Neuter Surgeon
The Neuter Surgeons perform routine castration on male cats. This position requires a rabies vaccination.

Other Medical Procedures
Minor problems such as an abscess or laceration may be corrected, but cats requiring lengthy treatments or complex surgeries are referred to outside veterinarians or euthanized according to Operation Catnip’s Medical Procedure Policy. This policy ensures that Operation Catnip maintains its focus on safely sterilizing as many cats as possible. Questions are directed to the Clinic Supervisor who consults with the Medical Director as needed.

Safety First
- Monitor the cat for complications resulting from the anesthesia, in particular, irregular breathing or not breathing.
- Respiration should be >6/minute, heartbeat should be >100/minute, and gum color should be pink. If the cat is not breathing well, or its gums are blue, take the cat immediately to the Emergency Station. Speaking loudly and calmly say “cat not breathing” to alert vets to converge at the Emergency Station.
  Note: Xylazine causes pale gums.
- 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.

Special Handling
- When transporting, do not hold the cat from the scruff of its neck alone. Always support its back and bottom, too. Support the cat’s head without flexing its neck, so that the airway remains straight and open.
- Keep the cat entirely on its fleece, including its tail, head and all of its feet. Do not allow any part of the cat’s body to contact clothing, skin or anything except the fleece, in order to prevent any contamination from cat to cat.

Station Alert
- Evaluation of a medical condition or assistance in an emergency may be requested. A standard Feline CPR Crash Kit, oxygen and isoflurane anesthesia machines are available.
- Neuter Surgeons must wear gloves surgical caps and masks at all times when in the surgery area.
- Only Surgery Transporters, Surgeons and Veterinary Assistants are permitted in the surgical area.
- Closed castrations are recommended, because the procedure is less invasive.
- If more than 3 cats are waiting at any one time, alert the Clinic Supervisor so that more help can be assigned to the station.
- Fill out the surgical notes on every surgery, including both routine and exceptional information.
- Do not remove any alert tags.

Neuter Surgeon Instructions
1. Monitor the cats carefully.
2. Wear gloves at all times, even when not in surgery. Change gloves between cats. Wear gloves, cap, mask, and scrub top while in surgery.
3. The Surgery Transporter will bring a prepped cat to the Neuter Station.
4. Call for a Veterinary Assistant to administer isoflurane gas, if the cat is not fully anesthetized. Cats recover more quickly from gas than from a second anesthetic injection.
5. Check the Medical Record, any alert tags, and the Veterinary Examination Form for any additional instructions before the cat is positioned to address any problems or medical conditions.
noted that need attention. If the treatment is completed at the Neuter Station, document in the Medical Record and remove the alert tag.

6. **Place the cat on the neuter positioner.** Ask a Veterinary Assistant to hold the cat’s legs if necessary.

7. **Before beginning the castration, check the genitals to be sure the cat has two descended testicles.** If the cat does not have two descended testicles, do not start surgery and return the cat to the Surgery Prep Station.

8. **Return the cat to the Surgery Prep Station,** if the surgical area needs attention such as additional shaving.

9. **Use a new blade, hemostat, drape and gloves for each cat.**

10. **Castrate the cat, and be very sure the knots are tight.** Always tie a half-hitch knot unless instructed otherwise.

11. **Clean any blood from the incision** with hydrogen peroxide.

12. **Discard sharps after each cat in the biohazard container provided.**

13. **Defective instruments** should be labeled with tape, set aside and given to the Clinic Supervisor to assess for repair or disposal.

14. **If a cat should receive subcutaneous fluids after surgery** for dehydration, record the volume of fluids needed on the Medical Record and affix a yellow “Fluids” tag to the left front paw.

15. **Make note on Veterinary Examination Form if TO GO HOME ORDERS are indicated.** See the bottom of the Veterinary Examination Form for options to select from. The Clinic Records Station will send these home with the cat.

16. **Complete the applicable portions of the Surgical Record section.**
   - Record the name of surgeon and indicate their status: Veterinarian (DVM) or veterinary student.
   - Complete the Anesthesia section, eg, noting if isoflurane is used.
   - Complete the Neuter Report in detail.
   - Note any other findings or treatments, eg, if the cat needs fluids or has an upper respiratory infection.
   - Document any special surgical or medical notes. All unusual findings or treatments must be documented.
   - Record any notes to the caregiver needed to explain any abnormal findings. Summarize significant findings and home instructions in language suitable for cat caregivers to understand and comply with in the notes box in the lower part of the Surgical Record.
   - The surgeon is responsible for ascertaining that all routine and exceptional findings and procedures are properly documented. Once this is completed, the surgeon must initial this confirmation on the Medical Record at the bottom of the “Notes” section.

17. **If the cat has been identified as infectious/URI, was not separated, and is being processed amidst non-infectious cats, then the vaccines and medications should be administered at the surgery table.**
   - Ask the Veterinary Assistant to take the cat’s Medical Record and retrieve the Rabies Certificate, vaccines, and proper doses of buprenorphine, yohimbine, and Advantage Multi®.
   - Administer the vaccines and medications. Note URI on the Medical Record.
   - On the Rabies Certificate, complete the cat identification number at the top, write in the rabies vaccine serial number in the appropriate place, mark the rabies as 1 year and the FVRCP-FeLV as “initial dose.” The Clinic Records Station will complete the rest of the certificate.
   - After medications and vaccines have been administered and all records are complete, return the paperwork to the plastic sleeve, ask the Surgery Transporter to take the cat directly to the Clinic Records Station.

18. **When surgery is finished,** transfer the cat to the Vaccinations Station with its Medical Record in the plastic sleeve.

19. **Maintain the surgical area throughout the clinic.** Take care to keep the area clean and free of medical waste, used instruments, dirty towels and other disposables.
   - Place used surgical instruments into warm soapy water.
o The Surgery Transporter will transport the used instruments to the surgery area entry line (demarcated by tape on the floor) so that Instrument Station volunteers can collect surgery packs without entering the surgical area.

o Discard the paper drape, used gauze, gloves and other disposables, saving the outer autoclave wrap for reuse. Set aside dirty towels for laundering.

o Deliver any uncollected used instruments, dirty towels, and autoclave wrap to the Instruments Station when the clinic is concluded.

o Defective instruments that have been identified with tape and set aside should be delivered to the Clinic Supervisor.

**Station Closing and Cleanup**

When the clinic is concluded:

- inventory the remaining supplies and repack the supply kit
- return the kit, station instructions, and any remaining items to storage
- clean the area
- dispose of all trash
- wash all tables, including the central trough
- wipe down entire base of table
- remove tape from underside of table
- wipe as much of the overhead surgery lamp as can be reached
- sweep or vacuum
- mop the floor.

*Return unused clean instruments and gauze to the Instruments Station.*