**Animal Welfare Section, NCDA&CS**

**Euthanasia Inspection Report**

**Name of business:** Northampton Co Animal Shelter

**City:** Jackson NC

**License number (if currently licensed):** 115

### Duties of a CET

- Prepare animals for euthanasia: Acceptable
- Properly record all data: Acceptable
- Security, controlled substances: Acceptable
- Supervise Prob. CET: N/A
- Properly euthanize: Acceptable
- Properly dispose of dead: Acceptable

### Euthanasia by Injection

- IC only on anesth. or sedated: Acceptable

### Euthanasia by CO

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

### Extraordinary methods

- >= 2 adults present when used: N/A

### Policy and procedure manual

- Current copy of AWA in manual: Unacceptable
- Current AVMA euth. in manual: Acceptable
- Current HSUS euth. in manual: Unacceptable
- Current AHA euth. in manual: Unacceptable
- List of approved euth. methods: Unacceptable
- List of CETs & methods: Unacceptable
- Contact info for DVM in PVC: Unacceptable
- Contact info for DVM care: Unacceptable
- List after hour euth. meth: Unacceptable
- Euth. methods if no CET present: Unacceptable
- Policy for verifying death: Unacceptable
- DEA certificate: Unacceptable
- MSDS sheets, chemical or gas: Unacceptable
- MSDS sheets, transf. or anesth.: Unacceptable
- Signs & symptoms, human: Unacceptable
- First aid information: Unacceptable
- MD contact information: Unacceptable

---

**Signature of inspector:** [Signature]  
**Date:** 10/12/09  
**Page:** 1 of 2  
**Signature of management:** [Signature]
ANIMAL WELFARE INSPECTION CONTINUATION PAGE

LICENSE #: 115

TYPE FACILITY: Animal Shelter (Private/Public) □ Boarding Kennel □ Pet Shop □ Public Auction □

BUSINESS NAME: Northampton Co Animal Shelter

OWNER:

ADDRESS:

TELEPHONE: (____) ______-__________

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Explanation of Inadequacy (circled items above) And Date Corrections Must Be Completed</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>I performed a Euthanasia inspection today. The shelter utilizes E6T for Euthanasia.</td>
</tr>
<tr>
<td></td>
<td>I observed a practical performed by the CET and the practical was within the Euthanasia Standards.</td>
</tr>
<tr>
<td></td>
<td>The manual was not complete, however, the county is in the process of completing.</td>
</tr>
<tr>
<td></td>
<td>The shelter does not keep the Euthanasia drugs at the shelter. The drugs are stored at Feltell Drug Store located at 3435 NC Hwy 305, Jackson NC. The drugs are returned to Feltell After Euthanasia. The phone number to Feltell is 252-534-6001. The county purchased the drugs from Lake Country Animal Hospital at PO Box 155, Roanoke Rapids, NC 27870. The phone number is 252-308-1887.</td>
</tr>
</tbody>
</table>

☐ APPROVED  ☐ CONDITIONALLY APPROVED  ☐ DISAPPROVED  Date: 1/10/09  Time: 11:45 AM

Inspector's Signature

Owner/Authorized Agent’s Signature

AW-2 Rev. 1/07

White= Office  Canary= Inspector  Pink= Owner

PAGE 2 OF 2