

# Surgery Transporter

The Surgery Transporter collects the prepped cats from the Surgery Prep Station, delivers them to the Spay or Neuter Stations for surgery and transfers cats from the Spay Station to the Vaccinations Station when surgery is finished. Working together, the Surgery Transporter and the Veterinary Assistant make sure each Spay Surgeon has a cat on the surgical table at all times. **This position requires a rabies vaccination.**

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## Safety First

- ✓ **Monitor the cats carefully.** 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.*

## 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

- **Surgery Transporters should wear 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.**
- **Alert the Veterinary Assistant, if a cat is a cryptorchid male or has been flagged as infectious,** and also advise the [Vaccinations Station](#).

## Surgery Transporter Instructions

1. **Wear a cap and mask at all times when in the surgery area.**
2. **Transport the cats from the Surgery Prep Station to the [Spay Surgeon](#) and the Neuter Surgeon** in the order in which they are prepped; first in, first out.
3. **Point out any alert tags on the paw, if present.**
4. **Compare the Paw Tag and the Medical Record to be sure the ID# matches.**
5. **Do not touch the area that has been shaved and scrubbed** on the cat. If you do inadvertently come in contact with the area, return the cat to the Surgery [Prep Station](#) for a re-wipe.
6. For surgeries at the Spay Station, place the cat on the spay table with the **head toward the central aisle.**
7. For surgeries at the Neuter Station, place the cat at the station with the **rear end facing the surgeon.**
8. **When the spay is complete,** ask the Veterinary Assistant or the Spay Surgeon whether the Medical Record is completely filled out before removing the cat.
9. **Check the incision area** to be sure all blood has been cleaned off. Never transport a cat that has blood on it.
10. **Remove the cat promptly** once the Medical Record is complete and the incision is clean. If there is any blood visible, ask the surgeon to clean it with peroxide before the cat leaves the station.
11. **If the cat has been identified as infectious/URI** and was not separated and is being processed amidst non-infectious cats, the vaccines and medications should be administered at the surgery table and the cat taken directly to the Clinic Records Station to avoid contaminating other stations.
12. **Transport spayed cats on their boards to the Vaccinations Station** with their Medical Records in the plastic sleeve. The Neuter Surgeon will transfer cats to the Vaccinations Station when castration is complete.

- 13. Transport the used instruments** to the Surgery Station entry line (demarcated by tape on the floor) and gently place them in the buckets designated for this purpose. Also, place surgical laundry in the receptacle provided. This allows the Instrument Station volunteers to collect surgical instruments and laundry without entering the Surgery Station.

### **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.