Panel Discussion: Spay-Neuter Clinic Models

Friday, August 15, 2014
North American Spay Neuter Conference
Outline

2:30-2:55pm

– Introduction to model
– Pros and Cons
  • Shelter – Katie Broaddus, Austin Humane Society
  • MASH – Sara White, Spay ASAP, Inc.
  • Stationary & Mobile – Carolyn Brown, ASPCA
  • Stationary & Mobile – Laura Helmueller, Emancipet
  • University – Phil Bushby, Mississippi State Univ.

2:55-3:20

– Question & Answer
Shelter Spay/Neuter Clinic

Katie Broaddus, DVM
Chief Veterinarian
How our program works

• Schedule

  – Shelter animal surgeries – Mon, Fri
    • Prioritization protocol
    • 3 technicians, 1 DVM
  – Texas A&M General Surgery rotation – Tues
  – Feral Cat Spay/Neuter – Wed, Thurs
    • Goal 60 cats/day – 5 technicians, 1 DVM
    • Assembly line model
  – Community Cats – Mon, Wed-Fri
Facility

• Nonprofit animal shelter
• Large surgery suite (TAMU partnership)
Advantages of shelter model

• Existing facility with designated surgery area
• Single location for public
• Existing shelter staff and DVM(s)
  – Shared resource
• Costs supported/subsidized by donors
• Efficiency maximized
Challenges

• Facility may not be outfitted appropriately
• Staff training/expertise
• Legal/financial ramifications of public surgery
• Relationships with area veterinarians
• Balance – mission creep
• Big resource requirements
M.A.S.H.  
(Mobile Animal Sterilization Hospital)  
Spay and Neuter Clinics  

Dr. Sara White  
Spay ASAP Inc.  
Hartland, Vermont  

swhitevt@mac.com
Transport surgical equipment to site in a vehicle

My clinic— the “Spaymobile”
How Spay ASAP’s MASH clinics work

- We work with several shelters or humane groups throughout our service area to host clinic days (about 10 groups currently, previously up to 14 groups)
- Host shelter locates a suitable space for a clinic, which may be on their property/in their building, or may be a space in the community such as a church basement, community center, or fire station.
- Spay ASAP brings veterinarian, technician, and surgical equipment.
- Host shelter schedules patients. These may be shelter animals, or low income animals from the community, or ferals, or other animals the host organization chooses.
- Host prints paperwork, including surgical record, liability release form, neuter certificate, and discharge instructions.
- Host organization provides 2-5 volunteers or staff for the day. These people admit patients, assist the vet tech, fill out paperwork, and discharge patients.
Set up clinic in an existing space in the target community

- Fire station
- School
- Gym
- Shelter
- Surgery suite in shelter
- Conference room
Before you start a MASH clinic

• Check your practice act and state and local regulations to be sure that MASH is legal in your area

• Some states require premise permits for any practice location, which may preclude MASH clinics
M.A.S.H. Spay and Neuter Clinics: Equipment

- Equipment choices are one of the biggest differences between MASH and other models
  - preop, anesthesia, surgery, and postop care is similar to other models
- We use a bin system for packing most items
M.A.S.H. Spay and Neuter Clinics: Cart

- Folding cart helps move bins from the vehicle to the surgery building.
- Speeds up loading and unloading, and decreases lifting and carrying.
M.A.S.H. Spay and Neuter Clinics: Anesthesia Equipment

- Tabletop anesthesia machine
- Tech 4 vaporizer
- E-cylinder oxygen
M.A.S.H. Spay and Neuter Clinics: Anesthesia Equipment

Anesthetic gas scavenging or exhaust options:
Out the window, via a hole in the wall, with an active scavenger if available, or F/AIR charcoal canisters
M.A.S.H. Spay and Neuter Clinics: Equipment

Surgery table:
- Countertop with aluminum legs (lawn chair, walker) that can be placed on a standard height table
- I use a surgery pack bin for an instrument stand
- Fixed height, comfortable for me
Another option for tables:

- Adjustable height folding tables for surgery and prep
- MASH Clinic at a performing arts center in the Navajo Nation in Shiprock, New Mexico.

Photo Courtesy of Cristie Kamiya.
M.A.S.H. Spay and Neuter Clinics: Equipment

Surgery light:
• Architect’s lamp
• Compact Fluorescent bulb
Another option for lighting:

- Headlamp as surgery light
- MASH Clinic at a performing arts center in the Navajo Nation in Shiprock, New Mexico. Photo Courtesy of Cristie Kamiya.
Clinic Flow

Prep Station

Surgery station

Cat Neuter Station
M.A.S.H. Spay and Neuter Clinic: A typical day

• 7:30 am: Vet and tech meet up to travel together
• 7:30-9 am: Drive to clinic location, up to 1.5 hours away
• 9-9:30 am: Unpack and set up surgery area
• 9:30-10:30 am: Physical exams
• 10:45 am: First animal goes to surgery
• 12:45 pm: Lunch break
• 1:30-3:30 or 4:30: Surgery
• 4-4:45 pm: Clean up and pack vehicle
• 5-6:30 pm: Drive Home
M.A.S.H. Spay and Neuter Clinic: A typical day

- Total day length for the vet and tech is 11 hours
- Surgery time 4-5 hours
- Driving time 3 hours (you could restrict to 1 hour radius...)
- Setup and take-down at least 1 ¼ hours
- Thus, a “full time” week may be just 3 days, or about 100 surgeries

So, it’s not the most efficient way to use a vet’s and tech’s time

- This is the trade-off for the cost savings of using “borrowed” venues
M.A.S.H. Spay and Neuter Clinic: Advantages

• MASH startup time can be fast—no facility lease and remodel, no large capital expense.
  – Can be good for a vet who “has skills, will travel, need a job now!”
• MASH can bring the clinic to the region where it is needed.
• Relatively low startup cost, since there is no cost for facility. However, all equipment must be purchased.
• Relatively low ongoing cost, since collaborative MASH clinic pays one vet and one tech, and uses volunteers for all other staffing. Also, no ongoing facilities expenses.
• MASH clinics can use small, efficient (cheap!) vehicle to transport surgical equipment.
Here, volunteers comb and pet cats during the postop period to stimulate them, and observe them for signs of recovery from anesthesia.

Advantage: community involvement and sense of accomplishment: The local hosts “own” the clinic and take pride and responsibility.
M.A.S.H. Spay and Neuter Clinic: Disadvantages and Inefficiencies

- Packing and unpacking equipment each day takes time and effort, and may limit the number of days per week that staff can work this clinic type without fatigue.
- Travel time, packing, and unpacking make this model less efficient (fewer surgeries per hour of veterinarian or technician time) than a stationary clinic.
- Clinic flow is slowed because usually only one prep table and one surgery table per surgeon.
- As stated above, MASH clinics are not allowed where premise permits are required.
- Postoperative complications usually need to be seen by a different vet, local to the clinic location. (Clients should have contact info for the MASH vet or tech in case of emergencies, for triage, advice, referral)
M.A.S.H. Spay and Neuter Clinic: Best Uses...?

• Rural area with active small local shelters and rescues who can host the clinics
• Any group that is considering a more expensive model and wants to start their spay-neuter clinic before they have the time/ money for a stationary or self-contained mobile clinic
  – You can use the equipment purchased for the MASH clinic in your brick-and-mortar clinic later
• Remote areas (reservations, international trips)
Stationary & Mobile Spay-Neuter Clinics

Carolyn R. Brown, DVM
Director of Surgery
Spay/Neuter Operations
ASPCA
SNO Clinic Models in NYC

SSNC

MSNC
Services We Offer:

• Provide fully and partially subsidized:
  – Spay/Neuter Surgery
  – Tattoo
  – E Collar
  – Vaccines
  – Microchip
  – Revolution/Frontline/Pet Armor

• Additional services offered only at time of spay/neuter surgery
ASPCA Spay/Neuter Clinics in NYC

Headquarters—92nd Street

Glendale, Queens
Stationary Spay/Neuter Clinics

• Patients accepted primarily by appointment
• Clients served:
  – ASPCA Internal Clients
    • ASPCA Adoption Center
    • Anti-Cruelty Group
    • Cruelty Intervention Advocacy
  – NYC Rescue Community
    • Animal Care and Control (AC&C)
    • Shelters
    • Rescue Groups
    • Certified TNR Rescuers
    • Foster Care Networks
Stationary Spay/Neuter Clinics

Goal: Provide up to 80 surgeries / day at each clinic

• Each clinic staffed with:
  – 2 Veterinarians
  – 3 Licensed Veterinary Technicians
  – 5 Senior Veterinary Assistants

• Each surgical team consisting of:
  – 1 Veterinarian
  – 1 Licensed Veterinary Technician
  – 2 Senior Veterinary Assistants

• Evening/overnight care provided by:
  – 1 Licensed Veterinary Technician
  – 1 Senior Veterinary Assistant
Transport Services

• Same Day Transport

• Two day Transport
  • Animals recover in our Clinic overnight
Mobile Spay/Neuter Clinic
Mobile Spay/Neuter Clinic

• 6 Mobile Clinics
• Serve privately owned pet dogs and cats
• Patients accepted each day primarily on a first come first served basis
• Provide up to 25 surgeries / day on each unit
• Each Unit Staffed with
  – Veterinarian
  – Licensed Veterinary Technician
  – Senior Veterinary Assistant
Making a Bigger Impact
ASPCA CARES Outreach

- Community
- Advocacy
- Resources
- Enrichment
- Services

Face to face, one on one positive interactions with the community to build trusting and positive relationships.

- Free Vaccine Clinics
- Food and other Supplies
- Veterinary Care
Stationary & Mobile Spay-Neuter Clinics

Laura Helmueller, DVM
Chief Medical Officer
Emancipet
New Community “Start Up” Model

- Decreases capital investment during risky start up phase
- Semi-mobile clinic parks in a new community for market development during start up phase
- Once enough business is established, the clinic transitions into a leased space and the gooseneck can move on to another test community
- Gooseneck clinic can accommodate 36 s/n, up to 50 preventive care visits per day
Emancipet’s Stationary Clinic Model

• Where: South Austin, Pflugerville, Killeen
• Pricing: Low-cost, set pricing, no income qualification
• Services: Spay/Neuter by appointment, Preventive Care walk-in basis
• Client Mix: 90% owned animals, 10% shelter/rescue/feral
• Outreach: Daily programs bring in animals whose owners are not seeking spay/neuter, methods include door to door outreach, special events, partnerships with human service agencies like Meals on Wheels
Emancipet’s Free Mobile Model

• Where: Four “free days” per week in Austin
• Pricing: Free to clients, subsidized by City/County contract & fundraising, no income qualification
• Services: Spay/Neuter & Preventive Care all first come, first served
• Client Mix: 100% owned animals
• Outreach: Only located in low-income, high-intake neighborhoods
Emancipet’s Low-Cost Mobile Model

• Where: Serves rural areas or other areas with little to no access to affordable vet care
• Pricing: Low-cost, set prices, no income qualification
• Services: Spay/Neuter by appointment with preventive care available only to s/n clients
• Client Mix: 100% owned animals
• Outreach: Traditional marketing and word of mouth, partnerships with communities served
University Spay Neuter Programs

Philip A. Bushby, DVM, MS, DACVS
Marcia Lane Endowed Professor of Humane Ethics and Animal Welfare
Mississippi State University
College of Veterinary Medicine
bushby@cvm.msstate.edu
Recent History in Surgical Instruction

- University Teaching Hospitals have become tertiary care centers
  - With a resultant decrease in routine caseloads
  - With a resultant decrease in spay / neuter surgery
  - Decreasing hands on spay / neuter experience

- Typically veterinary students have graduated having performed as few as 1 to 5 spay / neuter surgeries

- Typically veterinary students have graduated having never performed pediatric surgery
Recent History in Surgical Instruction

- University surgery labs have moved more and more towards spay / neuter, BUT...
  - Surgical instructors recognize that students just starting their surgery labs have had little or no prior surgical experience
  - So, they teach spay / neuter techniques designed to compensate for lack of knowledge / skill
    - Long incisions with extensive abdominal exposure
    - Double ligating everything
    - Simple interrupted abdominal closures
  - In many programs, no one ever comes back to the students once they gain experience to teach more efficient techniques
  - In many programs, the students never reach a point where they have enough experience to use more efficient techniques
To Increase Student Experience

• A few universities developed cooperative programs with animal shelters

• In 2010 PETSMART Charities created a grant category to fund innovative university programs

• The PETSMART Charities program has assisted many more colleges to develop shelter programs involving spay / neuter
PETSMART Charities Program

• Grants ranging from $20,000 to $250,000 for start-up and operational costs

• Considers it win-win-win-win
  – Students gain surgical experience
  – Profession gains new veterinarians more prepared with efficient surgical skills
  – Communities gain veterinarians ready to sterilize kittens and puppies, thereby reducing pet overpopulation
  – The Colleges gain funds to support their surgical training programs
University Programs / Models

• Shelter animals brought to university facilities for spay / neuter (+ or – routine care)

• Students taken to shelters to perform spay / neuter (+ or – routine care)
  – Using shelter’s facilities
  – Mobile units taken to shelters

• Student rotations in animal shelters to perform spay / neuter (+ or – routine care)
Advantages of These Programs

• Gives students more surgical experience (universities report students averaging between 20 and 75 surgeries each)

• Gives students experience with pediatric spay / neuter

• Makes students more aware of pet overpopulation

• Makes students more aware of issues animal shelters face
Keys to Success

• For students to gain the most surgical experience
  – It’s best if the program is not under the control of the surgical service or anesthesia service

  – Students should be taught, and allowed to perform, efficient high volume spay / neuter techniques

  – Students should perform the surgeries and receive “immediate” feedback on surgical performance
Challenges

• Funding - many university programs are totally dependent on grants and donations

• Private Veterinarians – there are still some veterinarians who consider these programs “unfair competition”

• Emergency complications – arrangements must be made to handle post-operative complications
Rewards

• Students love these programs – gives them considerable hands on experience

• Shelters love these programs – especially the ones that offer services for low or no cost
  – Increases adoption rates at participating shelters
  – Decreases intake / euthanasia rates at participating shelters

• Takes pressure off local veterinarians to perform low cost / no cost spay / neuter
Results

• Graduates understand the problems animal shelters face

• Graduates have greater understanding of pet overpopulation

• Graduates have improved surgical skills

• Graduates have experience in pediatric spay / neuter

• Graduates are more likely to consider spay / neuter or shelter work as a career option
The Future

• All Universities should have shelter spay / neuter programs

• Universities need to recognize the importance of such programs and adequately fund them

• It should no longer be acceptable for veterinary students to graduate
  – having performed only 2 or 3 surgeries
  – without fully understanding efficient spay / neuter techniques
  – without pediatric spay / neuter experience
Question & Answer

Association of Shelter Veterinarians

www.sheltervet.org