**Name of business:** Wayne County Adoption & Education Center  
**City:** Goldsboro  
**License number (if currently licensed):** 78  
**License type:** 44

<table>
<thead>
<tr>
<th>Task</th>
<th>Acceptable</th>
<th>N/A</th>
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</thead>
<tbody>
<tr>
<td>Prepare animals for euthanasia (.0418)</td>
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<tr>
<td>Properly record all data (.0418)</td>
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<tr>
<td>Security, controlled substances (.0418)</td>
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<tr>
<td>Supervise Prob. CET (.0418)</td>
<td>N/A</td>
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<tr>
<td>Properly euthanize (.0418)</td>
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<tr>
<td>Properly dispose of dead (.0418)</td>
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</tbody>
</table>

- IC only on anesth. or sedated (.0501)

- Use only bottled gas (.0601)
- Use only comm. mfd chamber (.0601)
- Only same species in chamber (.0601)
- In chamber for >= 20 min. (.0601)

- Not used on < 16 weeks (.0602)
- Not used on pregnant (.0602)
- Not used on near death (.0602)
- No live with dead (.0603)

- Animals separated (.0604)
- At least 1 viewport (.0605)
- Chamber in good order (.0605)
- Airtight seals present (.0605)

- Light shatterproof (.0605)
- Chamber sufficiently lit (.0605)
- Electrical explosion-proof (.0605)
- If inside, two CO monitors (.0605)

- Records of monthly inspection (.0606)
- Records of yearly inspection (.0606)
- Visual inspection by AWS

<table>
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<tbody>
<tr>
<td>Chamber cleaned b/t uses (.0607)</td>
<td>N/A</td>
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<tr>
<td>Operational guide &amp; or manual (.0608)</td>
<td>N/A</td>
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<tr>
<td>=&gt; 2 adults present when used (.0609)</td>
<td>N/A</td>
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</tbody>
</table>

**Reports of extraordinary euth.: (.0705)**

- Current copy of AWA in manual (.0803)
- Current AVMA euth. in manual (.0803)
- Current HSUS euth. in manual (.0803)
- Current AHA euth. in manual (.0803)

- List of approved euth. methods (.0803)
- List of CETs & methods (.0803)
- Contact info for DVM in PVC (.0803)
- Contact info for DVM care (.0803)

- List after hour euth. meth. (.0803)
- Euth. methods if no CET present (.0803)
- Policy for verifying death (.0803)
- Contact info for suppliers (.0803)

- DEA certificate (.0803)
- MSDS sheets, chemical or gas (.0803)
- MSDS sheets, tranq. or anesth. (.0803)
- Signs & symptoms, human (.0803)

- First aid information (.0803)
- MD contact information (.0803)

**Signature of inspector:** [Signature]  
**Date:** 9/29/09  
**Page:** 1 of 1  
**Signature of management:** [Signature]