Steven W. Troxler
Commissioner

North Carolina Department of Agriculture and Consumer Services
Veterinary Division

R. Douglas Meckes, DVM
State Veterinarian

May 6, 2015

Rossie Hayes
Shelter Manager
Columbus County Animal Control
288 Legion Drive
Whiteville, NC 28472

UPS Tracking Number:
1Z 21Ø 617 42 5849 1445

Notice of Warning
Re: **Violations of Title 02, Administrative Code (NCAC) Chapter 52J**

Facility: Columbus County Animal Shelter

Dear Mr. Hayes:

The Animal Welfare Section ("AWS") of the Veterinary Division of the North Carolina Department of Agriculture & Consumer Services ("NCDA&CS") received two complaints alleging that the Columbus County Animal Shelter ("CCAS") failed to provide adequate veterinary care to a total of six cats during March 2015. The AWS has investigated these complaints.

Acting pursuant to N.C. Gen. Stat. § 19A-24 Dr. Patricia Norris, Director of the Animal Welfare Section, Veterinary Division, North Carolina Department of Agriculture and Consumer Services (NCDA&CS) makes the following:

FINDINGS OF FACT

Information obtained from the complaint investigation is separated by animal.

Case 1:

a. Shelter ID #33950 – Rescue alleges: cat was "unable to walk, eat or drink;" "lay in its litter box the entire time;" and "suffered for a week without medical attention."

b. The intake date for this cat was 03/04/2015 at 8:30 AM and the transfer date was 03/10/2015 at 3:00 PM.

c. The shelter attendants state they were unaware of any injury to this cat and this cat had food and water 24/7. One staff member stated that he did not know if she ate, while another stated that she had noted the cat was laying in the litter box and when she inquired about the cat, she was told that the cat was eating.

d. The rescue took the cat to Veterinary Hospital #1 on 03/10/2015 where she was diagnosed with dyspnea, swelling on the right side, fever and fleas. Treatment was administered.

e. The rescue took the cat to Veterinary Hospital #2 on 03/11/2015 where she was diagnosed with dyspnea, an abscess and a puncture wound on the right side, poor body condition, and possible lung collapse or contusion. The cat was referred to another veterinary hospital for care.

f. The rescue transferred the cat to Veterinary Hospital #3 on 03/11/2015 where she was diagnosed with two rib fractures, a draining abscess on the right side, a penetrating bite wound into her side and pyothorax. The cat was treated with antibiotics, chest tube placement, oxygen therapy, intravenous fluids, analgesics, diuretic, wound treatment and intensive monitoring. The cat was discharged on 03/14/2015.

Case 2:

a. Shelter ID #33334 – Rescue alleges: cat had a "complex fracture – Broken hind leg;" "No Medical Attention given at shelter;" "Rear leg dangling and cat unable to use leg or walk."

b. The intake date for this cat was 03/13/2015 at 11:45 AM and the rescue took this cat out of the shelter for fostering on 03/13/2015. The cat was officially transferred for adoption on 03/16/2015.

c. The shelter attendants stated they were unaware this cat had injuries. They noted no problems with the cat and the cat had access to food 24/7, but they did not note if they saw the cat eating.

d. This cat was presented to Veterinary Hospital #1 on 03/30/2015. The history in the medical record notes: "P presents for limping, O first noted a few days ago but notes that P has been very quiet since rescure (sic) a few weeks ago. Still e/d OK and no v/d/c/s."

e. The veterinary clinic noted a weight bearing lameness on the left hind leg and diagnosed a "caudodorsally displaced femoral fracture." The cat was treated with analgesics and referred for surgical correction of the fracture.

f. The cat was presented to Veterinary Hospital #2 on April 2, 2015 for surgical repair of the fractured femur.

g. There is no evidence that the rescue obtained veterinary care for this cat from the time they took custody on 03/13/2015 until 03/30/2015.

Case 3:

a. Shelter ID #34027 – Rescue alleges: cat had a "gaping hole in side of head – Abscess and Infection. No medical attention given."

b. The intake date for this cat was 03/10/2015 at 4:00PM; cat was released to rescue for fostering on 03/13/2015; and transfer finalized on 03/16/2015.

c. One of the shelter attendants states that the cat scratched off one of the scabs on the back of her ear during the afternoon of 03/13/2015 shortly before the rescue picked up the cat. The attendant explained this to the person who picked up the cat for the rescue.

d. The cat was presented to Veterinary Hospital #1 on 03/13/2015 and was diagnosed with open wound on right ear from self-trauma due to ear mites, multiple scabs on forelimbs and a distended abdomen. Veterinary Hospital #1 dispensed Tresaderm for the ear mites.

e. The cat was presented to Veterinary Hospital #2 on 03/16/2015 and was diagnosed as being pregnant and having hair mats, lacerations and bilateral abrasions on ear flaps (pinnae) from ear mites.

f. The cat was presented again to Veterinary Hospital #2 on 3/23/2015 and was diagnosed with having an abscess on the left front leg. Treatment was administered.

g. While there were lesions on the ears from self-trauma which was disclosed to the rescue as occurring on the day of rescue, there is no documentation of a "gaping hole in side of head." There is no documented treatment of the lesions other than medication to treat the ear mites.

h. It appears the abscess was not visible or noted during the first or second veterinary visit and did not appear to be of clinical significance until 10 days after the shelter released custody of the cat to the rescue.

Case 4:

a. Shelter ID #33951 – Rescue alleges: "Bites, wounds and Abscesses over most of body." "Cat was taken to … Vet who gave one antibiotic shot but did not exam (sic) cat or find the numerous wounds on abdomen, stomach and legs."

b. The intake date for this cat was 03/04/2015 at 8:30 AM; cat was released to rescue for fostering on 03/06/2015; and the transfer finalized on 03/10/2015 at 4:00 PM.

c. Cat was noted at time of impoundment to have an injury to the rear end. The director was notified and the cat was taken to Veterinary Hospital #1 on the day of intake. After receiving medical care the cat was returned to the shelter. The director requested the attendant to find a rescue to take the cat so the cat could be provided with further care.

d. The Officer who brought in the cat initially and then took him to Veterinary Hospital #1 states that he informed the rescues that they needed rescue assistance with an injured cat.

e. The veterinarian of Veterinary Hospital #1 examined and treated the cat on 03/04/2015. The cat was noted to have a fight wound to the tail head. The cat was sedated; the wounds treated; and a long-acting antibiotic was administered.

f. The rescue presented the cat to Veterinary Hospital #2 on 03/16/2015. The veterinarian diagnosed superficial bite wounds to the caudal ventrum and base of the tail and the skin of the tail head was beginning to slough. The rescue declined the recommended antibiotic injection. The wounds were treated and medications were dispensed. The veterinarian recommended a 6 month quarantine for possible a rabies exposure.

Case 5:

a. Shelter ID #34096 – Rescue alleges: "kitten who had OBVIOUS injuries to his front left foreleg and his lower jaw. This kitten had been in the shelter for 4 days without any medical attention. He was dehydrated, fevered, and having trouble eating. This kitten was also found through bloodwork to have a blood parasite requiring intensive medical treatment."

b. The intake date for this kitten was 03/27/2015 at 4:00 PM and the release date to the rescue was 03/31/2015.

c. The shelter attendant states that "an old scab" was noted on the left front leg at the time of intake and that the scab appeared to be from an injury. The attendant states that the rescue representative was shown the scab and agreed to take the cat anyway.

d. Another shelter attendant states that the kitten had access to food 24/7 but does not know if the kitten ate.

e. The rescue presented the kitten to Veterinary Hospital #1 on 03/31/2015. The kitten was diagnosed with open wounds to the left elbow and left hock, moderate dehydration, degloving injury to the lower jaw, malocclusion, ear mites, fleas, bone defect of the left ulna and hemobartonella. The kitten was neutered, treated for the medical conditions and released on 04/07/2015.

Case 6:

a. Shelter ID # 34087 – Rescue alleges: "This cat had severe flea allergy dermatitis, obvious thinning of fur and was placed on medicines immediately."

b. The intake date for this cat was 03/25/2015 at 4:00 PM and the release date was 03/31/2015.

c. The shelter attendant states that this cat was owner surrendered because the cat had skin allergies and would not stay in the house. The attendant further stated that this condition was noted when the cat was put up for adoption and that the rescue was fully informed of the condition before they adopted the cat.

d. The rescue presented the cat to Veterinary Hospital #1 on 03/31/2015. The cat was diagnosed as having thinning of the fur due to flea allergy dermatitis and grade II periodontal disease. The cat was treated for fleas and steroids and antibiotics were dispensed for the dermatitis and periodontal disease.

e. The treating veterinarian stated that at the time of the examination, the cat was uncomfortable but not suffering; the cat's condition has since resolved with the initial treatment; she has seen owned cats with worse skin lesions on initial presentation for the same condition; and it is was in the cat's best interest to find a rescue in order to get treatment for the cat rather than to have euthanized the cat.

Based on the investigation into this incident, AWS has determined that the facility may have failed to provide effective daily observation and adequate veterinary care of the cat with the Shelter ID # 33950 and the cat with the Shelter ID # 34096. Furthermore based on the investigation into this incident, AWS has determined that the facility may be in violation of the North Carolina Animal Welfare Act ("AWA") and its regulations:

02 NCAC 52J .0210 VETERINARY CARE

(a) A written program of veterinary care to include disease control and prevention, vaccination, euthanasia, and adequate veterinary care shall be established with the assistance of a licensed veterinarian by any person who is required to be licensed or registered under the Animal Welfare Act, Article 3 of Chapter 19A of the General Statutes.

(c) Each dog and cat shall be observed daily by the animal caretaker in charge, or by someone under his direct supervision. Sick or diseased, injured, lame, or blind dogs or cats shall be provided with veterinary care or be euthanized, provided that this shall not affect compliance with any state or local law requiring the holding, for a specified period, of animals suspected of being diseased. If euthanasia is performed at a certified facility, a list of personnel approved to perform euthanasia shall be maintained in a Policy and Procedure Manual as described in 02 NCAC 52J .0800. Diseased or deformed animals shall be sold or adopted only under the policy set forth in the "Program of Veterinary Care." Full written disclosure of the medical condition of the animal shall be provided to the new owner.

History Note: Authority G.S. 19A-24;
Eff. April 1, 1984;
Amended Eff. March 23, 2009; January 1, 2005.

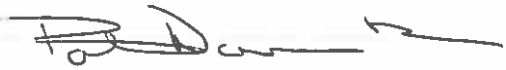
You are hereby requested to address the above concerns by providing a written policy and procedure protocol which addresses but is not limited to: provision of adequate veterinary care, effective daily observation of animals, assessment of animals upon intake for injury or illness, policies outlining communication protocols concerning injured/ill animals and euthanasia. Please provide your written protocols to AWS by no later than fourteen business days from the date you receive this Notice of Warning.

In addition, you are to provide training to the shelter staff on effective daily observation of animals, provision of adequate veterinary care, assessment of animals upon intake for injury or illness and proper communication and documentation of injury/illness of animals. Please send notification to AWS when this training has been provided to all members of the CCAS staff.

If you do not respond as requested, AWS, upon confirming that serious violations continue to exist in your facility, may take appropriate action as authorized under the AWA. Such action may include suspension or revocation of your public animal shelter registration.

This letter shall constitute a **WARNING.** If a future violation of these statutes or regulations occurs, it could result in disciplinary action against your facility's certificate of registration pursuant to G. S. 19A-30 or the assessment of a civil penalty of up to $5,000.00 per violation under N.C. Gen. Stat.§ 19A-40.

Sincerely,



Patricia Norris, DVM,
Director, Animal Welfare Section,
Veterinary Division, NCDA&CS

cc: Barry Bloch, Assistant Attorney General, NCDOJ; Joe Blomquist, AWS Outreach Coordinator
Pat Sholar, AWS Inspector; Dr. Doug Meckes, NC State Veterinarian; Joe Reardon, Assistant Commissioner