

**TNR#:**

TO BE FILLED IN BY COLONY CARETAKER

<b>Date:</b>	<b>Name of Cat</b> (if applicable)	
<b>Hair Length:</b> DSH[ ] DMH[ ] DLH[ ]	<b>Colour(s):</b>	<b>Markings:</b> (i.e. calico/tabby)
<b>Colony Caretaker:</b>		
<b>Colony Location:</b>	Address and/or nearest intersection	
	City	

TO BE FILLED IN BY TSC VOLUNTEERS ONLY

<b>Approx. Weight (in trap):</b>	<b>kg</b>	<b>Sex:</b> Male / Female
<b>Actual Weight of cat:</b>	<b>kg</b>	

<b>Checklist:</b>	[ ] <b>FVRCP (SQLH)</b>
[ ] <b>Eye Lubrication</b>	[ ] <b>Rabies (SQRH)</b> (if >12 weeks):
[ ] <b>Microchip Scan:</b> Chip [ ] No Chip [ ]	[ ] <b>LEFT EAR TIP</b>
[ ] <b>Revolution</b> _____ (dose: 0.05cc/kg -120mg/ml)	[ ] <b>Microchip Inserted</b>

PLACE FVRCP / RABIES LABELS HERE	PLACE MICROCHIP STICKER HERE
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**Additional Medical Information (for caretaker):**

TYPE	DRUG	Given by (Initials):	AMOUNT	TIME
<b>Premed /Induction</b>	DKH (Domitor 0.5 mg/ml, Ketamine 100 mg/ml, Hydro 2 mg/ml) IM		ml	
<b>Post-op Analgesia</b>	Metacam		ml	
<b>Other (where applicable)</b>	Convenia / Antisedan / Other: _____		ml	
	Subcutaneous fluids		ml	

The above patient was sterilized by Toronto Street Cats on this date by:

\_\_\_\_\_ DVM (please print name)

\_\_\_\_\_ DVM Signature

TNR#:

Medical/Surgical Record

Pre-Op Exam performed by: \_\_\_\_\_

BCS: \_\_\_\_\_ (1-9) Est Age: \_\_\_\_\_ Heart Rate: \_\_\_\_\_ Resp Rate: \_\_\_\_\_

General Appear [ ] N [ ] ABN	Oral Cavity [ ] N [ ] ABN	Teeth [ ] N [ ] ABN	Eyes [ ] N [ ] ABN	Ears [ ] N [ ] ABN
Cardiac [ ] N [ ] ABN	Respiratory [ ] N [ ] ABN	Abdomen [ ] N [ ] ABN	Musculoskeletal [ ] N [ ] ABN	Neurological [ ] N [ ] NE
Lymph Nodes [ ] N [ ] ABN	Urogenital [ ] N [ ] ABN	Integument [ ] N [ ] ABN	Hydration [ ] N [ ] ABN	Oral MM [ ] N [ ] ABN

Assessment/Plans: \_\_\_\_\_  
 \_\_\_\_\_

<b>Inhalent maintenance</b>	[ ] ET Tube [x] Mask [ ] None	Time initiated:
Sx monitor:		
TIME		
HR / RR		

PRE-OP cond: \_\_\_\_\_ POST-OP cond: \_\_\_\_\_  
 Sx start time: \_\_\_\_\_ Sx end time: \_\_\_\_\_

<b>SPAY APPROACH</b>	Midline [ ] flank [ ] other [ ]	<b>Suture:</b> PDS / Mono / Maxon
Ovarian Ligatures	2-0 3-0 4-0	Autoligation [ ]
Uterine Body Ligatures	2-0 3-0 4-0	
Body Wall Closure	2-0 3-0 4-0	Cont [ ] Interrupted [ ]
Subcutaneous Closure	2-0 3-0 4-0	Cont [ ] Interrupted [ ]
Skin Closure (intradermal)	2-0 3-0 4-0	Adhesive [ ] None [ ]
Repro Status	Normal [ ] In heat [ ] Pregnant [ ] early / mid / late term	Lactating [ ] # kittens _____
<b>NEUTER APPROACH</b>	Routine (scrotal) [ ] Cryptorchid(Abdominal) [ ] Cryptorchid(Inguinal) [ ]	
Cord Ligation	Open Closed Autoligation other:	

Comments / Additional Procedures: \_\_\_\_\_  
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