EXPOSURE REPORTING - ANIMAL BITE FORM



Larimer County Department of Health and Environment 1525 Blue Spruce Drive Fort Collins, CO 80524



LARIMER HUMANE SOCIETY

Larimer Humane Society Animal Protection & Control 3501 East 71st Street, Loveland, CO 80538 Phone: (970)226-3647 Fyt 7

		Phone: (9/0)220-304/ Ext /			
Reporting Facility		Date			
***		151			
PATIENT INFORMATION					
Name Phone					
		1			
Address City, State, ZIP		. County	Sex	I	DOB
	,				
OWNER INFORMATION					
Name	OWNE	Phone		Sec. Library 19 Philips	(6世) (10世) (10\pm)
Name		1 none			··
Address City, State, ZIP, County					
Address City, state, ZIF, County					
				SONAL SOLUTION OF A CONTRACT O	
A CONTRACTOR OF A SECOND	PHYSICI	AN INFOR	MATION		
Name		Phone			
	C	Charles ZID County			
Name and Address of Practice	Ci	ity, State, ZIP, County			
Has Rabies PEP started? ☐ Yes ☐	No Has the local He	ealth Department reco	nmended rabies PEP	? □Yes □No	□Unknown
	_ 4				
*If you have questions about PEP treatment, contact Larimer County Health Department at 970-498-6775					
, , , , , , , , , , , , , , , , , , , ,					
	0 DUD4 0	LINEORM	TION	500 (50) (1.15)	
A pimal Type		L INFORM		Sex	
Animal Type	ANIMA	L INFORM		Sex	
Animal Type		Co	or		
			or		
□ Owned □ Stray/Feral □ A	Breed live and in quarantine	☐ Waiting to be t	or		
	Breed live and in quarantine	☐ Waiting to be t	orsted □ Euthanize		
□ Owned □ Stray/Feral □ A	Breed live and in quarantine	☐ Waiting to be t	orsted □ Euthanize		
□ Owned □ Stray/Feral □ A	live and in quarantine	□ Waiting to be t □ Unknown □ Da	orsted □ Euthanize e of last vaccination		
☐ Owned ☐ Stray/Feral ☐ A Is the animal currently Rabies vaccina	live and in quarantine	□ Waiting to be t □ Unknown □ Unknown	orsted □ Euthanize e of last vaccination		
□ Owned □ Stray/Feral □ A	live and in quarantine	□ Waiting to be t □ Unknown □ Da	orsted □ Euthanize e of last vaccination		
☐ Owned ☐ Stray/Feral ☐ A Is the animal currently Rabies vaccina Address Where Bite Occurred	live and in quarantine	□ Waiting to be t □ Unknown □ Unknown	orsted □ Euthanize e of last vaccination		
☐ Owned ☐ Stray/Feral ☐ A Is the animal currently Rabies vaccina	live and in quarantine	□ Waiting to be t □ Unknown □ Unknown	orsted □ Euthanize e of last vaccination		
☐ Owned ☐ Stray/Feral ☐ A Is the animal currently Rabies vaccina Address Where Bite Occurred	live and in quarantine	□ Waiting to be t □ Unknown □ Unknown	orsted □ Euthanize e of last vaccination		
☐ Owned ☐ Stray/Feral ☐ A Is the animal currently Rabies vaccina Address Where Bite Occurred Circumstances of Bite	Breed live and in quarantine ated?	□ Waiting to be t □ Unknown INFORMAT City, State, ZIP	orsted □ Euthanize e of last vaccination		
☐ Owned ☐ Stray/Feral ☐ A Is the animal currently Rabies vaccina Address Where Bite Occurred	Breed live and in quarantine ated?	□ Waiting to be t □ Unknown INFORMAT City, State, ZIP	orsted □ Euthanize e of last vaccination		
☐ Owned ☐ Stray/Feral ☐ A Is the animal currently Rabies vaccina Address Where Bite Occurred Circumstances of Bite	Breed live and in quarantine ated?	□ Waiting to be t □ Unknown INFORMAT City, State, ZIP	orsted □ Euthanize e of last vaccination	ed Location	
☐ Owned ☐ Stray/Feral ☐ A Is the animal currently Rabies vaccina Address Where Bite Occurred Circumstances of Bite	Breed live and in quarantine ated?	□ Waiting to be t □ Unknown INFORMAT City, State, ZIP	sted Euthanize e of last vaccination		
□ Owned □ Stray/Feral □ A Is the animal currently Rabies vaccina Address Where Bite Occurred Circumstances of Bite Behavior (e.g., was animal healthy, ill.	Breed live and in quarantine ated?	□ Waiting to be t □ Unknown INFORMAT City, State, ZIP behavior?) Explain:	sted Euthanize e of last vaccination	ed Location	
□ Owned □ Stray/Feral □ A Is the animal currently Rabies vaccina Address Where Bite Occurred Circumstances of Bite Behavior (e.g., was animal healthy, ill.	Breed live and in quarantine ated?	□ Waiting to be t □ Unknown INFORMAT City, State, ZIP behavior?) Explain:	sted Euthanize e of last vaccination	ed Location	
□ Owned □ Stray/Feral □ A Is the animal currently Rabies vaccina Address Where Bite Occurred Circumstances of Bite Behavior (e.g., was animal healthy, ill. Animal Control Office (if reported)	Breed live and in quarantine ated?	□ Waiting to be t □ Unknown INFORMAT City, State, ZIP behavior?) Explain: Animal Control Offi	sted Euthanize e of last vaccination	d □Location	
□ Owned □ Stray/Feral □ A Is the animal currently Rabies vaccina Address Where Bite Occurred Circumstances of Bite Behavior (e.g., was animal healthy, ill. Animal Control Office (if reported)	Breed live and in quarantine ated?	□ Waiting to be t □ Unknown INFORMAT City, State, ZIP behavior?) Explain: Animal Control Offi	sted Euthanize e of last vaccination ION er	Contact Phone	