



Steven W. Troxler  
Commissioner

North Carolina Department of Agriculture  
and Consumer Services  
*Veterinary Division*

David T. Marshall, DVM  
State Veterinarian

November 2, 2009

Mr. Leon Everitt  
Montgomery County Animal Shelter  
PO Box 425  
Troy, NC 27371

CERTIFIED MAIL  
RETURN RECEIPT  
REQUESTED

7006 2760 0003 0472 01986

**Notice of Warning and Voluntary Suspension of Gas Chamber Operation Privilege**

Re: Violation of Title 02, N.C. Administrative Code Chapter 52J, Section(s) .0601 et seq.

**Facility:** Montgomery County Animal Shelter, 442 Landfill Road, Mt. Gilead, NC

**Date of Inspection:** 27 October 2009

Dear Mr. Everitt:

Ms. Shelley Swaim, Animal Health Technician with the North Carolina Department of Agriculture & Consumer Services, Animal Welfare Section, Veterinary Division, conducted an inspection in your facility and discovered specific conditions and/or practices amounting to failure to comply with the requirements of 02 NCAC .0801 et seq., in violation of the North Carolina Animal Welfare Act.

Ms. Swaim's inspection found that Montgomery County Animal Shelter did not have eighteen (18) of the eighteen (18) required items in the Policy and Procedure Manual as set forth in the attached inspection report.

Based on the results of this inspection, you may have violated the following Agriculture regulation:

**02 NORTH CAROLINA ADMINISTRATIVE CODE 52J .0803**

A certified facility's policy and procedure manual shall be kept consistent with the publications listed below and reflect the current information for each. The manual shall include:

- (1) A copy of the current North Carolina Animal Welfare Act and the rules in this Subchapter;
- (2) A copy of the 2000 Report of the American Veterinary Medical Association Panel on Euthanasia and any future revisions, replacements, supplements or changes thereto issued by that organization;
- (3) A current copy of the Euthanasia Training Manual of the Humane Society of the United States;
- (4) A copy of the publication on euthanasia by the American Humane Association;
- (5) A list of methods of euthanasia allowed at the shelter and the policy and procedures for each method;
- (6) A list of Certified Euthanasia Technicians, the methods of euthanasia in which they have received training, and the

date of training;

- (7) The name, address and contact information for the veterinarian responsible for the Annual Program of Veterinary Care;
- (8) The name, address and contact information for veterinarians responsible for the veterinary medical care of the animals. The contact information shall include telephone numbers for working hours, weekends, nights and holidays;
- (9) Euthanasia procedure to use in emergencies, after hours, holidays and weekends;
- (10) Procedures to follow if no Certified Euthanasia Technician is present and euthanasia of an animal is necessary;
- (11) Methods of verifying death of an animal after a euthanasia process is performed;
- (12) The name and contact information of the supplier of materials. It shall include:
  - (a) Bottled gas (if applicable);
  - (b) Manufacturer of the chamber used to euthanize animals by inhalant gas (if applicable);
  - (c) Injectable euthanasia solution;
  - (d) Tranquilizer or anesthetic solution;
- (13) Original of U.S. Drug Enforcement Administration certification permitting the use of controlled substances;
- (14) A material safety data sheet for any chemical or gas used for euthanasia in that shelter;
- (15) A material safety data sheet for any anesthetic or tranquilizer used in that facility;
- (16) Notice of the signs and symptoms associated with human exposure to the agents used for euthanasia at the facility;
- (17) First aid for people accidentally exposed to the agents used for euthanasia at the facility; and
- (18) Contact information of the physician or medical facility providing medical treatment to employees of the facility. The information shall include the name of the medical facility, the telephone number for both working and after-hours contact and directions to the medical facility from the certified facility including a map. If the medical facility does not provide service after-hours, on weekends or on holidays, there must be contact information as described in this item for the nearest medical facility, urgent care clinic or emergency room that does provide care during that time.

*History Note: Authority G.S. 19A-24; Eff. March 23, 2009.*

Ms. Swaim told you that your facility would be re-inspected in order to determine if you have corrected the failure to comply with the applicable rules. If before that time you believe that you have gathered the missing materials, please notify this office in writing either by US mail or by FAX.

At the time of inspection you agreed to voluntarily suspend use of your carbon monoxide chamber to euthanize animals under your animal shelter certification. This letter confirms this Department's understanding that said suspension is voluntary and shall continue until you report to me that all of the above-listed deficiencies have been cured.

The inspection report dated 27 October 2009 also lists several deficiencies found during several previous inspections, but had not yet been remedied, including but not limited to deficiencies in:

- Structure and repair of the facility
- Structure and repair of the primary enclosures
- Ceilings, walls and floors
- Origin and disposition paperwork
- General cleanliness

Within 10 working days from the receipt of this letter, please provide a written timetable for the correction of these deficiencies at the facility. You may email the timetable to the Animal Welfare Section at [agr.aws@ncagr.gov](mailto:agr.aws@ncagr.gov) or you may fax it to the Section at 919-733-6431.

This letter shall constitute a

**NOTICE OF WARNING FOR FAILURE TO COMPLY WITH THE ANIMAL WELFARE ACT  
AND APPLICABLE PROVISIONS OF THE N.C. ADMINISTRATIVE CODE.**

If a future violation of these statutes or regulations occurs, it could result in disciplinary action against your certification and that of the facility employing you, the assessment of a civil penalty of up to \$5,000.00 per violation under N.C. Gen. Stat. § 19A-40.

Sincerely,

A handwritten signature in black ink, appearing to read "Lee Hunter, DVM, MPH". The signature is stylized and cursive.

Lee Hunter, DVM, MPH  
Director, Animal Welfare Section

BHB/mwb

cc: Howard Isley, Assistant Commissioner  
Ms. Dianne S. Whitman, Administrative Officer  
Mr. Barry Bloch, Assistant Attorney General  
Ms. Shelley Swaim, Animal Health Technician