



# Intra-operative Procedure

# Remember these are the normal ranges without anesthesia

- Temperature = 100-102.5°F
- Heart rate (beats/minute) = 70-180
- Respiratory rate (breaths/minute) = 20-40 resting
- Blood pressure = >60 mm Hg (mean) and >90 mm Hg (systolic)
- Oxygen saturation = >95%
- EtCO<sub>2</sub> = 35-45
- Mucous membranes = pink, not pale, white, gray, or blue

# Normal range with anesthesia

- Temperature =  $>98^{\circ}\text{F}$
- Heart rate (beats/minute) = 60-140
- Respiratory rate (breaths/minute) = 6-20
- Blood pressure =  $>60$  mm Hg (mean) and  $>90$  mm Hg (systolic)
- Oxygen saturation =  $>95\%$
- EtCO<sub>2</sub> = 35-55 (note: Sudden increases can signify the onset of MH)
- Mucous membranes = pink, not pale, white, gray, or blue

# Fixing the inguinal hernia

1. Surgically correct the scrotal hernia prior to castrating.
2. Press the scrotum and fix one testicle.
3. Perform a small longitudinal incision with BP surgical blade (no. 11) over the infected inguinal ring. Incision of about 1 inch length is to be made and extended depending on testicle size.
4. After cutting through the skin, fascial layer tunica vaginalis thin layer will be observed.
5. Cut the tunica vaginalis layer.
6. Pull one testicle slightly outside.
7. The intestines can be seen within the vaginal tunic.
8. Twist the tunic to push intestines back into the peritoneal cavity.

# Castrating the animal

1. Separate the spermatic cord and blood vessels.
2. Place the transfixation ligature (with absorbable suture material such as cat gut no. 1) around the spermatic cord and transect. Cut the spermatic cord and blood vessels below the ligation and remove the testicle.
3. Close the inguinal rings after removing the second testicle.
4. Apply antimicrobial powder to the wound which is left slightly open for drainage.