

Name of business
 City License number (if currently licensed) license type

Duties of a CET

Prepare animals for euthanasia .0418 <input type="text" value="Acceptable"/>	Properly record all data .0418 <input type="text" value="Acceptable"/>	Security, controlled substances .0418 <input type="text" value="Acceptable"/>
Supervise Prob. CET .0418 <input type="text" value="Acceptable"/>	Properly euthanize .0418 <input type="text" value="Acceptable"/>	Properly dispose of dead .0418 <input type="text" value="Acceptable"/>

Euthanasia by Injection

IC only on anesth. or sedated .0501

Euthanasia by CO

Use only bottled gas .0601 <input type="text" value="N/A"/>	Use only comm. mfd chamber .0601 <input type="text" value="N/A"/>	Only same species in chamber .0601 <input type="text" value="N/A"/>	In chamber for >= 20 min. .0601 <input type="text" value="N/A"/>
Not used on < 16 weeks .0602 <input type="text" value="N/A"/>	Not used on pregnant .0602 <input type="text" value="N/A"/>	Not used on near death .0602 <input type="text" value="N/A"/>	No live with dead .0603 <input type="text" value="N/A"/>
Animals separated .0604 <input type="text" value="N/A"/>	At least 1 viewport .0605 <input type="text" value="N/A"/>	Chamber in good order .0605 <input type="text" value="N/A"/>	Airtight seals present .0605 <input type="text" value="N/A"/>
Light shatterproof .0605 <input type="text" value="N/A"/>	Chamber sufficiently lit .0605 <input type="text" value="N/A"/>	Electrical explosion-proof .0605 <input type="text" value="N/A"/>	If inside, two CO monitors .0605 <input type="text" value="N/A"/>
Records of monthly inspection .0606 <input type="text" value="N/A"/>	Records of yearly inspection .0606 <input type="text" value="N/A"/>	Visual inspection by AWS <input type="text" value="N/A"/>	
Chamber cleaned b/t uses .0607 <input type="text" value="N/A"/>	Operational guide & or manual .0608 <input type="text" value="N/A"/>	>= 2 adults present when used .0609 <input type="text" value="N/A"/>	

Extraordinary methods

Reports of extraordinary euth. .0705

Policy and procedure manual

Current copy of AWA in manual .0803 <input type="text" value="Acceptable"/>	Current AVMA euth. in manual .0803 <input type="text" value="Acceptable"/>	Current HSUS euth. in manual .0803 <input type="text" value="Acceptable"/>	Current AHA euth. in manual .0803 <input type="text" value="Acceptable"/>
List of approved euth. methods .0803 <input type="text" value="Acceptable"/>	List of CETs & methods .0803 <input type="text" value="Acceptable"/>	Contact info for DVM in PVC .0803 <input type="text" value="Acceptable"/>	Contact info for DVM care .0803 <input type="text" value="Acceptable"/>
List after hour euth. meth. 0803 <input type="text" value="Acceptable"/>	Euth. methods if no CET present 0803 <input type="text" value="Acceptable"/>	Policy for verifying death .0803 <input type="text" value="Acceptable"/>	Contact info for suppliers. 0803 <input type="text" value="Acceptable"/>
DEA certificate .0803 <input type="text" value="Acceptable"/>	MSDS sheets, chemical or gas .0803 <input type="text" value="Acceptable"/>	MSDS sheets, tranq. or anesth. .0803 <input type="text" value="Acceptable"/>	Signs & symptoms, human .0803 <input type="text" value="Acceptable"/>
First aid information .0803 <input type="text" value="Acceptable"/>	MD contact information .0803 <input type="text" value="Acceptable"/>		

Signature of inspector *Dawn Shaban* date 8/11/10 page 1 of 2 Signature of management *[Signature]*

