



## Intrathecal Catheter

### Surgery Code: THECALCANN

The intrathecal catheter is of benefit to preclinical or research studies as it allows for easy and/or repeated intrathecal access without the need for anesthesia. The procedure can be used for manual dosing of compounds, or as a means for infusion using automated equipment.

#### Animal Models

Typical selections are listed below; however, choices for strain, age and weight may be limited due to model anatomy and/or physiological conditions.

- Rats: male/female, any strain, weight  $\geq$  200 g

#### Procedure Details

- **Perioperative care:** Please view our Pre- and Postoperative Care Sheet, which can be found at [www.criver.com/opcare](http://www.criver.com/opcare).
- **Housing:** The animals must be singly housed.
- **Diet:** No special diet is required.
- **Postoperative holding period:** At a minimum, post-op animals are held 2 days, with the majority of animals shipping within 7 days of surgery.
- **Maintenance:** Incision wound clips should be removed 7-10 days after surgery. Any wound clip used to secure a catheter needs to be replaced every 7-10 days. Catheters should be maintained following the Charles River Handling Instructions, which can be found at [www.criver.com/handling](http://www.criver.com/handling).

#### Surgical Summary

##### Caudal advancement of tip placement

(Standard method)

The animal is placed in ventral recumbancy and an incision is made parallel to the midline to expose the T13 spinous process. A pre-made catheter is inserted between T13 and L1, advanced caudally, and secured in place. The catheter tip generally reaches L3-L5. The external part of the catheter is tunneled subcutaneously, exteriorized, and secured just below the scapular region using wound clips or per request.

##### Cranial advancement of tip placement

(Per request)

The animal is placed in ventral recumbancy and an incision is made parallel to the midline to expose the L2 spinous process. A pre-made catheter is inserted between L1 and L2, advanced cranially, and secured in place. The catheter tip generally reaches T10- T12. External part of the catheter is tunneled subcutaneously, exteriorized, and secured just below the scapular region using wound clips or per request.

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## IACUC

The Charles River Institutional Animal Care and Use Committee (IACUC) governs the entire surgical process, including all anesthesia, analgesia, animal preparation and any postoperative holding in Charles River facilities prior to shipment. Review of experimental protocols, authorization to order animals that are surgically modified from Charles River, and all aspects concerning the use of the animals after they arrive at the institution are the responsibility of the receiving institution's IACUC.

## Contact Us

For more information, visit [www.criver.com/surgery](http://www.criver.com/surgery). For specific surgery-related questions, please contact our technical experts at 1.877.CRIVER.1 (1.877.274.8371) or [askcharlesriver@crl.com](mailto:askcharlesriver@crl.com). To place an order or get a quote, contact our Customer Service Department at 1.800.LABRATS (1.800.522.7287).