SOP No: ATT 049

SUBJECT: Intravenous Catheterisation (Jugular vein) in Horses

POLICY: This procedure may only be performed by operators who have been educated in the correct techniques, and under the supervision of their skilled Demonstrator. Leather boots and clean overalls must be worn.

PRECAUTIONS: The horse will be placed in a crush and will be suitably restrained by a skilled handler. A nose twitch will be used if additional restraint is required. The person performing the procedure must wear surgical gloves.

EQUIPMENT: Halter & lead
Twitch
Crush
Animal Clippers
Lignocaine 2%
21 – 25 Gauge Needles
2.5 ml syringes
10 ml syringe
Alcohol & Hibiclen Swabs
14 Gauge 3.25 inch Intravenous Catheter (Angiocath)
Sterile Saline
Catheter Injection Port
Superglue

PROCEDURE:
1. Hair over the jugular vein at the margin of the upper and middle third of the neck is clipped. The clipped area is surgically prepared with appropriate skin disinfection.
2. 0.5-1.0 ml of Lignocaine (2%) is injected subcutaneously over the centre of the jugular vein.
3. The catheter is flushed with sterile saline and then inserted down the vein initially at a 30-degree angle to the horizontal of the skin, through the bleb of local anaesthetic. When blood is visible in the catheter stylet, the catheter and stylet are straightened so they are horizontal to the skin over the vein and are both advanced 2-3mm further to ensure the catheter is in the vein. The catheter is then advanced fully into the vein, while the stylet is not moved any further.
4. When the catheter is fully inserted, the stylet is removed and the vein is occluded to ensure blood flashes back through the catheter. The catheter is flushed with saline and an injection port is attached to the catheter. For more prolonged procedures such as anaesthesia an extension set is attached to the catheter. The catheter is sutured or glued in place with the extension set fixed to the mane of the horse.
5. At the completion of the procedure, the catheter is removed and gentle pressure is applied over the catheterization site until bleeding stops.

RECOMMENDATIONS:

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REFERENCES: