

**TITLE: Pre-Surgery Conference**

**PURPOSE:** To require a pre-surgical conference between the researcher and UAC/BSS to review the items noted above.

**REVIEW/REVISION:** Permanent amendment/revisions to this SSP must be presented to the IACUC for review before implementation and should be developed by UAC, the Surgical Attending Veterinarian and PI together.

**EFFECTIVE DATE:** 1/27/05; **Revised/Re-Approved:** 2/24/05, 5/26/05, 8/25/05, 11/2/06, November 1, 2007

**POLICY:**

\* The Principal Investigator, Surgical Attending Veterinarian and BSS Lead Surgery Technician are required to meet between 72hrs and no later than 48hrs prior to a scheduled NHP surgical event to determine division of duties, review surgical plan, and review emergency procedures.

\* **Failure to comply with this policy will result in the cancellation of the scheduled surgery**

**PROVISO:**

\* The 48 hour requirement may be waived by the Attending Veterinarian in the event of emergency.

**DOCUMENTATION OF PROCEDURE:**

\* The NHP Pre-Surgery Conference Check List (attached) is to be completed at the time of the conference.

\* The NHP Emergency Crash Cart Check List (attached) is to be completed at the time of the conference

\* The Checklist for NHP Individual Emergency Drug Dose Calculations (attached) is to be completed at the time of the conference.

**JUSTIFICATION:**

The Institutional Animal Care and Use Committee (IACUC) determined that comprehensive individual Non-Human Primate Standard Surgical Practices (NHP-SSP) should be written for: Surgical Prep - This includes not only the actual pre-operative preparation of the animal, but also required prep for participants; Anesthesia Induction - Standard induction procedures should be described; Post-Operative Recovery - this should specify criteria for extubation as well as post-operative monitoring, placement of the animal, and provision for emergency care.

Authority line - During pre-op procedures and immediate post-operatively, until animal is able to sit upright, the Surgical Attending Veterinarian will be present and have decision making authority. The Surgical Attending Veterinarian may not be physically present in the room during surgery, but is on call. During surgery, the Surgeon is responsible for procedures going on in the surgical theater. Specific allocation of duties for each NHP-SSP will be determined at the pre-surgery conference and will be designated to the Surgical Attending Veterinarian, PI, BSS Clinical Staff, or Research staff.

**NHP Pre-Surgery Conference Check List**  
 University Animal Care  
 The University of Arizona

Date/Time of Conference: \_\_\_\_\_ Surgery Scheduled:

**Surgical Procedure:**

**Attendees (Print Names Clearly):**

PI:

Surgical Attending Veterinarian:

BSS Lead Surgery Technician:

Other Participants:

**Division of Responsibilities:** For each surgery, an individual must take ultimate responsibility for the success of the procedures. Others may participate in or actually perform the procedure, but someone must take the decision making authority, in case an adverse event arises. During pre-op procedures and immediate post-operative, until animal is able to right (sit up), the Surgical Attending Veterinarian for the surgery will be present and responsible. The Surgical Attending Veterinarian may not be physically present in the room during surgery, but is on call. During surgery, the Surgeon is responsible for procedures going on in the surgical theater.

**Division of Duties:** (persons actually performing the following procedures)

Procedure	Person(s) performing
NPO: How Long? Food: _____ Water:	
Delivery of Specialized Equipment for Surgery	
Preparing NHP for Aseptic Surgical Procedure	
Intubation	
Anesthesia/Monitoring during surgery	
Surgical Procedure	
Extubation	
Post-op recovery	
Post-op treatment/care: How Long?	
Other:	

**Check list:**

Review of Surgical Procedure Request Form:                      Initials:  
 Review Surgical Procedure:    Initials:  
 Review NHP Surgical Standard Practices and agreed to:        Initials:

Potential Problems ID'd	Solution	Person(s) Responsible

Emergency drug list reviewed: \_\_\_\_\_ Updated? \_\_\_\_\_ Initial  
 Drug list posted on Crash Cart: \_\_\_\_\_ Initial:  
 Crash cart check: \_\_\_\_\_ Initial:  
 Questions/clarifications:

Attendees:

\_\_\_\_\_  
 Signature \_\_\_\_\_ Name

\_\_\_\_\_  
 Signature \_\_\_\_\_ Name

\_\_\_\_\_  
 Signature \_\_\_\_\_ Name

\_\_\_\_\_  
 Signature \_\_\_\_\_ Name

\_\_\_\_\_  
 Signature \_\_\_\_\_ Name



**NHP's - Emergency Crash Cart Checklist**  
 NHP ID # \_\_\_\_\_ Surgery Date \_\_\_\_\_

**PERSON RESPONSIBLE:** \_\_\_\_\_ **INITIALS:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

Top Drawer		Second Drawer	
ITEM	AMOUNT	ITEM	AMOUNT
Laryngoscope	1	18g x 1 ½" needles	1 box
3.0 Endotracheal tubes	3	21 g x 1 ½" needles	1 box
3.5 Endotracheal tubes	3	23 g x ¾" needles	1 box
4.0 Endotracheal tubes	3	35cc syringe	1
4.5 Endotracheal tubes	3	20cc syringe	2
5.0 Endotracheal tubes	3	12cc syringe	10
6.0 Endotracheal tubes	2	6cc syringe	10
7.0 Endotracheal tubes	2	3cc syringe	10
7.5 Endotracheal tubes	2	1cc syringe	10
Orange ties	9	Infusion Plugs	4
Eye Ointment	2	Stethoscope	1
Nail Clippers	1	Black marker	1
Silver Nitrate Sticks	5	Clippers	1
Calculator	1	4" x 4" gauze sponges	1 bag
Towel forceps	1	Thermometer	1
		Thermometer covers	1 box
		Heparin	1 bottle
Third Drawer		Fourth Drawer	
ITEM	AMOUNT	ITEM	AMOUNT
22g x 1" IV Catheters	15	Paper towels	1 pack
1" Tape	3 rolls	4" x 4" Gauze sponges	1 pack
½" Tape	7 rolls	Cotton-tipped applicators	1 pack
1 Liter Rebreathing Bag	1	Resuscitation bag	1
Anesthesia face mask	1	Large red biohazard bags	4
ECG gel (MRI & Surgery)	2	Small red biohazard bags	4
Scissors	1	Suction Canister	1
IV sets	4	Orange Ear loop Face Masks w/ Eye Shield	7
ECG Electrodes (surgery)	1 pack	Chucks	6
ECG electrodes (MRI)	4 packs	Isoflurane	1 bottle
2" Vet wrap	2 rolls	Heating pad	1
4" Roll gauze	2 rolls	Extension Cord (10')	1
2" Roll gauze	2 rolls	White towels	2
Bulb, 60cc syringe, feeding tubes (kit)	1		



**NHP's Individual Emergency Drug Dose Calculations**

Date \_\_\_\_\_ Investigator \_\_\_\_\_

ID # \_\_\_\_\_ WT/kg \_\_\_\_\_

Drug	Dosage/Administration Route	NHP Specific Dosage
Acetylpromazine maleate (Acepromazine maleate)	0.5-1.0 mg/kg BW, IM or IC	
Epinephrine:	1 ml diluted to 10 ml and then give 0.75 ml IV or IC with compressions for CPR	
Doxapram HCL (Dopram -V)	2 mg/kg BW IV	
Lidocaine HCL (w/o epi)	0/75 ml IV initial dose for cardiac arrhythmias	
Buprenorphine	0.01-.02 mg/kg BW IM, IV, q12hr	
Atropine	0.05 mg/kg BW IM, IV	
Diazepam	1 mg/kg BW IM, IV	
Propofol	7.5-12.5 mg/kg BW IV 10 mg/ml	
Mannitol	0.25-0.5 gm/kg BW IV over a 20 minute period	
KEY: BW = Body Weight IM = Intramuscular SC = Subcutaneous IV = Intravenous IC = Intracardiac		