

Minnesota Veterinary Medical Association
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2011 State Fair Surgical Suite - Moderator's Information / Script

This script is a guide for you to follow. **Please read through this each year**, as there are frequent changes made. You can alter or add to it as you feel necessary, or highlight key phrases to use as a guide. You should strive to coordinate your information with what the surgeon is doing and/or what is on the video. In addition, strive to engage the audience; a discussion is more enjoyable than a lecture.

Note that 2011 is the 250th anniversary of the birth of Veterinary Medicine! It is also the Surgery Suite's 20th year at the Minnesota State Fair!

Plan to arrive at the Surgery Suite early, at least ½ hour before your first scheduled surgery, to discuss with the surgeon things such as: the planned pace of the surgery, what suture is to be used, what the closure technique will be, and any unique techniques the surgeon uses to perform a spay or neuter surgery. Also discuss coordinating how the surgeon might show a tissue (e.g. an ovary, the linea alba) on camera so the audience can better orient itself to what the surgeon is doing. We now have a small speaker in the surgery suite so that the surgeon can hear the moderator to aid in this communication. This will also help the audience better understand the surgery itself.

Shelley Harpster is the technician in charge of the surgery suite. Please consult with her if you have any questions.

We have a hands free microphone that will enable you to move around the audience more freely and to make better use of the Interactive Box (see next page). We have received audience feedback indicating that they enjoy the additional demonstrations from the box and questions from the moderator. Some of the questions are listed in the box, but if you think of other questions that the audience would enjoy, feel free to use them and let us know so we can include them to our repertoire.

Shelley will set the volume of the microphone. Please test it before you start your speech, so that it can be adjusted if needed. It is essential that the audience be comfortable with the volume.

Please familiarize yourself with the “Interactive Box” before you start moderating.

INTERACTIVE BOX!!

We have provided a box of interactive material. The box is located either in the suite or on the floor just outside the surgical suite at the Northwest corner.

1. Explain and demonstrate materials used to anesthetize patients (e.g. endotracheal tubes).
2. Explain and demonstrate materials used to perform surgery (e.g. spay hook, tissue glue, suture material).
3. Explain and demonstrate materials used to identify lost pets (e.g. Home Again” ID microchips, microchip reader, stuffed dog with inserted microchip.)
4. Audience questions and prizes.
5. List of companies that contribute products/equipment.
6. Information about “Bair Hugger” blankets.

Set aside a few minutes prior to the demonstration to determine how you would like to share these interactive props with the audience.

Strive to keep the box locked between demonstrations and place it in the trailer at the end of the day. The microphone will also be stored in this box.

Start your introduction a few minutes before the induction of the animal. Depending on the speed of the prep and the surgeon, you may fit some of the general points in during the surgery instead of all at the beginning. **If you are asked questions while you are moderating, please be sure to repeat the question for the rest of the audience to hear before you answer it.**

Try to mention the following points (these are included in the script below, starting on page 4):

- Give your **name**, the surgeon's name, the technician's name, and the student's name.
- Repeat, at several intervals, the **instructions** for those who may be feeling faint.
- **Emphasize the goals of this demonstration:** education about pet overpopulation, education about veterinary medicine, and that these dogs and cats may have a better chance of adoption if sterilized.
- Emphasize the breadth of the veterinary profession and the valuable contribution of technicians & support staff.
- Point out the **high standards** of care (sterility, safety of anesthetic drugs, patient monitoring, etc.) in modern veterinary surgical procedures.

INTERACT WITH THE AUDIENCE:

Ask who owns animals?

What are their animals' names?

Are their animals neutered?

Why is neutering important?

- Discuss the **advantages** to the individual animal of spay surgery, such as decreased risk of cancers, pyometra, and undesirable behaviors.
- If asked about surgery cost, avoid an exact figure (if necessary give a good range) and emphasize that all veterinarians perform spay and neuter surgeries for less than the true cost of any comparable surgery, as a contribution toward pet population control.
- If the animal being spayed is pregnant, never use the word "abortion." Use an alternative phrase that would be more palatable to the general public, "termination of pregnancy," for example.
- All dogs/cats will have a **presurgical screen:** blood counts, clot time & mini-profile. Mention the advantages of having patient baseline data even for routine surgery.
- Dogs/cats will be monitored while in the prep room with a **Pulse Oximeter** and during surgery with a **Surgivet patient monitor**. We are doing this because we have no past health history on these dogs/cats and to demonstrate some of the technology available. Mention the value of advanced monitoring options in difficult or emergency cases.
- The **gas anesthetic** we are using at the Fair is **isoflurane**. This inhalant anesthetic allows for safe, complete anesthesia for dogs and cats.

- We are using **Bair Hugger forced-air warming blankets** at the Surgery Suite to help maintain the animal's body temperature during and after surgery. This same warming blanket is used in human hospitals. Animals and people tend to tolerate anesthesia much better and recover better postoperatively if their body temperature is maintained as close to normal as possible.
- If the dogs/cats have not already received microchips at the animal shelter, they will each receive a "**Home Again**" ID microchip. These are tiny, inert microchips, shaped like a grain of rice, that are placed under the skin between the shoulder blades to permanently identify a pet. These microchips are read with a scanner that most veterinary clinics and animal shelters now have.
- We have many options for **pain control** in small animal medicine and are now treating animals for pain before it occurs (before surgery), during surgery and after surgery. As we learn more about pain control in pets, we know that they perceive pain as we do, but they display signs of pain differently, often masking signs of pain as a protective mechanism. Buprenorphine is a liquid oral pain medication that will be sent with the cat patients for postoperative pain control and oral Rimadyl, a non-steroidal anti-inflammatory drug, will be sent with dogs patients. They will be given these medications for 2-3 days.
- All dogs/cats will receive one dose of injectable antibiotic pre-operatively.
- **And please remember to acknowledge our sponsors.** In addition to the sign on the front of the Surgery Suite, there is another list in the Interactive Box that describes what each company has contributed to the Surgery Suite and, in general, what their mission is.
- **Surgery Script Outline Introduction** (to be used when the animal is being prepped)

The Minnesota Veterinary Medical Association is pleased to welcome you to our State Fair Surgery Suite. This is a special year because it is the 20th year here at the State Fair. Today we will be performing an ovariohysterectomy, more commonly known as a spay, on a female dog/cat (or a canine castration).

Did you know??????

The word **SPAY** is from old French meaning to cut with a sword. Today its meaning has evolved to depict the removal of ovaries from a living animal.

My name is ----- and I will be your moderator for this surgery. I will describe the surgical procedure step-by-step and explain what you are seeing on the television monitors. There is a camera above the surgery table which will allow you to see the surgery that is taking place. The entire procedure, including the preparation, will take 40 to 60 minutes. For safety reasons, please keep the aisles clear during the demonstration.

Not everyone is comfortable with the idea of watching a surgery. There is no reason to feel embarrassed if you prefer not to watch, or if you feel uncomfortable during the procedure.

But, if at any time during the demonstration you start to feel very warm, dizzy, or faint, do not try to get up and leave suddenly. Ask for assistance. If you are feeling faint, put your head down between your knees and ask your neighbor for help. Let me know right away. The stands are steep and we don't want anyone to fall.

The animals receiving the spay surgery today are from ----- (humane organization). These dogs/cats will go back to the humane organization and will be available for adoption. Photos of the dogs/cats and information about ----- (humane org) can be seen on both ends of the surgery suite. Humane organizations take the responsibility of managing pet overpopulation, and we join with them in this project to increase public awareness of the problem and education about the solutions. We hope the surgery on these dogs/cats will help them find adoptive homes, and provide an educational experience for you. Many veterinary and pet product companies have donated generously to allow this demonstration to take place. Their names are listed on the front of the suite, and we want to thank them for their support and their concern for animal health.

Pet overpopulation is a serious problem. Despite all their efforts to find homes for unwanted animals, humane societies and veterinarians across the country euthanize thousands of animals each year. **If a single pair of healthy cats and their offspring are allowed to breed without restriction, more than 80,000 offspring can be produced in 10 years.** Spaying and neutering are the best ways to keep our pet population under control. The procedure, as it is done in modern veterinary clinics today, is safe, effective, and makes the animal a healthier and better-behaved pet for its owners. The surgery area you see here in the suite is similar to what you would find in a veterinary hospital and the procedure is the same.

Of course, a spay surgery is only one example of the wide variety of procedures that veterinarians perform daily. Veterinary medicine is an interesting and diverse profession, ranging from dairy herd-health specialists to orthopedic surgery, from wildlife and zoo medicine to biomedical research and industry. There are over 1,500 veterinarians in Minnesota, and even more veterinary technicians and assistants. Technicians are a valuable part of veterinary practice. Their responsibilities include animal care and nursing, client education, laboratory work and more. If you have questions about veterinary medicine feel free to ask me, or contact a veterinarian in your hometown. We are very proud of our profession and will be pleased to answer your questions.

Today's surgeon will be _____ . He/She will be assisted by veterinary technician Shelley Harpster and veterinary student _____ from the University of Minnesota College of Veterinary Medicine.

WHAT ARE SOME BENEFITS OF NEUTERING?

Decrease pet overpopulation.
Reduce reproductive tract infections
Minimize reproductive tract cancers
Minimize urine marking
Minimize roaming behavior

I want to emphasize again that it is possible that seeing the surgery may make you feel uncomfortable. If you feel warm, dizzy or faint, do not try to stand up and leave. Put your head down on your knees and ask your neighbor for help. With your head down, the feeling may pass, but if you try to stand, you may faint. We don't want anyone to fall or get hurt.

Pre-Surgery Prep:

This dog/cat has had:

1. a negative heartworm test if over 6 months of age (dogs only).
2. a negative feline leukemia test (cats only).
3. a fecal test for parasites or a dewormer.
4. distemper/hepatitis/parainfluenza/parvo combination vaccination if a dog, or a distemper/rhinotracheitis/calicivirus vaccination if a cat.
5. a physical exam this morning.
6. a test for normal blood clotting and a blood count which checks for anemia and infection.
7. blood chemistry screen for diseases like diabetes, liver or kidney disease.
8. a combination of medications to help prevent pain and to sedate the dog/cat given 15 minutes ago.

Induction:

The anesthetic induction and surgical preparation of dog/cat will be shown on a pre-recorded videotape. This is not the dog/cat you will see in surgery, but she is having the same procedures performed in the prep room while we watch the tape.

- IV catheter placed to administer medications into the vein.
- IV induction with Ketamine:Diazepam, a common and safe combination.
- Intubation for oxygen and Isoflurane delivery. Isoflurane is a safe inhalant anesthetic; it puts minimal stress on the body and allows the animal to wake up quickly after surgery.
- IV fluids administered. Fluids are often not used for young, healthy animals in routine procedures but we are taking precautions because of unknown health history on these dogs/cats.

- ID chip placed under the skin between the shoulderblades. The microchip is implanted with a needle, is relatively painless, and often performed with the animal awake.
- Placement of a Pulse Oximeter in the Prep room to aid in the monitoring the patient's vital signs before surgery.

Surgical Prep:

9. Surgical shave of abdominal or scrotal area; urinary bladder emptied.
10. Surgical scrub of whole area with Betadine and alcohol 3 times.
11. Transfer into surgery, placement on table and tied securely so she cannot slip.
12. Bair Hugger forced-air warming blanket placed around the pet to help maintain her body temperature as close to normal as possible.
13. Position camera, surgery lights and scrub one more time.
14. Place Surgivet leads.

This surgical site preparation is one of the important responsibilities of the technician, who will then continue to make sure that dog/cat is doing well under anesthesia throughout the procedure.

Surgeon's Prep:

15. Put on clean scrubs, cover hair with cap, wear mask.
16. Scrub hands with disinfectant soap and sterile brush for 5 minutes. This has been shown to reduce bacteria on the skin, just in case a glove is punctured or cut.
17. Dry with sterile towels.
18. Glove and gown. All surfaces that might touch the incision, drapes, hands, instruments, and suture are now sterile.

Surgery script (spay):

Ask the surgeon in advance about his/her procedure - multiple ligatures, ligation of vessels in the broad ligament or separate fixation of uterine vessels, type of closure.

1. Technician opens the pack, touching only the outside. All contents sterilized in an autoclave using pressurized steam.
2. Surgeon drapes to cover all of dog/cat except surgical site.
3. Incision through skin and subcutaneous tissue (mostly fat).
4. Incision through linea alba (means "white line"), which is the fibrous line where left and right abdominal muscles meet.

5. By cutting through the linea alba there is less bleeding and less pain for the dog/cat on recovery.
6. Uterus is shaped like a Y with 2 long horns, each leading to an ovary just behind the kidneys. Size of the uterus depends on age and reproductive history.
7. Ovary accessed, ovarian pedicle clamped and ligated. Cut. Pedicle observed for bleeding and then gently released back into place. Repeat other side.
8. Clamp off body of uterus above cervix, ligate (+/- fixate vessels), cut and remove uterus (discarded separately as biological waste in biohazard bag).
9. Closure in separate and distinct layers.

Surgery Script (closed castration):

- Surgeon verifies that there are 2 testicles in the scrotum.
- Applies pressure to scrotum to advance one testicle into pre-scrotal area.
- Incision through skin and subcutaneous tissues on midline.
- Discuss difference between "open" and "closed" castration.
- Discuss cryptorchidism.
- Exteriorizes testicle and tears fibrous attachment between spermatic cord tunic and scrotum.
- Places ligatures around entire spermatic cord.
- Excises testicle.
- Repeats on other side.
- Closure in distinct layers, depending upon surgeon.

Suggestions of subjects to discuss during the spay procedure:

How do can we close the skin?

Three common techniques are used to close the skin:

Sutures
Surgical Glue
Staples

During surgery try to name and explain the instruments as they are used. Discuss the advantages of spay or castration to this dog/cat (no heats or unwanted pregnancies, reduced

incidence of breast cancer, no ovarian cancer or pyometra, surgery has less morbidity and mortality than pregnancy).

The benefits of neutering male dogs are: prevents enlargement and inflammation of the prostate gland, eliminates any chance of testicular cancer, prevents the desire to roam due to females in heat and therefore prevents unwanted litters, decreases the incidence of aggression between male dogs, and decreases the urge to urine mark. Please explain terminology that the public might not understand.

Discuss role of technician in monitoring anesthesia (checks heart, reflexes, CRT, etc.) and the advantage of adjusting the concentration of the inhalant anesthesia to keep dog/cat at the appropriate depth.

Don't use the word "abortion" regarding any pregnant animals. The public may get very uncomfortable.

Post-Op:

19. Drapes removed and site cleaned.
20. Dog/cat moved back to prep area for monitoring, using Pulse Oximeter as an aid, and placed on another Bair Hugger warming blanket there.
21. Endotracheal tube will be removed when dog/cat can swallow.
22. Watched carefully as she recovers.
23. Technician will continue to monitor vital signs, such as heart rate and mucous membrane color.
24. Patient may wake up disoriented or nauseous, just like a human. Patient will be kept quiet and monitored the rest of the day. Most dogs/cats are sitting up and aware of their surroundings in a few hours. The dogs and cats will receive oral pain medication for 2-3 days.
25. Any skin stitches or staples will be removed in 2 weeks by the new owner's vet.

This concludes the demonstration. Thank you for your attention. We hope this surgical demonstration was interesting and that it emphasized the importance of safe, healthy solutions to the problem of pet overpopulation. If you have questions I will be happy to try to answer them. The Minnesota Veterinary Medical Association is here to help with your animal's needs and your concerns.

MODERATOR: If you cannot participate at the last minute for any reason—Please find your replacement and notify the MVMA office immediately. AND most of all have fun. If you are having a good time, so will the audience. We really appreciate your help.