

USDA SPECIES ASEPTIC SURGICAL TECHNIQUE IN-PERSON TRAINING
UNIVERSITY OF SOUTH FLORIDA
COMPARATIVE MEDICINE

Attendee Name: _____
Print Sign Date

Species trained: _____

Discuss:

- ___ AALAS LL module, CM SOP 027, Guide, AWA, IACUC Principles XII, XIII, XV, & XIX
- ___ **Aseptic** technique (i.e., "free of pathogenic microorganisms")
- ___ **Minor surgery** does not expose a body cavity; causes little or no physical impairment vs **Major surgery** exposure of the cranial, abdominal, or thoracic cavities; procedures that cause physical or physiological impairment or extensive tissue dissection or transection
- ___ Appropriate recordkeeping CMDC 010, documenting preemptive, post-operative analgesics
- ___ Definition of the **sterile surgical work area** as delineated by sterile drapes, the inside of an opened sterile pack, front of a surgeon's sterile gown (not above shoulders or below hips), and **sterile field** at the operative site
- ___ Identification & delineation of **pre-op preparatory** area, **surgical station**, and **recovery/post-op** area
- ___ **Preparation of the patient's** skin ((center out, paint with disinfectant scrub, e.g., Avagard, on entire debried/shaved area))
- ___ Preparation of the **surgeon**: put on cap, face mask, shoe-covers, then scrub hands ~5-6 minutes, then step into gown and once tied in, put on sterile gloves
- ___ Preparation of the **surgical work area** prior to patient arrival (e.g., back table prep, pack opening, supplies)
- ___ **Sterile draping** of the patient by the sterile gloved-in surgeon
- ___ **Sterilization of instruments**, autoclave)
- ___ Sterilization of **equipment** (e.g., microscopes, drills, stereotactic), draping and or cold sterilization
- ___ Appropriate cold sterilization solutions (e.g., chlorhexidine) for devices, catheters
- ___ Appropriate pre-procedural physical examination of patient, **body weight** taken within 24-48 hours of procedure

Demonstrate:

- ___ Hand scrub for the surgeon, donning gown and gloves (both **open and closed techniques**)
- ___ Opening of pack and laying out of instruments and supplies within the surgical work area (while sterilely gloved)
- ___ Demonstrate the "**box**" for hand/arm movement, "**praying stance**" for a gowned/gloved surgeon
- ___ Proper **draping of equipment** as needed (e.g., use of roll stockinet, gauze)
- ___ Preparation of the sterile field at the surgical incision site, "**the scrub**", while not sterile, and final paint & placement of drapes while gloved in
- ___ Preparation of patient **monitoring** equipment prior to draping of animal, also discuss tissue color & respiratory movement, interdigital pinch as monitoring parameters
- ___ Positioning of the patient within the surgical field, **supplemental heat and hydration**
- ___ Sterile **draping of the patient** (types: "sticky" bio-occlusive, paper, stockinet, gauze, cloth)
- ___ Actual surgical manipulations and techniques, including those related to maintaining asepsis
- ___ Actual closure, stress importance of **proper tissue alignment**, number of sutures/clips, and proper pressure applied by tying/clamping to avoid dehiscence of tissues
- ___ Removal of drapes post-operatively and relocation of patient to recovery provided with **supplemental heat, fluid and oxygen therapy** as needed
- ___ Surgeon is non-sterile as soon as drape is removed

Other Considerations:

- ___ Prolonged surgical times may expose tissues to contaminants, cause them to dry, or compromise blood flow. Tissues damaged by crushing/drying, suture/clips, or other surgical implants serve as a nidus for infection.
- ___ **Pre-emptive analgesic administration** (e.g., q12hrs for first 24hrs post operatively, or PRN until 48hrs post op)
- ___ CMDC **recordkeeping** of analgesic administration (i.e., CMDC 010 surgical record & progress notes CMDC 013)
- ___ Suture/wound clip removal in 7-10 days
- ___ USDA specific techniques and regulations for users of these species

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