



# Oregon Veterinary Medical Examining Board

## CERTIFIED EUTHANASIA TECHNICIAN APPLICATION

### How to Apply for Internship and Certification

OAR 875-040-0010 Certification of Technicians

(1) Applicants must first apply as a CET Intern in order to obtain the training required for a permanent CET certificate. CET Interns may not act independently but only under the immediate supervision of a CET or Oregon licensed veterinarian. The intern certificate will expire within one year of issue date and does not renew.

(a) The Board may conduct background checks on applicants and certificate holders. Applicants and certificate holders shall be required to provide any police and court records for any arrests and convictions.

(b) The applicant must be an employee or a volunteer at a humane society or animal control agency.

(c) Pay an initial certification fee of \$25.00.

(2) Upon completion of the internship's training, the intern may apply for a permanent certificate.

(3) In order for a person to become a permanent Certified Euthanasia Technician (CET), an application must include the following, within the last 12 months:

(a) 15 hours of documented observation and hands-on training done with a licensed DVM or CET and exhibits proficiency when assessed within their organization performing euthanasia of domestic pets and other animals when observed by a licensed veterinarian; or

(b) Completion of an approved euthanasia course and exhibits proficiency when assessed within their organization performing euthanasia of domestic pets and other animals when observed by a licensed veterinarian; and

(c) Submission of an evaluation verification form attesting that the applicant has satisfactorily completed the internship. The supervising, Oregon licensed, veterinarian shall submit this form.

(4) Upon separation from an organization, a CET will not euthanize animals until the person is employed by or is a volunteer at another approved agency, completed specific training in association with that agency, and the CET has notified the Board.

(a) Certificates are valid only for the agency at which the person is currently working.

(b) The CET will notify the Board within 10 days of their separation from their organization.

(5) If a CET is reemployed or volunteers within 12 months of holding a CET license, the CET may apply to the Board for reactivation of their certification. After a 12-month lapse, the person must become recertified as described in (1).

(6) CET certificate holders will need to be recertified every 5 years in the form of a proficiency assessment done by an Oregon licensed veterinarian and submitted to the Board with their certificate renewal.

(7) All CET certificates expire on October 31st of each year and are in effect for one calendar year.

(8) Certificate renewal fee is \$15.

(9) Annual verification of employment or volunteer status must come directly from the organization the CET is employed or volunteers with.

(10) Failure to renew or provide verification of employment or volunteer status will result in a lapse and euthanasia duties may not be conducted until the certificate is reinstated.

(11) The Board may suspend, revoke, or otherwise discipline a CET Intern or permanent CET certificate holder for unprofessional conduct or non-compliance with applicable Board statutes and rules.

#### **Fees are NOT REFUNDABLE**

Make sure you meet all eligibility criteria before submitting this application with \$25 check or MO to:

**Oregon Veterinary Medical Examining Board**  
800 NE Oregon St., Ste. 407  
Portland, OR 97232

Contact the Board if you have any questions. 971-673-0224 or [ovmeb.info@state.or.us](mailto:ovmeb.info@state.or.us)

## CERTIFIED EUTHANASIA TECHNICIAN

# APPLICATION

## 1 DEMOGRAPHIC INFORMATION

Certification - \$25 (\_\_\_\_)

Name: _____	Social Security #: _____
Mailing Address (street, city, state, zip): _____	
Phone: _____ Email: _____	Birthdate: _____

## 2 BACKGROUND (You must answer each of the following questions.)

Are you or have you ever been certified as a CET, CVT, RVT or AHT in another state or country?..... Yes No

Are you or have you ever been licensed in another profession in any other state or country?..... Yes No

→ If you answered "yes" to either of the above, you must ask each jurisdiction to send a letter of license verification and status directly to the Oregon Veterinary Board.

Type of License	State	License #	Date Issued
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever been convicted of a felony or misdemeanor?..... Yes No

Is there any reason you cannot safely perform the duties of a euthanasia technician?..... Yes No

Have you ever had a CET, CVT or other professional license suspended or revoked or been issued other disciplinary action in any state or country?..... Yes No

Are there facts not disclosed by your previous answers that might bear adversely on your eligibility and competence to practice as a euthanasia technician?..... Yes No

**If any answers above are "yes" you must provide explanations on a separate sheet.  
Failure to provide explanations could result in denial of application.**

Do you agree that, if there are any other matter(s) that occur hereafter, before you receive your certification as a euthanasia technician, which might adversely bear on your eligibility to perform euthanasia technology duties, such matter(s) will be disclosed immediately to the Oregon Veterinary Medical Examining Board?..... Yes No

Mail application with check or money order to: OVMEB 800 NE Oregon St., Ste. 407 Portland, OR 97232

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**3**

**AFFIDAVIT OF APPLICANT**

I, \_\_\_\_\_, depose and say that all statements herein and photograph are true and correct, and that I am the person described and identified on this Application Form for the Euthanasia Technician Certification.

Signature: \_\_\_\_\_

**NOTARY PUBLIC:**

In the State of \_\_\_\_\_, County of \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Signed \_\_\_\_\_

Commission expires: \_\_\_\_\_



(NOTARY SEAL HERE)

**EUTHANASIA TECHNICIAN EVALUATION**

Agency: \_\_\_\_\_

Applicant Name:	Date of Birth:	Internship License #
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Home Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number(s) & Email Address \_\_\_\_\_

**Euthanasia Technician Standards**

	Pass	Fail	Comments
Animal Handling			
IV Injections			
IP Injections			
IC Injections			
Permitted Injections			
Aspirates			
Cap kept on needle?			
Needle size appropriate?			
Correct Dosage?			
Animals Supported?			
Terminal Signs			
Verification of Death			

Veterinarian Who Conducted Training (please print) \_\_\_\_\_

Submit proof of completion of the required 15 hours of documented observed hands on training or an approved euthanasia course.

**I certify that I trained the above candidate pursuant to OAR 875-040-0000 and that the candidate satisfactorily meets the above competencies.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Submit this form and licensing fee to the OVMEB via the self-serve portal.

## **Division 40 CERTIFIED EUTHANASIA TECHNICIANS**

### **OAR 875-040-0000 Certified Euthanasia Technicians (CETs)**

- (1) Only licensed veterinarians and Certified Euthanasia Technicians (CETs) may perform euthanasia or administer sodium pentobarbital. Under ORS 609.405, lethal injection of sodium pentobarbital or other substance(s) approved by the Oregon State Veterinary Medical Examining Board are the only approved methods for the euthanasia of injured, sick, homeless domestic pets and other animals by an animal control agency, humane society, or subcontractor thereof.
- (2) For the euthanasia process, CETs may administer only the following drugs:
  - (a) Acepromazine (DEA Non-scheduled).
  - (b) Butorphanol (DEA Schedule IV).
  - (c) Diazepam/Midazolam (DEA Schedule IV).
  - (d) Ketamine (DEA Schedule III).
  - (e) Medetomidine (DEA Non-scheduled).
  - (f) Sodium pentobarbital.
  - (g) Tiletamine and Zolazepam (Telazol) (DEA Schedule III).
  - (h) Xylazine (DEA Non-scheduled).
- (3) CETs shall administer sedation and euthanasia drugs in conformance with any of these guidelines:
  - (a) Association of Shelter Veterinarians (ASV) Guidelines for Standards of Care in Animal Shelters (2014 edition).
  - (b) Euthanasia of Shelter Animals, American Veterinary Medical Association (AVMA) Guidelines on Euthanasia of Animals (2020 edition).
  - (c) AVMA Guidelines on Depopulation of Animals (2019 edition).
  - (d) The Humane Society of the United States Euthanasia Reference Manual (2013 edition).
- (4) The references above shall be used in conjunction with sedations protocols created by a veterinarian licensed with the OVMEB.
- (5) Unprofessional conduct for CETs includes, but is not limited to:
  - (a) Handling animals in an inhumane manner or with unnecessary force.
  - (b) Theft or diversion of legend or controlled drugs.
  - (c) Improper use of sedation or euthanasia drugs.
  - (d) Non-compliance with euthanasia protocols or guidelines.
  - (e) Non-compliance with DEA regulations.
  - (f) Non-compliance with proper drug storage.
  - (g) Performing euthanasia or sedation outside the scope of the CET certification.
  - (h) Any conduct described in ORS 686.130.
  - (i) Gross negligence in the performance of duties as a CET.
  - (j) A pattern, practice, or continuous course of negligence, ignorance, incompetence or inefficiency in practice as a CET. The incidents may be dissimilar.
  - (k) Diagnosing, prescribing, or performing other activities that may be done only by a licensed veterinarian.
  - (l) Failure to respond or appear as requested, without good cause, within the time required by the Board.
  - (m) Failure to comply with any rule or order of the Board or as required by OAR 875-005-0010.
  - (n) Altering or falsifying medical records.
  - (o) Making a misrepresentation or omission on a certificate renewal application.
  - (p) Violations of veterinary laws in other states that would constitute violations of Oregon law.
  - (q) Violations of other laws that relate to the practice of veterinary medicine.
  - (r) Failure without good cause to notify the Board within 15 days of a change in personal or business address and contact information.
  - (s) Providing false, misleading, or deceptive information to the Board.
  - (t) Failure to report unprofessional or prohibited conduct as described in ORS 676.150.