

TSVS TPLO Cruciate Repair Requirements and Protocol

Preoperative Requirements:

1. Diagnosis: Cranial Cruciate Ligament Disease or Ruptured CCL
2. Preoperative blood work: CBC and Chemistry panel
3. Radiographic assessment of Tibial plateau angle (slope) – see Additional document for TPLO radiographic guidance technique
 - a This will require a FLEXED LATERAL radiograph of the affected stifle joint and the entire tibia included in the film with no other overlying structures or limbs in the film. The limb should be flexed approximately 90 degrees with the femoral condyles overlapping each other. INCLUDE the STIFLE and TARSAL joints in the film.
 - b SEDATION is generally required to acquire acceptable films.
 - c Physical markers are required in all radiograph submissions sent to TSVS
 - i If a physical marker is not present, radiographs will need to be repeated and submitted to TSVS 48 hours prior to surgery.
 - ii If you need assistance acquiring physical markers, please reach out to TSVS.

Intraoperative Requirements:

1. Premedication: Your choice (given 20-30 minutes prior to induction)
 - a TSVS *highly* recommends Hydromorphone or Morphine as part of your preoperative protocol.
 - b This will assist the patient and the referring clinic to ensure a smooth anesthetic experience and avoid higher levels of gas anesthetic to keep the patient properly anesthetized.
2. IV Catheter Placement:
 - a Fluid administration during surgery: 10ml/Kg/hour
3. Preoperative Antibiotics:
 - a Cefazolin: Mix to 100 mg / ml
 - b Dose: 22mg/Kg IV at induction
 - c Repeat Cefazolin: Every 90 minutes during anesthesia or until oral antibiotic medication can be started.
4. Induction and intubation: Your choice
 - a Example: Propofol 3 mg / Kg / IV but only to effect
5. Pre-emptive pain control: Your Choice (see recommendations above)
6. Clipping Hair for surgery (very liberal clipping):
 - a Hind leg: From just below the tibio-tarsal joint proximally to midline on inside and outside of the affected limb
7. Clean and vacuum all clipped hair from the prep area and the patient
8. Transport to Operating Room

TEXAS SPECIALTY VETERINARY SERVICES

- a Dorsal recumbency, cross front legs with catheterized forelimb down
- 9. Hanging leg prep:
 - a Non-sterile Vet Wrap & IV Stand
 - b Surgical Scrub
 - i TSVS will provide our own surgical prep supplies
 - c TSVS staff will perform sterile prep of the limb(s)
- 10. Hanging leg prep for draping the limb in sterile fashion
 - a The distal limb from point of the tarsus distally is wrapped with vet wrap and tied/hung with the patient in dorsal recumbency to allow the stifle joint and tibia to be prepped in sterile fashion

Surgical Supplies provided by your hospital:

- General pack or Spay pack (Sterilized within the last 7 days)
- Size 0 PDS and 3-0 Monocryl suture
- # 11 surgical blade for meniscus
- Sterile saline for surgical flush
- Mayo stand
- Clean Towels (3-4)
- Large Instrument table, otherwise, we provide

Provided by TSVS:

- Surgical cap and mask
- Sterile surgical drapes
- Orthopedic Pack (plating instruments, screws, plates, etc.)
- Sterile vet wrap
- Power drill (sterile)
- Power Saw (sterile) with variable speed floor adapter requires electrical outlet with possible extension
- IM Pin Cutter (sterile)
- Other equipment necessary to perform Surgical procedure

Postoperative requirements:

1. 2 immediate postoperative radiographs (Lateral and Posterior anterior views)
2. E collar is MANDATORY immediately after surgery
3. Post operative medications:

Example:

Antibiotic: Cephalexin 30/kg. by mouth every 12 hours x 7 days

Pain: Carprofen 1mg / lb. q. 12 hr. or 2mg / lb. q. 24 hr. by mouth x 14-21 days

Gabapentin 10mg/kg by mouth q. 6-8 hours x 10 days

- ❖ Please take the above information and items into consideration when calculating estimates to your clients.
- ❖ A TPLO procedure from prep, cut, close to post op rads takes about 1.5-2 hours of anesthesia time (depending on preoperative prep time at your clinic).

If you have questions, please feel free to call or email regarding perioperative requirements for the TPLO Cruciate repair procedure.

