**Pre-Operative Considerations**

* Does the colt/stallion have 2 descended testes? This will influence the type of castration to be performed. Cryptorchids or “rigdelings” require surgical castration as one testicle remains in the abdomen. **Do not remove a descended testicle if the other cannot be located.** Those with normal conformation (2 descended testes) can be castrated via Open, Closed or Semi-Closed Procedure (Discussed in Intra-Op section).
* Decide on the type of restrain to be used during the surgery. The procedure can be done with horse standing and sedated or recumbent and anesthetized. This will depend on the availability of space, hygiene, attitude of the horse and availability of emergency drugs and equipment.
* Examine the environment to evaluate the potential for contamination of wound site when deciding if antibiotic should be given pre-operatively or post-operatively. If there is a significant risk of wound contamination or infection then a long acting antibiotic such as Cetiofur (discussed in Pre-Op Drugs) should be used.
* Do a detailed check of the required supplies, preferably with the aid of a check list to ensure that everything is available.
* Ensure all equipment is clean/aseptic and in proper working condition.
* Know how Emasulator works. Serra and Whites cut and crush at the same time while Reimer only crushes.
* Indept knowledge of anatomy can prevent inadvertent damage to the horse.
* Treat any systemic disease before castration. Remember that Castration is an elective surgery and as such is normally performed on healthy patients.