USDA

United States Department of Agriculture

Animal and Plant Health Inspection Service

Policy and Program Development

Environmental and Risk Analysis Services, Unit 149
4700 River Road
Riverdale, MD 20737

ENQL 7-1 CY11
PERMANENT
Retire 6/16

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June 6, 2011

Document Processing Desk [6(a)(2)]
Office of Pesticide Programs (7504P)
U.S. Environmental Protection Agency
Ariel Rios Building
1200 Pennsylvania Avenue, N.W.
Washington, DC 20460-0001

ATTN: Norman Spurling (7502P)

SUBJECT: **FIFRA, Section 6(a)(2) report: single adverse effect incident dated February 20, 2011 for the reporting period ending April 30, 2011**

The Animal and Plant Health Inspection Service (APHIS) is submitting an adverse effects incident report in compliance with the reporting requirements of section 6(a)(2) of the Federal Insecticide, Fungicide and Rodenticide Act. This report is for the following pesticide product for the reporting period ending April 30, 2011:

EPA Reg. No. 56228-15	M-44 Cyanide Capsules
Active Ingredient: Sodium Cyanide	CAS No. 143-33-9

Incident Category	No. of Incidents
D-A	1

Details of the incident, occurring on February 20, 2011, were reported to WS Operational Support Staff on May 31, 2011. Please direct any questions pertaining to this incident to Ann Nasr at (301) 734-5170 or e-mail ann.m.nasr@aphis.usda.gov .

Sincerely,

Kenneth R. Seeley
Chief, Environmental and Risk Analysis Services
Policy and Program Development

Enclosure

cc:
J. Jones, USDA, APHIS, WS, OS, Riverdale, MD
N. Freeman, USDA, WS, NWRC Archives, Fort Collins, CO
P. Darrow, USDA, APHIS, WS, Pocatello Supply Depot, Pocatello, ID

DS File Section 3/FIFRA 6(a)(2) Reports (Aggregate and Single)/FY2011

Enclosure WDMT = Wildlife Damage Management Technician

U.S. DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
WILDLIFE SERVICES

6(a)(2) ADVERSE EFFECTS INCIDENT INFORMATION REPORT

INCIDENT CODE	INCIDENT STATUS		DATE WS BECAME AWARE OF THE INCIDENT	DST USE ONLY
DA	☑ New Date 31 May 2011	☐ Update Date of last submission	20 Feb 2011	REPORT NUMBER

EMPLOYEE NAME (To contact for additional information)	TELEPHONE NUMBER	CONTACT NAME (If Non-APHIS or different from reporter)	TELEPHONE NUMBER
Glynn Riley	325-646-4536		

DUTY STATION ADDRESS	ADDRESS
1005 Indian Creek Dr. Brownwood Tx 76801	[redacted]

INCIDENT LOCATION			SOURCE OF INFORMATION
CITY	STATE	COUNTY	☐ Self ☑ Telephone Call ☐ Letter ☐ Media ☐ Oral Report ☐ Other
Ranch	TX	Coleman	

EXPOSURE TYPE (Examples include spill, splash, drift, runoff or other.)
N/A

INCIDENT SITE [examples include commercial or residential sites, forest/woods, agricultural (specify crop), rangeland/pasture, noncrop area, fallow field, public lands (specify), recreational area (specify), right-of-way (rail, utility, highway)]	SITUATION RELATING TO PRODUCT ADVERSE INCIDENT: [examples incl. application, mixing/loading, reentry, during transport, repair/maintenance of applicat. equipment, during manufacturing/formulation]
ranch pasture	M-44 set in pasture

EPA REGISTRATION NUMBER	PRODUCT NAME	ACTIVE INGREDIENT	
56228-15	M-44 Cyanide Capsule	Sodium Cyanide	
WAS THE PRODUCT ☒ Concentrated ☐ Diluted	WHAT WAS THE DILUTION RATIO (If applicable)	WERE THE LABEL DIRECTIONS FOLLOWED ☒ Yes ☐ No	WAS THE APPLICATOR CERTIFIED (If applicable) ☒ Yes ☐ No

IS THERE EVIDENCE OF INTENTIONAL MISUSE (If "Yes", explain)
☐ Yes ☒ No

SUMMARY OF THE INCIDENT (Attach supplemental form)
On February 20, 2011, WDMT Kyle Traweek contacted DS Glynn Riley to report that he was informed that he had killed a dog, and the owners of the dog may be contacting him. The next business day, the individuals (Mr. + Mrs [redacted]) met with DS Glynn Riley at the Brownwood District office claiming that their pet dog (pit bull) had been killed on an M-44. During the meeting, Mr. Riley noted that the [redacted] said signs were on the gate (entrance) and that an individual sign was at the location where they found the dog killed. The [redacted] said that there had been some friction between them and the property owner regarding the dog being allowed to run at random on the property which is leased for

NAME OF PREPARER	SIGNATURE	TELEPHONE NUMBER	DATE
Vivian Prothro	Vivian Prothro	210-561-3800	31 May 2011
NAME OF SUPERVISOR	**SIGNATURE**	**TELEPHONE NUMBER**	**DATE**
Mike Bodenchuk	Michael A. Bodenchuk	210-561-3800	31 May 2011

WS FORM 160 (2007)

Personal privacy information

DOMESTIC ANIMAL, FAUNA, OR FLORA INCIDENT - SUPPLEMENTAL REPORT FORM

DST USE ONLY
REPORT NUMBER

"X" ONE: ☐ Amphibian ☐ Fish ☐ Bird ☒ Mammal ☐ Invertebrate ☐ Reptile ☐ Plant

"X" ONE: ☒ Domestic ☐ Wild

NUMBER OR ACRES AFFECTED

SPECIES COMMON NAME: Domestic Dog

BREED (Unknown): Pit Bull

DESCRIBE SIGNS, SYMPTOMS, ADVERSE EFFECTS

N/A - WS never saw the dog.

IF LABORATORY TESTS WERE PERFORMED, LIST NAME OF TEST(S) AND RESULTS (if available, attach copies):

N/A

MAGNITUDE OF THE EFFECT (e.g., miles of streams, square area of terrestrial habitat)

N/A

PESTICIDE APPLICATION RATE AND METHOD OF APPLICATION (Include brief description of baiting if applicable)

8 M-44s set on 1200 acre agreement for protection of cattle.

WAS PREBAITING USED ON THE SITE (Describe)

☐ Yes ☒ No

DESCRIPTION OF THE HABITAT AND CIRCUMSTANCES UNDER WHICH THE INCIDENT OCCURRED

Pasture land

ADDITIONAL FACTORS Continue from WS Form 160..

[redacted] that based on most current ranching operations. Mr. Riley told the [redacted] that based on most current trapline inspections and what they told him, he feels WDMT Traweek was in compliance with the M-44 label and had followed all 26 use restrictions. On March 3, 2011. DS Riley made a subsequent visit to the property and WDMT Traweek. A field inspection was performed. All regulations were followed (i.e. signs in place, agreement current, etc.).

NAME OF PREPARER	SIGNATURE	DATE
Vivian Prothro	Vivian Prothro	31 May 2011
NAME OF SUPERVISOR	SIGNATURE	DATE
Mike Bodenchuk	[signature]	31 May 2011

WS FORM 160B (2007)

Personal privacy information