



To all,

This was the anesthetic protocol we used, it is very low dose, and we were able to get our radiographs with only the sedation. We placed Gari on Sevoflurane for the neuter but were able to maintain him on 1 to 1.5 % Sevoflurane thru out.

Treatment: Gari was sedated with a combination of 2mL of midazolam (5mg/ml), 0.6mL of dexdormitor (0.5mg/ml) using a pole syringe in his right hip area while he was confined to his crate. 0.5mL of ketamine (100mg/ml) was given subq after he was sedated. He was maintained on room air for the aspirate and radiographs. An additional 0.5mL ketamine was given after being in Radiology for approximately 30 minutes. After the mass was confirmed to be a lipoma by Dr. Barton, the owners decided to not remove the mass and to have Gari neutered while we was already under anesthesia.

Anesthetic protocol:

Ketamine 2.6 mg/kg

Midazolam 0.27 mg/kg

Dexdormitor 0.009mg/kg

Buprenorphine 0.01mg/kg immediately post operatively (which may need to be increased for better pain management)

His anesthesia for the neuter was maintained with sevoflurane. An open castration was done bilaterally with 2-0 Vicryl suture to ligate the vessels and close the tunic and subq, the skin was closed with subcuticular using 3.0 Vicryl suture. His Dexdormitor was reversed with 1mL Antisedan after the procedure. He was given a injection of 91mg of Baytril (4mL diluted to 8mL with Norm-R) and 1.2mL of Buprenorphine (0.3mg/ml) post operatively for pain subq in the left shoulder area. He woke up slowly but recovery was uneventful. He did seem very painful post surgically.

Dr Hoppes

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