

Euthanasia Checklist

Euthanasia Date 7-31-25 ID # 41379 Custody verified (Initials) [redacted]

Sedative: Acepromazine (Initials) [redacted]  
Oral (strength      mg) # of tablets       
Inj. 10mg/ml 130 ml Route: IM

Sodium Pen (Fatal Plus) Initials [redacted]  
3 ml Route: IV IP

Determination of Death

- 5 minutes post injection
  - Lack of heartbeat-stethoscope (Initials) [redacted]
  - Lack of heartbeat-palpitation (Initials)
  - Lack of respiration-stethoscope (Initials)
  - Lack of respiration-palpitation (Initials)
  - Lack of respiration-visual (Initials)
  - Lack of corneal reflex (Initials)
  - Lack of toe-pinch reflex (Initials)
  - Lack of capillary refill (Initials) [redacted]
- 30 minutes post injection
  - Lack of heartbeat-stethoscope (Initials) [redacted]
  - Lack of heartbeat-palpitation (Initials)
  - Lack of respiration-stethoscope (Initials)
  - Lack of respiration-palpitation (Initials)
  - Lack of respiration-visual (Initials)
  - Lack of corneal reflex (Initials)
  - Lack of toe-pinch reflex (Initials)
  - Lack of capillary refill (Initials) [redacted]

City of Danville  
Animal Control Officer / Public Animal Shelter

ANIMAL CUSTODY RECORD

ANIMAL ID

41379

CUSTODY DATE  
MM/DD/YY

7-31-25

TIME

12

AM  
PM

REASON FOR CUSTODY (mark appropriate box)

LOCATION WHERE CUSTODY WAS TAKEN

Stray / At Large  Owner Surrender  Seized  Bite Case Quarantine

Transfer from Another Releasing Agency  Virginia  Other:  
Name:  Out-of-State

DAHS

OWNER'S NAME & ADDRESS (if known)

ADDITIONAL INFORMATION

Owner ask us to euth

ANIMAL DESCRIPTION

SPECIES

BREED

COLOR / MARKINGS

SEX:  Male  Female Altered: Y N Unk

Feline  
 Canine

Pomeranian

BLACK  
white

Approximate AGE: 15  YR  MO

Approximate WEIGHT: 12  LB

OTHER:

ANIMAL IDENTIFICATION (Check for all types on animal and complete all boxes. If not found, write NO)

License Tag  
(Number - Details)

Rabies Tag  
(Number - Details)

Tattoo  
(Describe)

Collar  
(Describe - Color, Type, etc.)

Microchip or Other Identification  
(Describe - Details)

None

None

None

None

Scan: 7-31-25  
Scan: none out

CUSTODY RECORD PREPARED BY

Signature

DATE: (MM/DD/YY)

7-31-25

RIGHTFUL OWNER SURRENDER STATEMENT

I am the rightful owner of this animal. I surrender all property rights in this animal. No other person has a right of property in this animal. I understand that this animal may be immediately euthanized or otherwise disposed in accordance with Virginia Code, Title 3.2, Ch. 65. If I want the animal back, I will follow adoption procedures.

SIGNATURE

DISPOSITION OF ANIMAL

HOLDING PERIOD EXPIRES ON (Date):

7-31-25

DATE: (MM/DD/YY)

7-31-25

FINAL MICROCHIP SCAN PERFORMED BY (Initial):

Returned to Owner

Adopted

Euthanized

Died in Custody

Transferred to Another Virginia Releasing Agency (name of agency)

Transferred to Out-of-State Releasing Agency (name of agency)

Other

7-31-25

Did you contact another shelter?

Why did they decline to accept?