Ear-Tip Technicians

Ear-Tip Technicians work together to prepare the cat for surgery by administering antibiotics and tipping the cat’s left ear. **This position requires a rabies vaccination.**

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

- **If a cat’s ear has already been tipped,** notify the Pre-Prep Recorder and send the cat to the Vaccinations Station for booster vaccines.
- **If a cat has already been sterilized, but the ear has not been tipped,** tip the ear with the Clinic Supervisor’s approval and direct the cat to the Vaccinations Station for booster vaccines.
- **Do not remove any alert tags.**

Ear-Tip Technician Instructions

1. **Prepare approximately 50 doses of penicillin** at the beginning of the clinic and as needed throughout the clinic. Avoid drawing up excessive doses of penicillin, since it must be discarded if not used by the end of the clinic.
   - Shake the penicillin bottle to mix the antibiotic.
   - Use a 3 cc syringe with an **18 ga needle that remains in the bottle** to draw up multiple doses of the penicillin antibiotic upon arrival.
   - Adults receive a 1.0 ml dose, and kittens receive a 0.5 ml dose.
   - Place a new 20 ga needle on each syringe for administration.
   - Place the filled syringes in containers with a towel between the vial and the ice packs to prevent freezing.
   - Keep the penicillin vial in a cooler with a towel between the vial and the ice packs to prevent freezing.
2. **Compare the Paw Tag and the Medical Record to be sure the ID# matches.**
3. **Administer the penicillin subcutaneously** in the left shoulder. Aspirate prior to injection to be sure the injection is not accidentally intravenous.
   - Dispose of the used syringe and needle in sharps container. Do not recap or reuse.
4. **Tip the left ear.**
   - Use the **plastic ear-tipping guide** to draw a line on the left ear where the hemostat should be placed to expose 3/8” of the tip.
   - Place a straight hemostat across the line with crushing pressure.
   - Use scissors to cut off the tip with one single straight cut, leaving the hemostat on the ear. (Do not “saw.”)
Use new scissors and hemostats for each cat, and deposit the dirty scissors in warm soapy water.
- Save the paper towels from the instrument pack for spay board cleaning.

5. **Check the Veterinary Examination Form for gender status to see where the cat goes next.**

6. **Transfer the cats to the appropriate station when they are ready to leave** the Pre-Prep Station.
   - Non-pregnant females are taken to the **Bladder Express Technician**.
   - Pregnant females and cryptorchid males are transferred to the **Spay Boards Station**.
   - Normal males are taken directly to the **Surgery Prep Station**.

**Station Closing and Cleanup**

When the clinic is concluded:
- inventory the remaining supplies and repack the supply kit
- return the vial of penicillin to the Clinic Supervisor
- 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.