NEWSLETTER

IDAHO BOARD OF VETERINARY MEDICINE

CERTIFIED EUTHANASIA TASK FORCE

Volume 2 Phone: (208) 332-8588 Fax: (208) 334-2170 Website: www.bovm.idaho.gov December 2011

CETF Mission Statement:

Under the direction of the Idaho Board of Veterinary Medicine, the CETF's mission is to promote humane euthanasia of homeless, injured, sick, and unwanted animals by implementing and regulating professional standards at Certified Euthanasia Agencies.

CURRENT CETF MEMBERS & STAFF

CETF President: Rena Carlson-Lammers, DVM

CETF Members: Tami McReynolds, DVM
Jo-Anne Dixon, DVM
Teresa Kasper-Sauer, DVM
Brenda Steinebach, CET
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The Certified Euthanasia Task Force (CETF) will periodically produce a newsletter specifically for Certified Euthanasia Technicians (CETs) employed by Certified Euthanasia Agencies (CEAs). Should you have topics that you would like to see addressed in the newsletter, please contact the Board office in Boise by phone at (208) 332-8588, email as above, fax at (208) 334-2170, or mail as listed above.

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NEW CETF APPOINTEES

At its October 24, 2011 meeting, the Board of Veterinary Medicine appointed two (2) new members to the CETF. The new members are Teresa Kasper-Sauer, DVM, and Stephen Buzzell, CET.

Dr. Kasper-Sauer is an additional CETF member from the Meridian area who will perform the Southwest Idaho Certified Euthanasia Agency (CEA) inspections once trained. This will save money for the euthanasia program, as previously, the Treasure Valley CEA inspections were being done by Dr. Tami McReynolds, which required travel from northern Idaho. Dr. Kasper-Sauer's three (3) year term began on October 24, 2011 and will end October 23, 2014. She is eligible to be reappointed by the Board, if desired.

Stephen Buzzell from Rexburg will replace Brenda Steinebach as the CET on the Certified Euthanasia Task Force, once her second term is completed on January 13, 2012. Ms. Steinebach was originally appointed January 14, 2008, and was reappointed by the Board to serve a second term. The CETF and Board sincerely thank Ms. Steinebach for her outstanding service. Her input as a working CET has been invaluable to the veterinarian members of the CETF.

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IDAHO BOARD OF PHARMACY

Last year, the Idaho Board of Pharmacy (IBOP) implemented a statute change that required all applicants for controlled substance registrations to undergo a fingerprint-based criminal background check. This caused great consternation among Certified Euthanasia Technicians (CETs), because this duplicated the background check required by the Idaho Board of Veterinary Medicine.

We are happy to report that the IBOP has conducted a legal review of its new statute, and determined that if an individual has been subjected to a background check by his or her certifying agency, the IBOP will not have to require an additional background check. This change in IBOP policy will save time and money for Certified Euthanasia Agencies when new CETs are hired.

AGENCY OCCUPATIONAL SAFETY PLANS

As you are aware, animals can be unpredictable and even with the best planning, accidents can occur when performing euthanasia. The CETF strongly recommends that each Certified Euthanasia Agency (CEA) have a written plan for dealing with safety issues. These issues can include animal bites and scratches, needle punctures, environmental issues such as slippery floors, and accidental drug injections.

The Board's rules regarding animal euthanasia state that human safety is always the top concern. Having a written safety plan and reviewing it often with all staff can raise awareness and help prevent injuries. The safety plan should also provide immediate information (phone number, address, and driving directions) about the nearest medical facility in the event an employee is injured.

Prior planning, written protocols, and methodical step-by-step procedures make a difference for human safety. If you don't already have a safety plan in place, please consider developing one.

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FEE INCREASE SURVEY

The Board has proposed fee increases for review during the 2012 legislative session. To determine how much support the Board has for the proposed increases, the Board conducted a survey by email and mail prior to setting the final amounts; 61% of all CETs responded to the survey. The results are as follows:

I support:	**47%**
I oppose:	**32%**
I am indifferent:	**21%**

Based on the survey results, the Board will not revise the proposed changes. Certified Euthanasia Agency (CEA) renewals will increase from $100 to $200 annually. Certified Euthanasia Technician (CET) renewals will increase from $50 to $100 annually. The late fee for both CEAs and CETs will double from $25 to $50. Every third year when a CET must recertify in euthanasia, the training and renewal fee will be $150.

The certified euthanasia program does not earn enough money to cover its expenses. This means that Idaho-licensed veterinarians are subsidizing the program through their licensing fees. The Board receives no tax dollars to support any of its programs; the programs are solely supported by the licensing and certification fees paid by veterinarians, certified veterinary technicians, CEAs, and CETs. This increase in fees will shift some of the financial burden back to the cities, counties, and non-profits that benefit from the euthanasia program.

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SHELTER SURRENDERS

An additional survey was aimed at veterinarians; it regarded removal of the written release requirement when patient medical records are transferred. Several CETs responded to this survey to indicate they had great difficulty obtaining patient information from veterinarians after an animal has been surrendered to the animal shelter.

Veterinary medical records are considered to be confidential, and Board rule requires that this confidentiality be maintained. This means that when veterinary care is provided to an animal, and the animal changes owners, the new owner has no legal right to obtain the veterinary medical records generated prior to his or her ownership. This creates a problem in shelter surrenders when staff needs to know the vaccination and spay/neuter status of a surrendered animal.

The Board recommends that each shelter develop a surrender form that also includes language to act as a release for veterinary patient medical information. If a veterinarian is presented with a signed surrender form that also indicates the prior owner gave permission for the shelter to obtain a copy of the patient medical record when the animal was owned by that individual, the veterinarian must honor the request.

The Board cannot provide sample forms, and recommends that you work with the attorney for your shelter or animal control agency to develop such a form. The form revision is a suggestion in the event your shelter has trouble obtaining the necessary information from the surrendering owner's veterinarian.

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DRUG STORAGE TEMPERATURE

All stored drugs must have their environment controlled to ensure they are not subjected to high or low temperatures outside the manufacturer's recommendations. Lack of temperature control affects a drug's performance and chemical stability; this can cause the drug to exhibit a different effect than normally expected.

FINAL APPROVED DRUG LISTS

View the current approved drugs for euthanasia, pre-euthanasia sedation, and remote chemical capture at the following web address:
http://bovm.idaho.gov/cetf/procedures.html

Note: Remote chemical capture drugs are only available to Certified Euthanasia Technicians classified as law enforcement personnel.

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DRUG LOG/LABELING TRAINING

An issue was discovered during Certified Euthanasia Technician (CET) training and recertification courses. The instructors have found that in many cases, recertifying CETs who are not the Lead CET for their agency have forgotten how to keep shipment and weekly records, and how to label bottles when they are initially received. These CETs are well-versed in how to fill out the daily use logs.

Please ensure that all CETs at your agency remain competent regarding shipment and weekly records, and initial drug bottle labeling. You never know when the Lead CET might quit or be off work for an extended time, and it is important that the other CETs know how to keep all required drug logs, and label drugs when they are received.

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CORRECTING DRUG LOG ERRORS

Occasionally, a CET will find that an error has been made in a drug log, and a correction is needed. If you make an error, draw a single line through the error, write the correct information, and then initial the correction. If you have a witness available, the witness can also initial the correction. It is never appropriate to use correction tape, white-out, or any other correction method that covers the error and makes it unreadable.

If you have an odd situation, please write an explanation in the drug log. This will ensure that the drug log can act as your memory in the event the situation is questioned. Many times, we think that we will remember what happened, but as time passes, memories can become faint.

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2011 RULE CHANGES IMPLEMENTED

The CETF/Board submitted rule changes to the 2011 Legislature that were approved. The rule changes became effective on April 7, 2011 as follows:

Rule 200: The term of service for CETF members was increased from two (2) years to three (3) years. The increased term length will address the fact that it takes a great deal of time and effort for CETF members to achieve clear comprehension of this very complex program.

Rule 201: This change clarified the three (3) specific categories of approved euthanasia, pre-euthanasia sedation, and remote chemical capture restraint drugs, and restricts the use of remote chemical capture to Certified Euthanasia Agencies (CEAs) and Certified Euthanasia Technicians (CETs) who are classified as law enforcement agencies and law enforcement personnel.

In addition, the use of carbon monoxide-induced euthanasia chambers was removed as an acceptable method of euthanasia. In a state such as Idaho where euthanasia–by–injection is authorized at CEAs, and pre-euthanasia sedation can be used for difficult animals, there is no need for the less humane method of carbon-monoxide gas chambers.

Rule 205: The CETF revised the wording in 02.a to indicate that CETs will demonstrate efficiency in euthanasia techniques, rather than only venous access, as both intraperitoneal and intracardiac injections may be used in certain circumstances.

Further revisions were made to Rule 205 that allow CETs to determine the appropriate method of euthanasia for each specific animal based on the animal's age, physical condition, and temperament, rather than mandating IV injections in nearly all circumstances. Unnecessary wording regarding injections and specific time periods for animals to become unconscious were also removed. The reinstatement requirements for terminated CETs were also clarified.

Finally, Rule 205 was revised to require that law enforcement CETs who use remote chemical capture recertify every third year. Law enforcement CETs using chemical capture will have to recertify in both euthanasia and remote chemical capture every third year.

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INTRACARDIAC INJECTIONS

Under certain special circumstances, an intracardiac (IC) injection may be an appropriate choice for euthanizing an animal. However, Board rule 205.02.a.ii.(3) allows an IC injection to be performed only on an anesthetized animal. IC injections are extremely painful for the animal; this is why the animal must be under anesthesia and completely unconscious before this type of injection is performed.

IC injections are difficult, as you are rarely in a position of having an anesthetized animal to practice on. The CETF recommends that you practice IC injections on dead animals that have been euthanized. An IC injection can be performed without a handler.

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COMMON CEA INSPECTION DEFICIENCIES

The 2011 Certified Euthanasia Agency (CEA) inspections are currently being conducted. Following is a list of common deficiencies:

- Expired drugs in inventory
- Disinfectant bottles not labeled with contents and concentration
- No HSUS and Idaho adjunct manuals on site
- Drug bottle labeling does not show name and address of the agency owning the drug
- Drug hazard stickers on drug bottles are missing
- Main inventory log errors
- Weekly drug log errors
- Date drug received from vendor missing
- Date drug prepared missing

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INTRODUCING DR. TERESA KASPER-SAUER

Teresa Kasper-Sauer grew up on a small farm outside Phoenix, Arizona. She earned her BS in Animal Health Science at University of Arizona and her DVM degree at Washington State University. After several years practicing in Phoenix, she moved with her husband to Meridian in 1995.

She has been one of the staff veterinarians at Intermountain Pet Hospital since 2000. She has been teaching the exotic small mammal segment at the Brown-Mackie School of Veterinary Technology since August 2010. Her hobbies include Jazzercise, cross country skiing, hiking, and driving her teenage son around. Her non-human household members include a gentle old Lab cross, two bossy tabby cats and an ever-circulating collection of rodents (not because of the cats, although they would offer...)

She accepts and celebrates that death is a part of life, and that part of what we can do as humans is make that transition as calm and peaceful as possible. It's with a mixture of sadness and sense of accomplishment when an owner of a recently euthanized pet states that they wish humans could die with the peace a "good" euthanasia offers.

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INTRODUCING STEPHEN BUZZELL, CET

A little about me and why I would want to serve on the Certified Euthanasia Task Force (CETF), for a first assignment this is a hard one. It is not hard because I don't know myself or what I can offer, but in the words of my chief of police, "Buzzell, going to you with a simple question is like looking up how to spell a word by using the encyclopedia." I am a person who likes to acquire knowledge and share it. I follow a motto of leave everything better than how you found it. I am a dork through and through, from my collection of role-playing books to my liquid cooled gaming super computer. I am someone who cares about animals and has many, probably too many, pets. So in a few sentences, that is me.

I started as an "Everything the Other Departments Didn't Want to Do Officer" (shortened down to 'Animal Control' so it fit on the uniform) in November of 2003. I was handed a uniform, control pole, keys to the truck and shelter, and given the extensive 15 second training course, the problem was not that this was considered sufficient, it was that no one really understood what the job needed to be able to offer more help. I have spent the last eight years searching out training, learning by a lot of mistakes and working on changing the mindset of an entire community about what an animal control program is.

So why did I choose to serve on the CETF. Maybe the best answer to this is a question; which is a "better" shelter, one that euthanizes 90% of its animals but the remaining ones are all healthy, happy and have room to move, or one that euthanizes 10% of its animals but of the remaining ones many are sick, and packed three to a cage? The answer is not simple because each has

traits that are desirable and depending upon who you ask the answer might change a lot, even within the same organization. I think we would all agree that if you didn't have to pick one of the two extremes the answer was in the middle somewhere, and this I why I want to serve. The tools to reaching a middle ground are already in your hands. The key is how you choose to implement them and view them, is euthanasia the secret to saving lives, or is it simply something that must be done.

We see the results of not spaying and neutering every day, we know that each animal that comes into a shelter might only have 50 / 50 chances. Treating Euthanasia like it is the enemy, only used as a last resort may actually be dropping those chances to 70 / 30 instead of saving the animal. Many times shelters are like a business that has grown too fast, we have all the product anyone could want on our shelves, every size, shape and color, It's all good quality, our prices are great, but we don't have the sales figures to justify the product we have on hand (and it's not like our suppliers are running low), we are spending more time working on inventory than working on sales. In business terms it is easy to see the problem, in terms of that we do this job because we love animals and want to save them it is a lot harder to see.

Through my service I want to show us that when practiced right, euthanasia is so much more humane than many of the other ways an animal might pass on and that as one of our tools it can help save lives over time. And last, to remind us that a dictionary works fine and we shouldn't use an encyclopedia to look up the spelling of a word, because knowing the right tool to use makes a big difference.

Stephen Buzzell, CET
Rexburg Animal Control
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THE HUMAN-ANIMAL BOND

The Valley of Plenty (Emmett) draws many people with its quiet and laid back setting. Over the years of living here, I have found people to be fascinating, especially when it comes to the human-animal bond.

In 1967 down the street by what is now the middle school lived an older couple that walked past our house every day with a Chihuahua. In the cold, he sported a tiny sweater and marched along seemingly happy to be in the company of his keepers. The couple always waved as they went by my house and would often stop to talk a moment. Then a few months later, they didn't come around the block anymore.

I asked another neighbor and she said the Chihuahua died and the couple had given up walking. Seemed the little one begged for a walk by dragging his leash to the door and they felt bad for him and relented with a walk. The walk not only was a benefit to the dog but the aging couple as well. In some of my dog travels looking for a family pet, I came across a Chihuahua whose owner had died. I explained my thoughts to the relatives who allowed me to take the little fella for a visit to the couple. At first, they just didn't think they wanted another dog because they missed their little friend, but once they saw him it was a go!

So now, the couple walked once more and I met new friends through a tiny little dog. There is something about helping your fellow human that brings great satisfaction to the heart and soothes the mind. I read somewhere that it even boosts our immune system to have a pet and that our emotions actually affect our health. Many care facilities have "pets" for the patients to interact with, even a fish aquarium where one can sit and watch the fish. My Guide Dog puppies in training have been to these facilities many times and are welcomed. All dog lovers have a dog story to tell about the dog they remember as a child or a special hunter or the faithful companion.

So animals in our lives have been around a long, long time and in particular, the dog. It so merits the name that Linnaeus gave it, "faithful dog"- canis familiaris. So what is the dog? Such a fascination! Physically we have so profoundly transformed this animal, and psychically we have so greatly influenced it, that any attempt to distinguish between its natural characteristics and those it has acquired through living with us is a difficult matter indeed.

All of the dogs, wolves, foxes, and jackals are carnivores, with some very "like" characteristics, the same number of teeth for biting, gnawing, and chewing. They have the propensity to live in packs. So whatever the background, I shall leave the history to the historians when it comes to the distant ancestry of the present day dog. I do know that animals in general, from horses and cattle to dogs and cats have impacted the lives of humans.

Brenda Steinebach, CET