

# Cat Spay Form



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

Description	Bottle:	Amount	mg Used	Initials	Time
<b>Vaccines</b>					
<b>Rabies:</b> RR Initials: Time:	<b>FRCP:</b> RF Initials: Time:	<b>FeLV:</b> LR Initials: Time:			
<b>Topical Meds</b>					
Capstar Blue per rectum		tablet			AM PM
Ivermectin:PG 1:9 (1 mg/ml) - AU		0.1cc	0.1 mg (1000 ug)		AM PM
					AM PM
<b>Injectable Meds</b>					
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
Buprenex (0.3 mg/ml) – IM	bottle:	cc	X 0.3 = mg		AM PM
Buprenex (0.3 mg/ml) – IM	bottle:	cc	X 0.3 = mg		AM PM
Dexdomitor (0.5 mg) - IM		cc	X 0.5 = mg		AM PM
Ketamine (100 mg/ml) – IM	bottle:	cc	X 100 = mg		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
TDB – Telazol (100 mg/ml)	bottle:	cc	X 100 = mg		AM PM
	Butorphanol (10 mg/ml)	bottle:	X 0.5 = cc	X 10 = mg	
	Dexdomitor (0.5 mg/ml)	X 0.5 =	cc	X 0.5 = mg	
Kitty Magic - IM	bottle:	cc			AM PM
	Butorphanol (10 mg/ml)	bottle:	X 0.4 = cc	X 10 = mg	
	Dexdomitor (0.5 mg/ml)	X 0.2 =	cc	X 0.5 = mg	
	Ketamine (100 mg/ml)	bottle:	X 0.4 = cc	X 100 = mg	
Antisedan (5 mg/ml)		cc	X 5 = mg		AM PM
					AM PM
<b>Rx Meds to Go Home</b>					<b>Filled - Initials</b>
Buprenex (0.3 mg/ml)	bottle:	cc	X 0.3 = mg	PO up to q8hrs PRN for pain	
Butorphanol (10 mg/ml)	bottle:	cc	X 10 = mg	PO up to q8hrs PRN for pain	
Cephalexin 250 mg tablets	Tablet	PO BID x _____ days for :			
Ivermectin 1% (10 mg/ml)	cc	PO every 2 weeks for 3 doses for scabies			
Pyrantel (50 mg/ml)	cc	X 50 = mg	PO SID x 3 days, repeat in 2 weeks		
Tramadol 50 mg	Tablet(s)	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:**    0 Mono    2-0 Mono    3-0 Mono    0 gut    2-0 gut

**Uterine Body Ligation:**    2 gut    0 gut    2-0 gut    0 Mono    2-0 Mono    3-0 Mono

**Linea alba:** 0 Mono    2-0 Mono    3-0 Mono

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

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

**Identification:**      tattoo      microchip (  registered)      left ear tip

**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		<b>Surgery Time:</b> _____ min. <b>Isoflurane Time:</b> _____ min. <b>Oxygen Time:</b> _____ 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 FeLV Test:**     **Took fecal sample:**

**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:**