LAB_008 Euthanasia - Carbon Dioxide Asphyxiation in Mice and Rats (Expiry: March 2026)

I. OBJECTIVE

To promote safe and humane euthanasia of mice and rats by carbon dioxide asphyxiation, as per Clause 3.3.45 of the Australian Code for the care and use of animals for scientific purposes.

NB: The use of (*) indicates this statement is dependent on the facility procedures NB: The use of (**) indicates this statement is dependent on AEC Approvals

II. COMMENTS / RECOMMENDATIONS

- Consideration must be taken as to the potential for stressful auditory, visual or olfactory stimuli that may be perceived by other animals. Efforts must be made to isolate these potential stressors:
 - Euthanasia or laboratory rodents should only occur in "terminal procedure rooms"(*),
 - The terminal procedure room must have sufficient ventilation, else biosafety cabinets or fume hoods should be used for this procedure,
 - Ensure the area is cleaned prior to use, and between animals,
 - Different species (i.e. rats and mice) should not be euthanised in the same area at the same time.
- Wherever possible this procedure should be performed with the animals remaining in their home cage, rather than transferring them into an unfamiliar euthanasia chamber.
- The rate of carbon dioxide (CO₂) exposure to rodents (i.e. the flow rate) must be controlled.
 - Low CO₂ flow rates, relative to chamber volume (e.g. <20% displacement/minute), must be avoided because they will result in a prolonged periods of respiratory distress (i.e. "air hunger"). Therefore it is important to know the delivery chamber volume and to use a flow regulator.
 - Placing rodents directly into "pre-filled" high concentrations of CO₂ (e.g. >90%) must be avoided because it will cause pain to the animals. Therefore it is important to ensure that any waste gas is discarded when cleaning the chamber between animal groups.
- This procedure is appropriate for use in pregnant dams, and will result in the humane death of foetuses.
- Adverse events must be managed as per LAB_022 UQBR Veterinary Care Program

In relation to human safety:

- Carbon dioxide should never be used without adequate ventilation/air flow
- The operator must ensure they are aware of all relevant safety procedures (including facility and procedure specific PPE requirements)
- All accidents, injury or near misses are to be reported immediately to the Facility Manager and recorded on a UQ OHS Incident Report Form.

III. EQUIPMENT

• PPE(*)

Although PPE is facility dependent, minimum expectations include: disposable gloves, clean log-sleeved laboratory gown, hair bonnet, eye protection, face mask.

- Home cage enclosure (*)
- Paper towel
- CO₂ delivery chamber:
 - This may be the home cage using a modified lid (that permits CO₂ delivery);
 - or a specific euthanasia chamber (of a defined volume)
- CO₂ supply/outlet unit (with flow regulator)
- Cadaver bag

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IV. PROCEDURE

Adult rodents

- 1. Remove the home cage lid.
- If delivering CO₂ to rodents in their home cage replace the home cage lid with the modified home cage lid. Alternatively, retrieve the rodent(s) from the home cage and place them into the specific euthanasia chamber, securing the lid.

Overcrowding must be avoided - rodents should be able to freely move around within the delivery chamber.

Refer to the following SOPs when handling rodents: LAB_006 Handling and Restraint in Mice and Neonates and LAB_039 Handling and Restraint in Rats and Neonates.

 Start CO₂ delivery at a flow rate ≥20% of the chamber's volume per minute, but not greater than 40% (see table 1. Guiding information relative to CO₂ flow rates in rodents, within V. REFERENCE INFORMATION). Assess the flow regulator to ensure gas is flowing at the appropriate pre-determined rate.

For example, when using a 6L container this means the flow rate of CO_2 entering the chamber should be set to at least 1.2L/min (i.e. 6L x 0.2/min = 1.2L/min).

4. Monitor the animals while the chamber is filling for normal behavioural responses. If the progression of behavioural responses is considered abnormal, e.g. if animals have protracted responses immediately ensure the lid is secure and that gas is flowing at the appropriate rate (as per steps 2-3). If no obvious cause for the abnormal response can be identified and resolved promptly, implement an alternative humane method of killing rodents (e.g. LAB_007 Euthanasia - Cervical Dislocation in Mice and Rats; LAB_011 Euthanasia - Lethal Injection in Mice and Rats).

Normal behavioural responses, that should be expected to occur in succession: unremarkable behaviour, excitability (increased activity), elevated respiratory rate, ataxia (staggers), ventral recumbence with elevated respiratory rate, unconsciousness (unresponsive to stimuli), recumbence with reduced respiratory rate, erratic respiratory rate (agonal breathing), loss of spontaneous respiration. These changes should occur within 5 minutes of CO_2 supply.

- 5. Once the chamber has reached 100% CO₂ concentration leave the cage undisturbed for at least 5 minutes.
- Following this period, remove the chamber lid and confirm death in the rodents, as per Table 2. Indicators of death in laboratory rodents (see V. REFERENCE INFORMATION). If there is any hesitation in confirming death, repeat steps 3-5, alternatively immediately implement an alternative humane method of killing rodents (e.g. LAB_007 Euthanasia - Cervical Dislocation in Mice and Rats; LAB_011 Euthanasia - Lethal Injection in Mice and Rats).
- 7. Once death is confirmed, ensure CO₂ has been turned off, place the cadaver(s) into the cadaver bags and dispose of them as appropriate(*)
- 8. Discard the home cage for cleaning, as appropriate (*). If euthanasia was performed using a specific euthanasia chamber ensure the chamber is cleaned and that any potential remaining waste gas has been removed prior to reuse.

Carbon dioxide is heavier than the ambient air and will pool in undisturbed, deep spaces. This must be considered when cleaning a specific euthanasia chambers to ensure all waste gas is removed.

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Neonatal rodents

Neonate procedures are to be followed as per adult mice, however, there are few notable differences:

- Sealed bags may be used as an alternative option to the home cage or specific euthanasia chamber
- Once the chamber is filled to 100% CO₂, neonates must be left undisturbed within the high concentration gas chamber for a prolonged period, relative to adults. These prolonged periods are represented in Table 3. Minimum time of 100% carbon dioxide exposure to confirm death in mice and rats (within V. REFERENCE INFORMATION).

V. REFERENCE INFORMATION

Table 1. Guiding information relative to CO₂ flow rates in rodents.

The rate of carbon dioxide (CO₂) exposure to rodents (i.e. the flow rate) must be controlled. CO₂ flow rate should be administered \geq 20% or more, but not greater than 40% (chamber volume displacement per minute). [It is noted that some recent literature supports a much wider range of acceptable CO₂ flow rates, however, the number of studies and the limitations of their findings does not provide sufficient evidence to be confident of the associated welfare impact to rodents].

Type of carbon dioxide delivery chamber used		Delivery chamber volume (approximate)	Minimum CO₂ flow rate to ensure ≥20% chamber volume displacement/ minute	
Conventional wire top mouse cage		Variable(*), usually these are 4-7L	1-1.5L/minute	
OptiMICE cage		6L	1.5L/minute	
Tecniplast Greenline mouse IVC		7L	1.5L/minute	

Conditions:

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CREATE CHANGE	Institutional author: UQ Biological Resources AEC Reviewed & Approved: March 2025 SOP Expiry: March 2026	Page 4 of 6

Conventional wire top rat cage



Variable(*), usually these are ~20L

4L/min

Table 2. Indicators of death in laboratory rodents: all indicators must be observed to confirm death

Criteria	Confirmation
Absence of eye reflexes	Absence of a corneal reflex: Place gentle pressure directly to the eyeball over the cornea. The eye should be unresponsive and the eyelids should not blink. NB: This should only be performed in an unconscious animal.
	Additionally, the eyes and eyelids must be unresponsive, and the eyes should appear "glazed" with fixed-dilated pupils.
Absence of spontaneous, rhythmic breathing	There is a complete lack of breathing and respiratory movements. Deeply anaesthetised animals may exhibit shallow and irregular breathing, which must not be confused with a lack of spontaneous breathing. Thus, confirmation of a lack of spontaneous breathing requires astute monitoring and must not be used as sole criteria for confirming death.
Absence of a rhythmic heart beat	Asystole is confirmed via direct thoracic auscultation or palpation. This judgement may be assisted via observation of mucosal membrane discolouration, absence of ECG or pulse oximetry conduction.
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If there is any hesitation in confirming the above criteria a secondary method of euthanasia must be performed. For example lethal injection, cervical dislocation, decapitation, *bilateral thoracotomy, *resection of the heart and or lungs, *exsanguination and or *cardiac perfusion.

*indicates techniques that are not appropriate in a conscious animals – they require that the animal has lost its righting reflex (e.g. unconscious, lying on its side) AND withdrawal reflexes (e.g. toe pinch withdrawal).

Table 3. Minimum time of 100% carbon dioxide exposure to confirm death in mice and rats.

AGE	MICE	RATS
Non-haired pups 0–6 days	60 minutes	40 minutes
Haired pups, eyes closed 7–13 days	20 minutes	20 minutes

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Haired pups, eyes open, pre-weaning 14–20 days	10 minutes	10 minutes
Weanlings and adults 21+ days	5 minutes	5 minutes

VI. BIBLIOGRAPHY

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	CREATE CHANGE	Institutional author: UQ Biological Resources AEC Reviewed & Approved: March 2025	Page 6 of 6
		SOP Expiry: March 2026	-

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