

**Policy on Major and Minor Surgery** (Revised November 18, 2017)

**Reference:** *ILAR Guide for the Care and Use of Laboratory Animals, 1996, 2011*

Surgical procedures in the laboratory setting may be categorized as major or minor (USDA 1985). The 2011 Guide states that whether a procedure is major or minor should be evaluated on a case-by-case basis, as determined by the veterinarian and IACUC (NRC 2003b; Silverman et al. 2007; for additional discussion see Chapter 4, Surgical Procedures). The Guide goes on to state that when attempting to categorize a particular surgical procedure, the following should be considered: the potential for pain and other postoperative complications; the nature of the procedure as well as the size and location of the incision(s); the duration of the procedure; and the species, health status, and age of the animal.

**Definitions: Major and Minor Surgery**

Major Surgery	Any surgical intervention that penetrates or exposes a body cavity; any procedure with potential for producing permanent physical or physiological impairment and/or any procedure associated with orthopedics or extensive tissue dissection or transection. Ex: Laparotomy, thoracotomy, craniotomy, joint replacement, limb amputation
Minor Surgery	Any surgical intervention that neither penetrates nor exposes a body cavity nor produces permanent impairment of physical or physiological function. Examples: Wound suturing, peripheral vessel cannulation, percutaneous biopsy, routine agricultural animal procedures such as castration, and most procedures routinely done on an “outpatient” basis in veterinary clinical practice, etc. Animals recovering from these minor procedures typically do not show significant signs of postoperative pain, have minimal complications, and return to normal function in a relatively short time.