

# STANDARD OPERATING PROCEDURE #108 FISH, AQUATIC AMPHIBIAN, AND REPTILE ANALGESIA

#### 1. PURPOSE

The intent of this Standard Operating Procedure (SOP) is to describe methods of assessing pain in fish, aquatic amphibians and reptiles, and mitigating pain by administration of analgesic medications.

#### 2. RESPONSIBILITY

Principal investigator (PI) and their research staff, veterinary care staff.

#### 3. GENERAL CONSIDERATIONS

- 3.1. A procedure which would be expected to be painful if it were done on humans must be considered painful to the animal.
- 3.2. When there is a question of whether or not a procedure is painful, the animal should receive the benefit of analgesia.
- 3.3. Analgesia should be provided at an appropriate dose and frequency to control pain.
- 3.4. Any deviation from this procedure must be justified by the investigator and approved by the appropriate Facility Animal Care Committee (FACC).

#### 4. PAIN RECOGNITION AND ASSESSMENT

- 4.1. Adapt the frequency of observation to the invasiveness of the procedure (minimum once a day).
- 4.2. Start by observing the animal from a distance so the animal's behavior is not altered by the presence of the observer. Then proceed to observe the animal more closely.
- 4.3. Look for any changes in the behavior. Report animals which appear to be in pain to the veterinary care staff.
  - **Note**: The most reliable signs of pain and distress are the changes in behavior. This implies a good knowledge of species and individual normal behavior by the observer.
- 4.4. Fish, amphibians, and reptiles do not exhibit obvious clinical signs of pain. Because fish and amphibians can experience pain as mammals do, the assumption is made by extrapolation from human observation.

#### 5. ANALGESIA PLAN

5.1. If possible, provide analgesia before the painful stimulus, as it is more effective in preventing pain (e.g. give analgesic before surgery).

Analgesic	Dose	Route	Duration	Note
Lidocaire	< 2 mg/kg	SC, Infiltration of surgical wounds	30–60 min.	Uselidocaine HCl 2% (20mg/ml) injectable solution
				Because this drug is acidic, it is recommended to dilute it 3:1 with sodium bicarbonate injectable solution (at 5 or 8.4%)
				Dilution must be prepared immediately before use and should not be stored. Dilutemblution is as effective but induction of analgesia is slightly prolonged.
				*Dilution with sodium bicarbonate is not necessary if lidocaine is to be administered to an anesthetize animal.
Bupivacaine	< 2 mg/kg	SC, Infiltration of surgical wounds	3–4 hr.	Use bupivacaine HCl 0.50% (5mg/ml) injectable solution.
				Same comment as for lidocaine.
* Lidocainebupivacaine mixture	< 2 mg/kg	SC, Infiltration of surgical wounds	30 min.	Same comment as for lidocaine.
			to 4 hrs.	Combining both drugs allows for rapid induction and prolonged effect.
				Use a 1:1 mixture of lidocaine HCl 2% (20mg/ml) injectable solution and bupivacaine HCl 0.50% (5mg/ml) injectable solution.
				Discard mixture after 3 months.
Lidocaine or benzocaine	<b>-</b>	Topical	30–60 min.	For fish and amphibians only.
(Orajel) gel				Apply a thin layer over the affected area

<sup>\*</sup>most commonly used

## 7. GENERAL ANALGESIA

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Analgesic	Dose	Route
7 11 14190010		

- 7.1. Administration of non-steroidal anti-inflammatory drugs (NSAIDs):
  - 7.1.1. NSAIDs include carprofen, ketoprofen and meloxicam.
  - 7.1.2. To minimize chances for adverse drug interactions, a washout period of 5-7 days is recommended before switching between NSAIDs.

## 8. SAFETY PRACTICES

- 8.1. MS-222:
  - 8.1.1. Wear protective clothing, gloves, and eye protection when handling the MS-222 powder.
  - 8.1.2. TNn12.3c 0g tfnon

## **SOP REVISION HISTORY**

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