



Steven W. Troxler
Commissioner

North Carolina Department of Agriculture
and Consumer Services
Veterinary Division

R. Douglas Meckes, DVM
State Veterinarian

March 21, 2016

Aaron Church
Rowan County Manager
130 W. Innes Street
Salisbury, NC 28146

Dear Mr. Church:

The Animal Welfare Section ("AWS") of the Veterinary Division of the N. C. Department of Agriculture and Consumer Services ("NCDA&CS") has received numerous complaints concerning the Rowan County Animal Shelter ("the shelter"). The complaints reference a cat allegedly injured while in the care and custody of the shelter.

Based on these complaints, AWS initiated an investigation into whether violation of the N. C. Animal Welfare Act had occurred. This investigation included a site visit, interviews with shelter staff, rescue personnel and veterinarians and review of shelter records and veterinary medical records pertaining to this cat. The investigation revealed the following Findings of Fact:

A. Based on review of shelter records:

- 1) The cat (Intake No. A100693) (later named "Cooper" by the animal rescue) was an owner surrender along with three other cats on February 29, 2016. At the time of intake, the shelter staff administered the intake vaccinations and oral deworming.
- 2) The other cats surrendered with this cat were placed on the adoption floor but Cooper was moved to the area for unsocialized cats due to his aggressive behavior.
- 3) On March 8, 2016, the rescue signed the Transfer Contract for Cooper (Intake No. A100693).

B. Based on statements and interviews of staff of the shelter and the rescue:

- 1) On March 8, 2016, the rescue had chosen several cats including Cooper to be adopted and transferred into their care and custody. The rescue personnel instructed the shelter staff to prepare the adoption paperwork and to ready the cats for transport. The rescue personnel informed the

shelter staff that they were going to lunch and upon their return they would be transporting the cats directly to a veterinary clinic.

- 2) One shelter staff member requested the assistance of another staff member in order to microchip and administer a rabies vaccination to Cooper due to the history of previous difficulties when handling this cat.
- 3) Cooper was in his kennel and a transfer carrier (feral cat den) had been placed in the kennel. The feral cat dens are used as a means of providing a hiding place for these cats to reduce their stress. These dens can be closed when the cats are inside as to minimize the stress of moving the cats from their enclosures as they do not have to be caught and handled.
- 4) Cooper was not within the den when the staff members went to move him. Cooper was not cooperative with their efforts to encourage him to enter the cat den.
- 5) During the effort to move Cooper, he became agitated and ran headlong into the den and the sides of the enclosure. At one point during this period, the Plexiglas window pane of the carrier was broken. This window pane had been lifted up to open the window to allow Cooper entry into the carrier.
- 6) Drops of blood were first noted by the shelter staff members as Cooper was removed from the kennel.
- 7) Upon removal from the kennel, Cooper was controlled by one staff member while the second staff member administered the rabies vaccination and inserted the microchip. Cooper was then placed in the transport carrier provided by the rescue.
- 8) Given the stressed condition of Cooper, no further examination was done by the shelter personnel, nor was Cooper scanned to verify the microchip placement once he had been placed in the rescue's transport carrier. Shelter staff was concerned that, since Cooper was severely agitated, further handling or examination might exacerbate any injury and increase his stress level. The shelter staff knew that the rescue was transporting the cats directly to the veterinary clinic as soon as they picked them up.
- 9) Cooper was transported to the veterinary clinic by the rescue within 30 minutes of being placed in the transport carrier.
- 10) At the time the custody of Cooper was transferred to the rescue, the shelter staff explained to the rescue personnel their knowledge of the potential injury and the circumstances of the injury as well as the behavior and the agitated state of Cooper.

C. Based on review of the Medical Records and Statements from the Veterinarians:

- 1) On March 8, 2016 at approximately 3 PM, the rescue presented Cooper to Veterinary Clinic #1. The veterinarian visually checked Cooper, noted a mild swelling on the right side of his jaw and that his tongue was protruding a small amount. The veterinarian could not tell from the visual

examination that his jaw was broken. In order to give Cooper time to calm down, the veterinarian transferred him into an enclosure without handling him. No physical exam was conducted, nor were medications administered on this day.

2) On March 9, 2016, the veterinarian at Veterinary Clinic #1 sedated Cooper, neutered him and did an oral examination. The jaw was noted to be fractured; photographs were taken while Cooper was sedated; no radiographs were taken at this time as the clinic does not have the equipment to do so.

3) On March 10, 2016, the rescue transported Cooper to Veterinary Clinic #2. The veterinarian anesthetized Cooper, radiographed the jaw, surgically repaired the cranial mandibular fracture (fracture at the front of the jaw), administered pain-relief medication and an antibiotic and dispensed an oral antibiotic medication. The veterinarian referred the cat to a veterinary dental specialty practice for repair of the right caudal mandibular fracture (fracture near the angle of the jaw on the right side).

4) On March 11, 2016, the rescue transported Cooper to Veterinary Clinic #3. The veterinarian anesthetized the cat, ran a complete blood cell count (CBC) and general serum biochemistry analysis, conducted a complete oral examination, took full oral radiographs, placed orthodontic buttons and wires to stabilize the mandibular fractures, sutured the oral soft tissue defect, treated the oral cavity with a therapeutic laser, administered injectable antibiotics, anti-inflammatory medication and analgesics (pain-relief). The fragment of the caudal mandibular fracture was too small to reattach.

5) Veterinary review of the fractures show that the injury is most consistent with a recent accidental type injury.

Conclusions:

The statements of the shelter staff, rescue personnel and veterinarians, the veterinary medical records and the shelter records have been reviewed. This review concludes that as Cooper was provided with access to veterinary care within 30 minutes of injury. Therefore veterinary care was provided as required by 02 N. C. Administration Code .0210 (c). Consequently, the findings of this investigation do not substantiate a violation of the N. C. Animal Welfare Act. The investigation findings have been turned over to the Rowan County Manager's Office and the Rowan County Sheriff's Department.

Recommendations:

While no violations of the N. C. Animal Welfare Act were substantiated, AWS would make the following recommendations in hopes of minimizing the chances of recurrence of a similar incident:

- 1) The shelter should consider reviewing the shelter's policies and procedures pertaining to the handling of aggressive and/or unsocialized animals.
- 2) The shelter should consider reviewing the shelter's policies and procedures pertaining to the staff's discretion to forego or terminate procedures when they are concerned for the safety and wellbeing of themselves or the animal.

3) The shelter should consider reviewing the training and documentation of training of staff members.

Please feel free to contact me if you have any questions pertaining to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Patricia Norris, DVM, MS". The signature is fluid and cursive, with a long horizontal stroke at the end.

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

cc:

Dr. R. Douglas Meckes, DVM, State Veterinarian, NCDA&CS
Joseph Reardon, Assistant Commissioner, NCDA&CS
Tina Hlabse, General Counsel, NCDA&CS
Christopher McLennan, Assistant Attorney General