



**STATE OF FLORIDA
DEPARTMENT OF HEALTH
INVESTIGATIVE SERVICES**

**Florida
HEALTH**

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**MODIFIED CLASS II INSTITUTIONAL PERMIT
ANIMAL CONTROL SHELTER**

File # _____

ROUTINE CHANGE LOC NEW CURRENTLY NOT OPERATING CHANGE OWNER

Insp # _____

INSPECTION AUTHORITY - CHAPTER 465.017, CHAPTER 893.09 AND CHAPTER 456, FLORIDA STATUTES

NAME OF ANIMAL SHELTER			PERMIT NUMBER			DATE OF INSPECTION			
DOING BUSINESS AS			DEA NUMBER			ON-SITE MANAGER OF SHELTER			
STREET ADDRESS			TELEPHONE #		EXT.				
CITY		COUNTY		STATE/ZIP					
HOURS OF OPERATION									
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday		
Open									
Close									
SATISFACTORY								YES	NO
1	Current Modified Class II Institutional Pharmacy permit [465.019(2) (c), F.S.]						<input type="checkbox"/>	<input type="checkbox"/>	
2	Board of Pharmacy Office notified of on-site manager change within 10 days. [64B16-29.002(6), F.A.C.]						<input type="checkbox"/>	<input type="checkbox"/>	
3	Current DEA registration for II N and III N Controlled Substances. [21 CFR1301.11]						<input type="checkbox"/>	<input type="checkbox"/>	
4	Controlled substance inventory taken on biennial basis and available for inspection [893.07 (1)(a) , F.S.]						<input type="checkbox"/>	<input type="checkbox"/>	
5	Controlled substance records readily retrievable. [893.07, F.S.]						<input type="checkbox"/>	<input type="checkbox"/>	
6	DEA 222 order forms properly completed. [893.07, F.S.]						<input type="checkbox"/>	<input type="checkbox"/>	
7	Purchase records are maintained on premises and separate from administrative records. [64B16-29.004, F.A.C.] [828.055(1), F.S.]						<input type="checkbox"/>	<input type="checkbox"/>	
8	Storage of medications listed in [64B16-29.001, F.A.C.] and DEA 222's located within a locked room.						<input type="checkbox"/>	<input type="checkbox"/>	
9	Medications listed in rule [64B16-29.001, F.A.C.] only being used for euthanizing or chemically immobilizing animals.						<input type="checkbox"/>	<input type="checkbox"/>	
10	Medications listed in rule [64B16-29.001, F.A.C.] are the only medicinal drugs maintained on the premises.						<input type="checkbox"/>	<input type="checkbox"/>	
11	Records maintained for 4 years. [465.022(12)(b), F.S.] [64B16-29.004, F.A.C.]						<input type="checkbox"/>	<input type="checkbox"/>	
12	Shelter administration records show date of use, identification of the animal, amount of drug used, and signature of the person administering medication for euthanizing or chemically immobilizing animals. [64B16-29.004, F.A.C.]						<input type="checkbox"/>	<input type="checkbox"/>	
13	Administration and purchase records of the shelter reviewed and signed by on-site manager at least monthly. [64B16-29.004, F.A.C.]						<input type="checkbox"/>	<input type="checkbox"/>	
14	On-site manager has reported to the Department of Health any significant loss, theft, or inventory shortage of such prescription drugs. [828.055(3)(c), F.S.]						<input type="checkbox"/>	<input type="checkbox"/>	
15	Record of theft or significant loss of all controlled substances is being maintained and is being reported to the sheriff within 24 hours of discovery. [893.07(5), F.S.] [465.015, F.S.]						<input type="checkbox"/>	<input type="checkbox"/>	
<p>64B16-29.001, F.A.C. Definition. An "animal control shelter" is a county or municipal animal control agency or Humane Society registered with the Secretary of State which holds a modified Class II Institutional Pharmacy permit issued by the Department of Health pursuant to certification of compliance with Rule 64B16-29.002, F.A.C., by the Board of Pharmacy. An animal control shelter is issued a pharmacy permit for the sole purpose of obtaining the drugs, sodium pentobarbital and sodium pentobarbital with lidocaine, tiletamine hydrochloride, alone or combined with zolazepam (including Telazol), xylazine (including Rompun), ketamine, acepromazine maleate (also acetylpromazine, and including Atravet or Acezine), alone or combined with etorphine (including Immobilon), and yohimbine hydrochloride, alone or combined with atipamezole (including Antisedan), for euthanization or chemical immobilization of animals within their lawful possession.</p> <p>64B16-29.002(6), F.A.C. General Requirements Each animal control shelter permittee shall designate an on-site manager of the shelter. The on-site manager and permittee shall notify the department within ten (10) days of any change in the on-site manager of the shelter.</p> <p>64B16-29.004, F.A.C. Records Animal control shelter permittees shall maintain records of purchases and administration of drugs for euthanization or chemical immobilization for a period of no less than four (4) years. Records of administration shall contain: (1) The date of use; (2) Identification of the animal; (3) The amount of the drug used; (4) The signature of the person administering the drug; (5) The signature of the on-site manager certifying the accuracy of the administration of sodium pentobarbital and sodium pentobarbital with lidocaine not less than once per month; and (6) The signature of the on-site manager certifying to the accuracy of the records. These records are subject to audit by the Drug Enforcement Administration or authorized employees of the Department to determine adequacy, accuracy, and validity of the record keeping.</p> <p>465.022 (12)(b), F.S. The board shall adopt rules that require the keeping of such records of prescription drugs as are necessary for the protection of public health, safety, and welfare. (b) The records must be maintained for 4 years after the creation or receipt of the record, whichever is later.</p> <p>64B16-29.005, F.A.C. Storage Sodium pentobarbital and sodium pentobarbital with lidocaine shall be stored in a safe place. At a minimum, this shall require that the drugs be kept in a securely locked cabinet within a locked storage room. Schedule II order forms are to be stored under the same conditions. Records of purchases of sodium pentobarbital and sodium pentobarbital with lidocaine shall be maintained in a separate file from the records of administration. The records of purchases and administration shall be maintained at the location.</p>									
Remarks:									

I have read and have had this inspection report and the laws and regulations concerned herein explained, and do affirm that the information given herein is true and correct to the best of my knowledge. I have received a copy of the Licensee Bill of Rights.

PRINT NAME _____ ID _____

Institutional Representative _____
INV 363 Revised 9/13, 10/12, 9/12, 12/11, 03/11, 01/07, 12/02

Date _____

Investigator/Sr. Pharmacist Signature _____