## **Recommended Methods of Euthanasia:** *Ferrets*

Species	Method	Description
Ferrets	Asphyxiation using CO2 followed by bilateral thoracotomy.	Using a non-precharged chamber, CO2 is dispensed from a commercial cylinder with fixed pressure regulator and inline restrictor controlling gas flow within 30%-70% of the chamber volume per minute to comply with 2020 AVMA Guidelines. CO2 flow will be maintained for > 60 seconds following respiratory arrest (which may take up to 5 minutes), followed by bilateral thoracotomy to assure euthanasia.
	Asphyxiation using CO2 followed by decapitation.	Using a non-precharged chamber, CO2 is dispensed from a commercial cylinder with fixed pressure regulator and inline restrictor controlling gas flow within 30%-70% of the chamber volume per minute to comply with 2020 AVMA Guidelines. CO2 flow will be maintained for > 60 seconds following respiratory arrest (which may take up to 5 minutes), followed by decapitation using ( <i>indicate equipment used</i> ) to assure euthanasia.
	Asphyxiation using CO2 followed by exsanguination.	Using a non-precharged chamber, CO2 is dispensed from a commercial cylinder with fixed pressure regulator and inline restrictor controlling gas flow within30%-70% of the chamber volume per minute to comply with 2020 AVMA Guidelines. CO2 flow will be maintained for > 60 seconds following respiratory arrest (which may take up to 5 minutes), followed by rapid exsanguination via ( <i>indicate method or vascular incision points</i> ) to assure euthanasia.
	Asphyxiation using CO2 followed by major organ harvest.	Using a non-precharged chamber, CO2 is dispensed from a commercial cylinder with fixed pressure regulator and inline restrictor controlling gas flow within 30%-70% of the chamber volume per minute to comply with 2020 AVMA Guidelines. CO2 flow will be maintained for > 60 seconds following respiratory arrest (which may take up to 5 minutes), followed by rapid harvest of ( <i>indicate organs / tissues</i> ) to assure euthanasia. <u>NOTE</u> : Neonates < 7 days old should be euthanized by a physical method, such as sharp scissors.
	Inhalant anesthetic overdose followed by bilateral thoracotomy.	Using a precision vaporizer with induction chamber and waste gas scavenger, ( <i>indicate the gas anesthetic</i> ) will be administered slowly up to [ <i>indicate:</i> > 4.5 % ( <i>for Isoflurane</i> ) or > 6.5 % ( <i>for Sevoflurane</i> )] in oxygen and continued until respiratory arrest occurs for > 60 seconds. The chamber is flushed with oxygen only, the animal is removed and bilateral thoracotomy is performed to assure euthanasia.
	Inhalant anesthetic overdose followed by decapitation.	Using a precision vaporizer with induction chamber and waste gas scavenger, ( <i>indicate the gas anesthetic</i> ) will be administered slowly up to [ <i>indicate:</i> > 4.5 % ( <i>for Isoflurane</i> ) or > 6.5 % ( <i>for Sevoflurane</i> )] in oxygen and continued until respiratory arrest occurs for > 60 seconds. The chamber is flushed with oxygen only, the animal is removed and decapitated with ( <i>indicate equipment used</i> ) to assure euthanasia.
	Inhalant anesthetic overdose followed by exsanguination.	Using a precision vaporizer with induction chamber and waste gas scavenger, ( <i>indicate the gas anesthetic</i> ) will be administered slowly up to [ <i>indicate:</i> > 4.5 % ( <i>for Isoflurane</i> ) or > 6.5 % ( <i>for Sevoflurane</i> )] in oxygen and continued until respiratory arrest occurs for > 60 seconds. The chamber is flushed with oxygen only, the animal is removed and rapid exsanguination is performed by ( <i>indicate method or vascular incision points</i> ) to assure euthanasia.

## **Recommended Methods of Euthanasia:** *Ferrets*

Species	Method	Description
	Inhalant anesthetic overdose followed by major organ harvest.	Using a precision vaporizer with induction chamber and waste gas scavenger, ( <i>indicate the gas anesthetic</i> ) will be administered slowly up to [ <i>indicate:</i> > 4.5 % ( <i>for Isoflurane</i> ) or > 6.5 % ( <i>for Sevoflurane</i> )] in oxygen and continued until respiratory arrest occurs for > 60 seconds. The chamber is flushed with oxygen only, the animal is removed and rapid removal of ( <i>indicate tissues</i> / organs) is performed to assure euthanasia.
	Decapitation by Guillotine under sedation or anesthesia (Juveniles / Adults)	Post induction of anesthesia or sedation using ( <i>indicate drug, dose in mg/kg, route &amp; gauge needle</i> ), the animal is placed head first into a decapicone and moved forward in the cone until secured. Holding the cone at the rear, the narrow end of the cone is inserted into a commercial guillotine to the level of the cervical vertebrae and the guillotine is activated.
	Decapitation by Guillotine without sedation or anesthesia (Juveniles / Adults)	Animals are placed head first into a decapicone and moved forward in the cone until secured. Holding the cone at the rear, the narrow end of the cone is inserted into a commercial guillotine to the level of the cervical vertebrae and the guillotine is activated. NOTE: Scientific Justification is REQUIRED for the use of this method without sedation / anesthesia on juvenile or adult animals.
	Vital perfusion under injectable anesthesia	( <i>Indicate drug, dose in mg/kg, route &amp; gauge needle</i> ) will be used to induce anesthesia. Surgical depth of anesthesia will be verified by lack of response to ( <i>indicate stimulus</i> ) stimulus. Vital perfusion will be performed using ( <i>indicate name</i> ) perfusate injected into the ( <i>define point of vascular access or blood egress site</i> ). Perfusion will be performed in a chemical fume hood if required by EHS. Perfusate waste will be disposed of by ( <i>indicate method of disposal</i> ).
	Injectable anesthetic (Pentobarbital) overdose	Administration of ≥ 100 mg/kg of Pentobarbital ( <i>state manufacturer</i> ) intraperitoneal (IP) using a ( <i>insert gauge</i> ) gauge or smaller bore needle. Monitor animal until lack of heart beat is noted for > 60 seconds prior to tissue harvest or carcass disposal.