CONTACTS (RABIES / ANIMAL BITE /SCRATCH)

ANIMAL BITE REPORT FORM
NANCY KINCAID (304A HOERLEIN)......334-844-5316
GWEN JAMES (505A HOERLEIN)........334-844-5045

HOSPITAL SAFETY OFFICER
DR. DURAN....................................334-844-6675

RISK MANAGEMENT
DONNA TUCKER...............................334-703-8186

ZOONOTIC DISEASE CONSULTATION
DR. JIM WRIGHT............................334-844-2670

ALABAMA DEPARTMENT OF PUBLIC HEALTH (STATE PUBLIC HEALTH VETERINARIAN)
DR. DEE JONES...............................334-206-5969

LEE COUNTY RABIES OFFICER
DR. BUDDY BRUCE..........................334-745-0060

OCCUPATIONAL SAFETY PHYSICIAN
DR. GARTH STAUFFER........................334-821-7788

STUDENT CLINIC
AU MEDICAL CLINIC.........................334-844-4416
RESPONDING TO ANIMAL BITE & SCRATCH

1. IMMEDIATE FIRST AID
   a. Let the wound bleed.
   b. Wash with plenty of soap and water (20 MINUTES).

2. SEE A LOCAL PHYSICIAN ~OR~ AU Medical Clinic (844-4416)

3. INFORM SUPERVISOR & PRIMARY CLINICIAN.
   a. The owner MUST also be informed of the bite or scratch.
   b. CALL Dr. Buddy Bruce @ 334-745-0060 as soon as possible.
   c. By law within 48 hours of the bite to obtain quarantine recommendations.
   d. Be prepared to provide vaccination history.
      i. If home quarantine is granted, give owner a copy of the “Home Quarantine Rules”.
         1. Initial here that “Home Quarantine Rules” have been given to Owner__________
      ii. If vet quarantine is granted, recommend owner speak to Dr. Bruce directly.
         1. Initial here that Dr. Bruce has been contacted ______________

4. FILL OUT ANIMAL BITE/SCRATCH REPORT FORM COMPLETELY.
   a. FAX to Dr. Buddy Bruce at 334-745-0062.
   b. Attach fax confirmation to report.
   c. Scan to ngk0003@auburn.edu ~OR~ Gwen James gra0001@auburn.edu.

5. Faculty, Staff and Student Employees Must report ON THE JOB INJURY by going to the website: https://cws.auburn.edu/rms/pm/claims or auburn.edu/go/rmsclaims
   a. For Students: go to website and scroll to ~~> “General liability claim”.
Animal Bite/Scratch Report
Lee County Rabies Officer
1520 2nd Avenue
Opelika, AL 36801
334-745-0060 / Fax: 334-745-0062
(Fill out form completely!)
(This form does not report an on-the-job injury)

AUCVM Wilford & Kate Bailey Small Teaching Hospital, 1220 Wire Rd., Auburn, AL 36849

Person Bitten: ______________________________ Date and Time of Bite: _________________

Home Phone: ______________________________ Work Phone: ______________________________

Address: ________________________________________________________________

City: __________________ State: __________________ Zip: ___________________

Service where bite occurred: ________________________________ Attending Clinician: ________________

Clinic Case Number ____________________________

Anatomical Location of Bite: ____________________________

Did the Bite Break the Skin? NO or YES (If yes, refer to Responding to Animal Bites)

Circumstances under which bite occurred: __________________________________________

Confirm owners have been informed of bite? NO or YES;

If home quarantine granted, given copy of the Home Quarantine Rules? NO or YES

Description of Animal: (Name & Species) __________________________

Last 2 Vaccination Dates: ________ rDVM: ________ Date: __________ Phone: ( ) ________

Owner of Animal: ____________________________________________________________

Home Phone: ______________________________ Work Phone: ______________________________

Address: ________________________________________________________________

City: __________________ State: __________________ Zip: ___________________

Where Quarantined? ____________________________ Date: __________________

Comments: __________________________________________________________________

Report Taken By: ____________________________ Date: _________________

Attach fax and scan report to: Nancy Kincaid @ngk0003@auburn.edu as soon as possible.
Rules of Home Quarantine

1. Keep the animal (your pet) confined and away from people and other animals for a period of ten days from the date of the bite/exposure.

2. Keep the care of the animal limited to as few people as possible, preferably one person.

3. Dogs must be on a leash when they are taken outside or be in an escape proof pen during the quarantine period. Cats are not allowed outside during the quarantine period.

4. If the animal becomes ill or dies, take it to your veterinarian immediately and contact us. If the animal dies, it MUST BE TESTED FOR RABIES.

5. If the animal should escape, notify us immediately! (But please DO NOT LET THE ANIMAL ESCAPE) Should the animal be lost, the victim would need to undergo Rabies PEP Treatment (Rabies Post Exposure Prophylactic Treatment).

6. The animal must have an exam by a licensed veterinarian (of your choice) on the tenth day from the date of the bite/exposure and we must be notified. Make an appointment for your animal with your veterinarian today and call us with your veterinarian's name, phone number and appointment information.
   a. DATE FOR ANIMAL TO BE EXAMINED:____________

IF YOU HAVE ANY QUESTIONS, PLEASE CALL US! 334-745-0060

Sincerely,

Leigh Ann
Alabama Department of Public Health
Bureau of Clinical Laboratories

SUBMITTING SPECIMENS FOR RABIES TESTING

• For testing of small animals, deliver the specimen to one of the following State Public Health Laboratories Monday - Friday during working hours. An area designated to receive rabies specimens after hours, is available at the Mobile area laboratory. A security guard is available at the Jefferson County Health Department to receive rabies specimens after hours for the Birmingham area laboratory.
  o Birmingham  
    1400 6th Ave. S., Birmingham, AL 35233
    205/933-1388
  o Mobile  
    757 Museum Dr., Mobile, AL 36608
    251/344-6049
  o Montgomery  
    8140 AUM Dr., Montgomery, AL 36117
    334/260-3400

• A specimen may be delivered directly to laboratory or shipped through the ADPH’s laboratory courier service or some commercial courier service (not US Mail).
  o Place the specimen in a leak-proof bag and place in an insulated box with ice packs to keep the specimen cold during shipping.
  o Complete submitter’s information on the “Rabies Test Report Form”, place in sealed, plastic bag, and put in outside shipping container. Each specimen must have its own, clearly defined, request form. Label outside shipping container "Rabies Specimen".
  o Call the State Health Laboratory to ensure proper packaging and shipping instructions.

• Animals weighing more than 20 lbs or exceeding 24” total in length will not be accepted at any of the State Public Health Laboratories.

• For testing of large animals, please call one of the Alabama Department of Agriculture and Industry State Laboratories for instructions for brain removal.
  o Auburn  
    334/844-4987
  o Boaz  
    256/593-2995
  o Elba  
    334/897-6340
  o Hanceville  
    256/352-8036

• All specimens must be dead before they are submitted to the laboratory; must be free of pests; and must not leak blood from containers.
• If the brain is extracted from an animal for submission, it is preferable to submit the *entire* brain, however, if this is not possible, include the following parts. The *entire brainstem* (essential for a proper diagnosis) must be accompanied by either the *entire cerebellum* or *half cerebellum plus one hemisphere of the cerebrum*.

For further information, please contact the Bureau of Clinical Laboratories Rabies Laboratory at 334-260-3400