



Van Buren/Cass County District Health Department

effective 1/1/2019: PEP reporting for Rabies is mandatory.

Animal Bite Report Form

Van Buren County 260 South St. Lawrence, MI 49064 Voice 269-621-3143 Fax: 269-621-2725 Dispatch Fax: 269-657-7207

Cass County 302 S. Front St. Dowagiac, MI 49047 Voice 269-782-0064 Fax: 269-782-0121 Animal Control Fax: 269-445-5018

Informant Name: _____ Date: _____

Facility Name: _____ Type: ER PCP Vet Other

If Rabies is suspected, please call Public Health Nursing: Van Buren Co 269-621-3143 – Cass Co 269-782-0064

Person Bitten:

Name: _____ Phone: _____

Address: _____

Date of Birth: _____ Age: _____ Sex: female male

Alternative Contact name: _____ Phone: _____

Bite or other exposure: Dog Cat Other: _____

Date: _____ Describe circumstances: _____

Time: _____ am pm

Provoked Describe location and nature of injuries: _____

Unprovoked

About the animal: Ownership:

Description of Animal: (age, sex, relevant history, breed (if known))

- Victims household Pet
 Acquaintance's pet
 Strangers pet
 Stray
 Wild

Animal's Rabies immunization History:

- Unknown
 Unvaccinated
 Vaccinated, current
 Vaccinated, not current
 Last shot given:

Owner: _____ Address: _____ Phone: _____

Medical Follow up:

Comments: _____

Routine Follow-Up:

- Tetanus Immunization status checked
 Antibiotic Prophylaxis
 Wound cleaned with soap & water
 Disinfectant applied
 Victim cautioned about risk of infection

Rabies Post Exposure Prophylaxis: Recommended *Date initiated: _____ Not Recommended

For Public Health / Animal Control Use

Disposition of Animal and Recommendations

Plan for Animal:

Additional information: (transportation details, etc.)

Test Results:

- Lost to follow-up
 Hold for 10-day observ.
 Discard/release (no risk)
 Send head to lab (batch)
 Send head to lab (express)
 Refer to Vet Diagnostics

- Not tested
 Negative
 Unsatisfactory
 positive

Faxed to Animal Control: Date: _____ Initials: _____

Public Health Investigator: _____ Date: _____