**INTRAOPERATIVE OPEN EQUINE CASTRATION**

* The scrotum and parietal tunic are incised (a minimum 10cm incision, 2-3 cm parallel to the raphe
* The ligament of the tail of the epididymis (attaching the parietal tunic to the epididymis) is severed or bluntly dissected.
* Transection of the mesorchium and mesofuniculum allow the testicle, epididymis and the distal aspect of the spermatic cord to be exteriorized.
* Ligation of the testicular artery, vein (optional)
* Suture: #0 to #2 absorbable (such as Vicryl or PDS)
* A Miller’s knot or trans fixation suture is placed around the entire spermatic cord, or, ligature is placed directly around individual vessels.
* This ensures excellent hemostasis, however, it can contribute to postoperative infection of the spermatic cord.
* Emasculators (Nut to Nut)
* Emasculator is held clamped for a minimum of 1 minute. (rule: 1 minute per age year of horse is often used)
* Serra, Whites – Cut and crush at the same time
* Reimer – Crush only; need to cut manually with a scalpel
* Pareital tissue is left behind which can contribute to infection.