

# SpayNeuterNac

## Dog Spay Form

Date: _____	Pet Name: _____	
Owner: _____	Owner ID: _____	Pet ID: _____
Phone: (____) _____	Weight: _____	Tech: _____ Scribe: _____

Description	Amount	mg Used	Initials	Time
<b>Vaccines</b>				
<b>Rabies:</b> RR Initials: Time:	<b>DHPP:</b> RF Initials: Time:		<b>Bordatella:</b> IN Initials: Time:	
<b>Topical Meds</b>				
Capstar per rectum Blue Green	tablet			AM PM
Ivermectin:PG 1:9 0.1%	0.1 cc AU	0.1 mg per ear		AM PM
				AM PM
<b>Injectable Meds</b>				
Acepromazine (10 mg/ml) – IM	cc	X 10 = mg		AM PM
Acepromazine (1 mg/ml) – IM	cc	= mg		AM PM
Butorphanol (10 mg/ml) – IM	bottle: cc	X 10 = mg		AM PM
Butorphanol (10 mg/ml) – IM	bottle: cc	X 10 = mg		AM PM
Butorphanol (10 mg/ml) – IM	bottle: cc	X 10 = mg		AM PM
Butorphanol (10 mg/ml) – IM IV	bottle: cc	X 10 = mg		AM PM
Dexdomitor (0.5 mg/ml) - IV	cc	X 0.5 = mg		AM PM
Diazepam (5 mg/ml) – IV	bottle: cc	X 5 = mg		AM PM
Ketamine (100 mg/ml) – IV	bottle: cc	X 100 = mg		AM PM
Ivermectin (10 mg/ml) - AU	0.1cc	1 mg (1000 ug)		AM PM
Polyflex (250 mg/ml) – SC IM	cc	X 250 = mg		AM PM
Praziquantel 5.65% – SC	cc	X 56.5 = mg		AM PM
				AM PM
<b>Rx Meds to Go Home</b>				<b>Filled - Initials</b>
Buprenex (0.3 mg/ml)	cc	X 0.3 = mg	PO up to q8hrs PRN for pain	
Cephalexin 250 mg tablets	Tablet	PO BID x ____ days for :		
Cephalexin 250 mg capsules	Capsule	PO BID x ____ days for :		
Cephalexin 500 mg	Capsule	PO BID x ____ days for :		
Doxycycline 100 mg	tablet	PO BID x 2 weeks for cough		
Ivermectin 1% (10 mg/ml)	cc	PO every 2 weeks for 3 doses for scabies		
Metronidazole 250 mg	tablet	PO BID x 7 days for diarrhea		
Panacur (100 mg/ml)	cc	PO SID x 3 days, and repeat in 2 weeks to deworm		
Pyrantel (50 mg/ml)	cc	PO SID x 3 days, and repeat in 2 weeks to deworm		
Tramadol 50 mg	tablets	PO up to q8hrs PRN for pain x ____ doses		
<b>Extra Materials</b>				
Surgery Gown		Bouffant Hat	Surgery Mask	6-1/2 Gloves
Exam Gloves		#10 Blade	Spay Pack	Microchip

**Surgery Report:** Incision length: \_\_\_\_\_ cm In Heat pregnant \_\_\_\_\_ days \_\_\_\_\_ feti

**Ovary Ligation:** 2 Mono 0 Mono 2-0 Mono 3-0 Mono 4 gut 2 gut 0 gut 2-0 gut

**Uterine Body Ligation:** 4 gut 2 gut 0 gut 2-0 gut **Linea alba:** 0 Mono 2-0 Mono 3-0 Mono

**Skin closure:** glue 2-0 Braunamid **Suture Pattern:** simple inter simple cont cruciate inter

**Hemostasis:** electrocautery 3-0 Mono ligation belly wrap

**Identification:** tattoo microchip (  registered)

**Comments:**

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**Anesthetic Report:** make an entry every 5-10 minutes

Anesthetic Induction							
Isoflurane On		Intubated: Yes No		Tube Size:			
Surgery Start		Pat. Tubes: Bain F-Tubes		RB Bag: 1/2L 1L 2L 3L			
Time	O <sub>2</sub> (L/min)	Isoflurane %	O <sub>2</sub> Sat %	Heart Rate bpm	Resp Rate bpm	Temp °F	
Isoflurane Off		Surgery Time: _____ min. Isoflurane Time: _____ min. Oxygen Time: _____ min.					
Surgery End							
Oxygen Off							
Extubated							

**Time sternal:** \_\_\_\_\_ **Time Walking:** \_\_\_\_\_

**Anesthetic Recovery:** uneventful  Comments (below)

**Post-Op Support:** ice pack heating pad snuggle safe disc

**Comments:**

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**Drugs in log:**  **Nail Trim:**  **Clean Ears:**  **Took blood for HW Test:**

**Check isoflurane:** M\_\_\_\_\_ G\_\_\_\_\_ W\_\_\_\_\_ **Check Oxygen:** M\_\_\_\_\_ G\_\_\_\_\_ W\_\_\_\_\_

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**Post-Op Check-Up:** Initials: \_\_\_\_\_ Time: \_\_\_\_\_ PM AM

BAR QAR painful mm Pink CRT <2 sec incision looks good

**Comments:**