnosis in veterinary emergencies. Boysen, SR et al. (2020) report that teleconsultation platforms allow veterinarians in remote areas to receive expert guidance, reducing time to diagnosis by up to 40%. In cats, telemedicine facilitates the evaluation of acute respiratory failure, while in horses, it is used to diagnose colic in the field. Limited connectivity in rural areas and a lack of training in the use of these platforms are barriers that need to be overcome.

Continuous monitoring devices, such as glucose monitors and pulse oximeters, have improved diagnostic accuracy. Hopper, K. et al. (2015) highlight that continuous glucose monitoring in dogs with diabetic ketoacidosis allows rapid adjustments in insulin therapy, reducing complications by 25%. In horses, pulse oximeters monitor hypoxia in cases of respiratory failure. The integration of these devices with AI, according to Buczak, AL et al. (2018), can predict critical outcomes, but accessibility and cost remain challenges in smaller clinics.

4. Innovative Treatments in Veterinary Emergencies

Innovative treatments in emergency veterinary medicine have advanced significantly, with emphasis on biotechnology-based therapies and supportive technologies.

Hyperbaric oxygen therapy, described by Hopper, K. et al. (2015), is used in dogs with carbon monoxide poisoning, increasing tissue oxygenation by 30% and reducing neurological complications. In cats, this therapy is effective in cases of pulmonary edema, but its availability is limited to specialized centers due to its high cost. Implementation in smaller clinics requires cost reduction and specialized training.

Biomarker-guided fluid therapy has improved outcomes in critically ill patients.

Silverstein, DC et al. (2014) report that serum lactate monitoring in dogs with septic shock allows for precise adjustments in fluid administration, reducing mortality by 15%. In horses, central venous pressure-guided fluid therapy is essential in cases of severe colic-related dehydration, as described by Tinker, MK et al. (1997). The lack of access to these biomarkers in smaller clinics is a significant barrier, requiring greater investment in infrastructure.



Stem cell therapy has shown potential in veterinary emergencies. Boysen, SR et al. (2020) describe the use of mesenchymal stem cells to treat acute kidney injury in cats, with improvements in renal function in preliminary studies. In dogs, platelet-rich plasma (PRP) therapy accelerates the healing of traumatic wounds, with 25% faster recovery rates, according to Silverstein, DC et al. (2014). Validation of these therapies requires randomized clinical trials, which are limited by lack of funding.

Advanced mechanical ventilation has been crucial in cases of respiratory failure. Hopper, K. et al. (2015) highlight that ventilators with volume and pressure control improve oxygenation in cats with pulmonary edema, reducing mortality by 20%. In horses, ventilation is used in cases of severe pneumonia, but the necessary infrastructure is limited to specialized centers. The integration of AI to optimize ventilation parameters, according to Buczak, AL et al. (2018), is a promising area of research.

Antimicrobial administration guided by rapid tests, such as PCR for pathogen identification, has improved sepsis treatment. Silverstein, DC et al. (2014) report that rapid bacterial identification in dogs reduces treatment time by 24 hours. In horses, PCR is used to detect infections in cases of peritonitis secondary to colic, according to Tinker, MK et al. (1997). The availability of rapid tests is limited, requiring greater investment in diagnostic technology.

Phytotherapy has been explored as a complementary therapy in emergencies. Riviere, JE et al. (2011) highlight that plant extracts, such as curcumin, have anti-inflammatory properties in dogs with septic shock, reducing pro-inflammatory cytokines. In horses, ginger extracts reduce inflammation in cases of acute laminitis. The safety and efficacy of these therapies in emergencies require validation, but they offer an accessible approach in resource-limited settings.

Integrating innovative therapies with monitoring technologies is essential to optimize outcomes. Boysen, S.R. et al. (2020) suggest that combining hyperbaric oxygen therapy with continuous oxygen saturation monitoring improves outcomes by 25% in dogs with hypoxia. The lack of access to these therapies in smaller clinics and the need for specialized training are challenges that require interdisciplinary collaboration to overcome.

5. The Role of Artificial Intelligence in Emergencies

Artificial intelligence (AI) is transforming emergency veterinary medicine, offering clinical decision support and real-time predictive analytics. Buczak, AL et al. (2018) demonstrate that machine learning algorithms predict sepsis in dogs with 85% accuracy based on vital data such as heart rate and temperature. In horses, AI detects obstructive colic on ultrasounds, reducing time to surgery by 30%. The main limitation is the scarcity of

of robust veterinary databases to train these models, requiring international collaborations.

AI-enhanced triage improves case prioritization in veterinary ICUs. Boysen, SR et al. (2020) report that algorithms based on the Veterinary Acute Patient Score (VAPS) identify critically ill patients more quickly, reducing waiting times by 25%. In cats, AI helps detect acute respiratory failure, while in dogs, it predicts arrhythmias in cases of poisoning. Validating these models requires data from diverse populations, especially in species with metabolic variability.

AI-powered image analysis has increased diagnostic accuracy. Buczak, AL et al. (2018) highlight that deep learning algorithms identify pneumothoraces in dog radiographs with 90% sensitivity, surpassing human analysis in high-pressure scenarios. In horses, AI detects fractures in magnetic resonance images with high accuracy. Integration with portable devices, such as ultrasounds, is a growing area of research, but the lack of infrastructure in smaller clinics limits adoption.

AI also optimizes mechanical ventilation in emergencies. Hopper, K. et al. (2015) report that algorithms adjust ventilation parameters in cats with pulmonary edema, reducing complications by 20%. In horses, AI monitors oxygenation in cases of severe pneumonia, adjusting ventilation in real time. The lack of infrastructure to implement these systems in regional clinics is a hurdle that requires investment in technology.

Outcome prediction is another significant advance. Buczak, AL et al. (2018) demonstrate that predictive models identify mortality risks in dogs with septic shock with 80% accuracy. In horses, AI predicts post-surgical complications in cases of colic, enabling preventive interventions. The creation of collaborative databases is essential to improve the generalizability of these models and their application across different species.

Integrating AI with telemedicine expands access to diagnostics in emergencies. Boysen, S.

R. et al. (2020) report that teleconsultation platforms combined with AI enable real-time diagnoses in remote areas, reducing time to treatment by 40%. In dogs, AI integrated with telemedicine detects sepsis based on remotely sent vital signs.

Limited connectivity and the need for training are barriers that require structural solutions.

Challenges in using AI include model validation and accessibility. Silverstein, D.C. et al. (2014) highlight that the lack of robust veterinary data limits the generalizability of predictive algorithms. Collaboration between clinics, universities, and industry can create shared databases, promoting more accurate and effective emergency care practices, with benefits for animal health and translational potential.

6. Telemedicine in Veterinary Emergencies

Telemedicine has revolutionized access to emergency veterinary care, especially in rural areas where specialists are scarce. Boysen, SR et al. (2020) report that teleconsultation platforms reduce time to treatment by 40%, allowing specialists to guide veterinarians in complex cases, such as canine trauma. In horses, telemedicine is used to evaluate colic in the field, improving outcomes by 30%. Limited connectivity in rural areas is a significant barrier that requires infrastructure investment.

Integrating telemedicine with portable devices, such as mobile electrocardiograms (ECGs), improves diagnostic accuracy. Hopper, K. et al. (2015) highlight that portable ECGs detect arrhythmias in dogs with thoracic trauma in real time, allowing immediate interventions. In cats, telemedicine assists in the management of acute respiratory failure, with specialists guiding oxygen therapy adjustments. The lack of training in the use of these platforms is a barrier that requires educational programs.

Telemedicine also supports the continuing education of veterinarians. Silverstein, D.C. et al. (2014) report that webinars and remote consultations train professionals in remote areas, improving the quality of care by 20%. In horses, telemedicine is used to guide emergency surgeries in the field, reducing postoperative complications. Standardization of telemedicine protocols is necessary to ensure consistency and effectiveness in clinical practice.

Artificial intelligence enhances telemedicine in emergencies. Buczak, AL et al. (2018) demonstrate that AI algorithms analyze data sent via teleconsultation, increasing diagnostic accuracy by 25% for conditions such as sepsis in dogs. In horses, AI integrated with telemedicine detects intestinal obstructions in remote ultrasounds. Validating these systems requires robust databases, an area that requires international collaboration.

Telemedicine also facilitates post-emergency follow-up. Boysen, SR et al. (2020) report that remote consultations monitor the recovery of dogs with septic shock, reducing readmissions by 15%. In horses, telemedicine monitors post-surgical recovery in cases of colic, allowing for management adjustments. The lack of infrastructure in rural areas limits adoption, requiring investment in connectivity.

The challenges of telemedicine include connectivity and implementation costs. Hopper, K. et al. (2015) emphasize that telemedicine requires stable internet, which is scarce in remote regions. Investments in high-speed networks and veterinary training are crucial to expanding access. Collaboration between clinics and technology providers can overcome these barriers, promoting more equitable practice.

Telemedicine has translational potential for human medicine. Silverstein, D.C. et al. (2014) suggest that protocols developed for veterinary emergencies, such as teleconsulting for

trauma, can inform human medicine in rural areas. The One Health approach reinforces the importance of integrating telemedicine data across species, promoting advances in global health.

7. Technology Implementation Challenges

The implementation of technologies in emergency veterinary medicine faces significant challenges, including cost, training, and standardization. Boysen, SR et al. (2020) highlight that the high cost of equipment, such as CT scanners and mechanical ventilators, limits their adoption in smaller clinics. In dogs, lack of access to multiparameter monitors compromises sepsis management, increasing mortality. Investment in affordable financing models, such as equipment leasing, is necessary to expand access.

The lack of specialized training is another critical barrier. Hopper, K. et al. (2015) report that veterinarians in rural areas often lack training in using technologies such as portable ultrasounds or AI systems. Continuing education programs, such as webinars and workshops, can bridge this gap, empowering professionals to integrate new tools. Collaboration with universities is essential to expanding access to training.

Standardization of emergency protocols is limited by interspecific variability. Silverstein, DC et al. (2014) highlight that the lack of global guidelines for the use of AI and telemedicine compromises consistency in clinical practice. In horses, variability in colic management protocols requires international consensus. Creating evidence-based guidelines inspired by human standards is a priority to improve effectiveness.

Validating technologies, such as AI algorithms, is challenging due to the scarcity of veterinary data. Buczak, AL et al. (2018) report that the lack of robust databases limits the generalizability of predictive models for sepsis or trauma. Collaboration between clinics and research centers can create shared databases, improving technology validation and their application across different species.

Accessibility in rural areas is a significant obstacle. Boysen, S.R. et al. (2020) highlight that limited connectivity hinders the adoption of telemedicine in remote regions, where emergencies such as equine colic are common. Investments in infrastructure, such as high-speed internet networks, are crucial to expanding access to emergency care. Public-private partnerships can facilitate these improvements.

The integration of innovative therapies, such as hyperbaric oxygen therapy, is limited by high costs. Hopper, K. et al. (2015) suggest that partnerships between clinics and industry can facilitate access to these therapies, especially in regional centers. Interdisciplinary collaboration,

involving veterinarians, engineers and researchers is essential to make these innovations accessible and practical.

The One Health approach offers opportunities to overcome implementation challenges. Silverstein, D.C. et al. (2014) emphasize that the integration of veterinary and human data can accelerate the development of technologies, such as multiparameter monitors, with benefits for both sectors. Collaboration across sectors is essential to promote more integrated, equitable, and effective emergency medicine.

8. Transactional Perspectives

Emergency veterinary medicine has significant translational potential for human medicine, especially in critical conditions such as septic shock and trauma. Boysen, S.R. et al. (2020) report that animal models, such as dogs, are used to study septic shock, with implications for human protocols. The One Health approach facilitates data integration across species, promoting advances in diagnosis and treatment that benefit global health.

Hemodynamic monitoring in animals offers insights for human medicine. Hopper, K. et al. (2015) highlight that the use of blood pressure catheters in dogs with hypovolemic shock can inform the management of human patients in ICUs. Validating these models in collaborative studies is essential to maximize their translational potential, especially in emergency settings.

Artificial intelligence has promising translational applications. Buczak, AL et al. (2018) demonstrate that algorithms developed to predict sepsis in dogs can be adapted to humans with similar accuracy. The creation of shared databases between veterinary and human medicine is crucial to validate these models and accelerate their implementation in clinical settings.

Veterinary telemedicine can inform human medicine in rural areas. Boysen, S.R. et al. (2020) report that teleconsultation platforms developed for veterinary emergencies, such as canine trauma, can be adapted for humans, reducing access barriers. Interdisciplinary collaboration between veterinarians and physicians is essential to develop integrated protocols.

Innovative therapies, such as hyperbaric oxygen therapy, have translational potential. Hopper, K. et al. (2015) suggest that its use in dogs with carbon monoxide poisoning can inform human protocols, especially in cases of hypoxia. Collaborative clinical trials between veterinary and human medicine are needed to validate these applications and establish guidelines.

Biomarkers such as cardiac troponin offer translational insights. Silverstein, D.C. et al. (2014) highlight that troponin levels in dogs with thoracic trauma can be adapted for humans, aiding in the diagnosis of myocardial injury. Integrating veterinary and human data is essential to identify common biomarkers and develop more accurate diagnostic tests.

Challenges from a translational perspective include model validation and protocol standardization. Boysen, S.R. et al. (2020) suggest that collaboration between universities, veterinary clinics, and human research centers can overcome these barriers, promoting more integrated emergency medicine. A One Health approach is essential to maximize the impact of these innovations.

Conclusion

Emergency veterinary medicine has evolved rapidly with the integration of advanced technologies such as artificial intelligence (AI), telemedicine, and real-time monitoring devices, transforming the diagnosis and treatment of critical conditions. Boysen, S.R. et al. (2020) highlight that AI-enhanced triage and telemedicine reduce time to treatment, improving outcomes in dogs, cats, and horses. The One Health approach reinforces the translational potential of these innovations, with animal models, such as dogs with septic shock, informing human protocols. Hemodynamic monitoring, described by Hopper, K. et al. (2015), and biomarkers, such as troponin, increase diagnostic accuracy, while therapies such as hyperbaric oxygen therapy offer innovative solutions for conditions such as carbon monoxide poisoning.

Diagnostic technologies, including portable ultrasound and computed tomography, described by Silverstein, DC et al. (2014), have revolutionized the early detection of trauma and sepsis, reducing mortality by up to 20% in dogs and cats. In horses, transrectal ultrasound, according to Tinker, MK et al. (1997), is essential for diagnosing colic, but accessibility of these tools is limited in rural areas. AI, according to Buczak, AL et al. (2018), optimizes image analysis and outcome prediction, but the lack of robust veterinary databases prevents the generalization of algorithms. Investment in international collaborations is crucial to overcome this barrier.

Innovative treatments, such as stem cell therapy and phytotherapy, described by Riviere, J.E. et al. (2011), offer new perspectives for the management of emergencies, such as acute kidney injury in cats and laminitis in horses. Hyperbaric oxygen therapy, according to Hopper, K. et al. (2015), improves tissue oxygenation, but its availability is restricted to specialized centers. Integrating therapies with monitoring technologies, such as continuous glucose monitors, increases efficacy, but high costs limit adoption. Standardizing protocols and validating new therapies are essential to expanding access.

Telemedicine has expanded access to emergency care, especially in remote areas.

Boysen, SR et al. (2020) report that teleconsultation platforms reduce time to diagnosis by 40%, benefiting cases such as trauma in dogs and colic in horses. Limited connectivity and lack of training are challenges that require investment in infrastructure and education. The integration of AI with telemedicine, according to Buczak, AL et al. (2018), improves diagnostic accuracy, but validating combined systems requires shared databases.

Implementation challenges include the high cost of technologies, the lack of specialized training, and the absence of global guidelines. Hopper, K. et al. (2015) suggest that public-private partnerships can facilitate access to equipment such as CT scanners and ventilators. The creation of collaborative databases, according to Silverstein, D.C. et al. (2014), is essential for validating AI models and biomarkers. The One Health approach promotes the integration of veterinary and human data, accelerating the development of technologies and therapies with benefits for both sectors.

In short, emergency veterinary medicine is undergoing transformation, with innovative technologies and treatments reducing animal morbidity and mortality. Collaboration between clinics, universities, and industry is essential to overcome cost, training, and validation barriers.

Boysen, SR et al. (2020) highlight that the integration of AI, telemedicine, and biotechnology has the potential to revolutionize practice, while the One Health approach expands its impact.

Future research should focus on standardizing protocols, validating technologies, and continuing education, ensuring that advances benefit all species and inform human medicine.

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