

Cat Sedation & Emergency Reference

Pre-visit Preparation

- Gabapentin 100 mg PO ~1 hour before arrival.
- For very small cats (<2.5 kg) or those with significant renal dysfunction, consider Gabapentin 50 mg PO instead.
- Consider use of Feliway sprayed into the cage at home or used in clinic.

In-clinic Sedation

- Butorphanol 0.2 mg/kg IM 30–45 minutes before arrival.
 - Substitute with a pure μ -agonist (if indicated):
 - Methadone 0.3 mg/kg IM or
 - Fentanyl 2–5 μ g/kg IV
 - Consider substitution if:
 - The patient has gastrointestinal obstruction,
 - Is in significant discomfort, or
 - Is undergoing a painful procedure (e.g., tru-cut biopsy).
- Consider adding:
 - Ketamine 2–3 mg/kg IM or
 - Medetomidine or dexmedetomidine 0.025–0.04 mg/kg IV (in particularly fractious cats).
- Provide a dark, quiet (away from dogs!) cage with boxes/bedding that allow for hiding behaviour
- Consider

If Insufficient

- Alfaxan 1–2 mg/kg IM may be used to facilitate IV catheter placement.

Clipping

- All cats require clipping appropriate to the planned procedure before arrival of the ultrasonographer:
 - Abdominal ultrasound: clip from the xiphoid caudally to the pubis, extending laterally along the costal arch.
 - Thoracic ultrasound: clip a large, rectangular window on both left and right thoracic walls
 - * extending from the 4th to 8th ribs and from the spine to the sternum.
 - Cervical ultrasound: clip the ventral cervical region from the manubrium to the submandibular region.

Supportive Measures

- Oxygen available (ideally via mask).
- Airway management:
 - Laryngoscope
 - Small syringe of lignocaine to desensitise arytenoids and minimise laryngospasm
 - Cuffed or uncuffed ET tubes (3–7 mm)
- IV fluids: Provide at 3 mL/kg/hr if indicated based on hydration status or clinical disease.

Emergency Preparedness – Crash Cart

Have a crash cart immediately available containing:

- Adrenaline
- Atropine or Glycopyrrolate
- Other essential resuscitation drugs (see below) and equipment eg. Laryngoscope, esophageal stethoscope, aa multi-parameter including the ability to measure blood pressure, HR and ideally ETCO₂, ECG etc

Cat Emergency Drug Quick Reference

DRUG	DOSE	2.5 kg (mL)	5 kg (mL)	10 kg (mL)
Adrenaline (1:1000; 1mg/ml)	0.01 mg/kg IV	0.03	0.05	0.1
	0.02mg/kg intratracheal	0.06	0.1	0.2
Adrenaline (1:10000)	IV	0.3	0.5	1.0
	Intratracheal	0.6	1.0	2.0
Atropine (0.6 mg/mL)	0.05 mg/kg IV	0.25	0.5	1
Midazolam (5 mg/mL)	0.2–0.5 mg/kg IV/IM/IN	0.1–0.25	0.2–	1–2
Diazepam (5 mg/mL)	0.5–1 mg/kg IV	0.25–0.5	0.5–1.0	1–2
Naloxone (0.4 mg/mL)	0.04 mg/kg IV	0.25	0.5	1
Atipamezole (5 mg/mL) *	0.02 mL/kg IM **	0.05	0.1	0.2

* ⚠ Not to be given IV due to risk of cardiovascular collapse

** OR half the volume of the previously administered dexmedetomidine/medetomidine dose

⚠ Note: Atipamezole should not be given IV due to risk of cardiovascular collapse.
 Dosages are calculated for approximate body weights of 2.5 kg, 5 kg, and 10 kg.
 Adjust carefully for patient-specific needs.