

Anesthetist

The Anesthetist assesses the general health and appearance of each cat and sedates them for surgery. **This position requires a rabies vaccination.**

Safety First

- ✓ **Discards sharps from each cat in the biohazard container.**
- ✓ **Dispose of all needles and syringes according to protocol with no exceptions. Do not recap the needles.** Place the needle/syringe combination into a sharps disposal container. The needle cap can be disposed of in garbage or the sharps container.

Station Alert

- **To screen for any potential contraindications for anesthesia, observe the general health and appearance of each cat.**
- **Check each cat for a tipped ear or URI before the cat receives any anesthesia.**

Anesthetist Instructions

1. **Prepare multiple doses of the TKX anesthesia mixture upon arrival** using 1 ml Luer lock syringes with a 3/4 inch 22g needle assembly to draw up 0.25 ml. The normal dosage for an average adult cat is 0.25 ml, the minimum dose is 0.125 ml, and the maximum dose is 0.3 ml. Adjust the dose up or down for larger or smaller animals. Consult the Clinic Supervisor for any other dose.
2. **Assess the cat before injecting anesthesia.**
 - Inspect the cat's ears. A tipped left ear indicates the cat has already been sterilized. Occasionally, the right ear has been tipped instead.
 - If an ear is tipped, do not anesthetize the cat. Instead, cover the trap, affix an "Already Neutered" tag to the handle, and send the cat and its Medical Record to the Veterinary Examination Station.
 - To screen for any potential contraindications for anesthesia, observe the general health and appearance of the cat.
 - If the cat has signs of URI, do not anesthetize the cat. Instead, cover the trap, affix an orange "URI" tag to the handle, and place the cat in the isolation area to have surgery last.
 - Review any alert tags issued by Admissions.
 - Contact the Clinic Supervisor with any concerns. Do not anesthetize kittens younger than 12 weeks or less than 3 pounds or debilitated cats without first consulting with the Clinic Supervisor.
 - Issue a red "Medical Alert" tag and make a note on the Medical Record about any unusual findings or concerns. Write a note on masking tape on the back of the tag with a Sharpie pen alerting the Veterinary Examination Station, e.g., "check jaw," "difficult breathing," "vomited in anesthesia," etc. The Anesthesia Recorder will attach the tag to the plastic records sleeve.
3. **Inject the cat in the paralumbar muscle** through the holes of the trap as soon as the Anesthesia [Restrainer](#) confines the cat with the trap divider. Communicate the Cat ID number, anesthesia dose, TKX vial #, and time of injection to the [Anesthesia Recorder](#).
 - Use a hemostat to retrieve the needle, if it comes off the syringe and remains in the cat. Luer-lock syringes should be used to prevent this from happening. Do not reach into the trap while the cat is awake.
 - Dispose of the used syringe and needle in sharps container. Do not recap or reuse.

Station Closing and Cleanup

When the clinic is concluded:

- return all drugs to the Clinic Supervisor
- place all empty drug vials in the labeled bag provided and return to the Clinic Supervisor
- inventory the remaining supplies and repack the supply kits
- return the kits, station instructions, and any remaining items to storage

- return Gender ID tags to Admissions
- wipe and dry all plastic sleeves inside and out to clean
- clean the area
- dispose of all trash
- wash all tables
- sweep or vacuum
- mop the floor.