

## Talking points for HB2650

Good afternoon Chair Bynum and esteemed members of the committee, thank you for having a hearing on HB2650. My name is Cpl Colleen Neubert and I am a K9 Handler with Morrow County Sheriff's Office. I have handled a dog for about 16 years in the military and with the Sheriff's Office. My current partner is a 3.5-year-old Dutch Shepherd named Telly. She is a dual purpose K9, trained in patrol, which aids my county in finding suspects and lost citizens, as well as in helping me take suspects into custody when I have no back up. She is also trained in narcotics detection which is exactly what it sounds like. She is the only K9 in our county. We spend many, many hours together working and training. She is a valued member of our department who is good at her job and most importantly she is my friend.

My patrol area is very large, rural and can easily be over an hour away from veterinary care in many places. We have worked hard to increase staffing but it is still not unusual to be the only Deputy on duty so I depend greatly for Telly's function as my back up until an adjoining agency can send someone. This can be from 10 minutes to an hour depending on who is coming and where I am. Often K9 works the night hours when a vet clinic is not open, for example my current shift is week-end nights, 2000-0600.

We do not have a 24-hour clinic in our county or the adjoining county. Currently if there is an emergency you call your vet first and if they answer and are in the area you go there otherwise dispatch goes down the list of area vets to find one that will come in. Normally this works and a vet is found/available but it can take time.

I carry quite a few first aid supplies for Telly, but I am not a vet and my skills are somewhat limited. I patrol in a dodge Durango with a 2/3 1/3 configuration as we are a smaller agency and must be able to transport a prisoner. She and I would not fit in her compartment, if the worst occurred stabilizing her until we get to a vet could be extremely difficult. The ability for her to be transported by EMS to the nearest available vet could mean the difference between life and death for her, especially at the farther edges of our county.

Common field injuries include but are not limited to punctures by sticks, wire injuries, knife and gunshot injuries, blunt trauma and fracture. Her Narcotic

detection skills have their own hazards. While we try to prevent as much as possible sometimes things happen.

I have seen the proposed amendment to the bill and would ask the Oregon AVMA to consider adding Narcan dosing for opiate exposures and for those of us who work in God's country, needle chest decompression for pneumo-thorax into the list of allowed things. While most of the police dogs are lucky to be close to a vet, Telly and many rural dogs are not and may be well over an hour out from a vet. Thankfully it is not an extremely common occurrence but does need to be dealt with in a timely manner should it occur and could be done in the back of the ambulance while under way.

Thank you again very much for giving this bill a hearing and our police dogs a fighting chance if they are injured in the line of duty. Does anyone have any questions for me?