Preparing for DVS Surgical Procedure

Front Desk

Book DVS Visit

- Website directvetsurg.com
- Email directvetsurg@gmail.com
- Phone 651-829-1111
- Please provide patient name, signalment, body weight, disease, surgical procedure, radiographs, other data.
- Specify any preferences: day of week, am/pm, dates, surgeon preference

Clinic-DVS Visit Scheduled

• "Confirmation" email (will look like a Google Invite; take note, but no response required)

Owner/Doctor Documents

- Pass along attached documents:
 - o Client (Pet Owner series, Postop Instructions, Preop Prep, Working with DVS)
 - DVM staff (DVM Professional series)

Owner Confirmed

Please place reminder call to owner 1 day in advance.

DVS Confirmed

 DVS will call you 1 day in advance to confirm <u>approximate</u> time of arrival and actual procedure type. **If you do not hear from us, please call to confirm

Surgeon Arrival Time

 Day of surgery, <u>DVS will call 30 minutes</u> prior to our arrival. Please make sure to communicate time to the surgery team. **If you do not hear from us, please call to confirm.

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Surgery Team

DVS confirmed

 Surgery Technician ask receptionist for surgeon arrival time.

Admit with Owner

- Confirm procedure with owner
- Mark site/leg with owner using marker/pen
- Confirm current medications with owner
- Set approximate discharge time

Surgery Team Chart Review

- Confirm procedure
- Confirm site/leg
- Confirm ongoing medical conditions and current medications
- Confirm pre op radiographs available, if appropriate.



OR Preparation

- Prepare anesthesia plan
- Syringes and needles for Nocita/Bupivacaine (1cc-20cc syringe variety several each, 22 & 20g needles)
- Culturettes and formalin containers readily available
- Lavage/additional bag of new fluids
- Skin prep supplies:
 - o Antiseptic scrub gauze
 - Alcohol gauze
 - Antiseptic squirt bottle
 - Alcohol squirt bottle
- Bandage Box preferences:
 - BSN Specialist Cast Padding (2 inch for smaller patients and 3 or 4 inch for larger patients)
 - Stretch roll gauze (2 inch for smaller patients and 3 or 4 inch for larger patients)
 - VetWrap (2 inch and 3 or 4 inch)
 - 1 inch white tape
 - o Bandage scissors
 - 2 inch Tegaderm roll optional

Patient Prep:

- Premedicate (anti-anxiety, anti-nausea, sedation, analgesia), unless specific request not to
- Place IV catheter
- ****Verify surgeon's 30 minute heads up call prior to induction***
- Induction/maintenance anesthesia
- Cefazolin (or equivalent) administered IV during patient prep (completed prior to skin incision)
- Surgery site clip
 - TTA/TPLO clip from mid metatarsals to trochanter
 - Other stifle surgeries clip hock to trochanter
 - Perianal surgeries clip two halfmoons around anus reaching ischium to ischium
 - Abdominal surgeries clip sternum to pubis

OR Patient Set-up: (Please utilize DVS staff for assistance)

- All staff wear cap/mask
- Move to OR and establish
 anesthesia and monitoring (EKG,
 SPO2, CO2, blood pressure,
 temperature probe). **If surgeon
 is utilizing electrocautery, it is
 important that EKG clips are
 used and NOT esophageal probe (metal
 exposed); esophageal burn risk**
- VetWrap from hock to toes (after clip/vacuum), if a "hanging leg" prep is appropriate.
- Prepare surgery site using aseptic technique. Alternating liberal use of Chlorhex/Betadine Scrub and Alcohol/Solution minimum 3 times each. Focal point at incision and extending out to clip margins.