

**Detroit Health Department  
ANIMAL BITE AND RABIES EXPOSURE INTAKE FORM**

**ATTENTION: This report should be filled out for incident victims residing in the City of Detroit.**

**Section I: INFORMATION ON PERSON BITTEN OR EXPOSED TO RABIES**

Date and Time When Bite Occurred \_\_\_\_\_  
Name \_\_\_\_\_ Gender \_\_\_\_\_ Birth Date \_\_\_\_\_  
Adult Guardian (if applicable) \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_

**Section II: INFORMATION ON THE BITING/ATTACKING ANIMAL**

Type of Animal \_\_\_\_\_ Color \_\_\_\_\_  
Is animal a pet, stray, wild? \_\_\_\_\_ Vaccinated? \_\_\_\_\_  
Location of Animal: At Large \_\_\_\_\_ With Owner \_\_\_\_\_ Other Address \_\_\_\_\_  
Name and Address of Animal Owner \_\_\_\_\_  
Phone # of Owner: \_\_\_\_\_ Was animal control notified? Yes \_\_\_\_ No \_\_\_\_  
Location of Incident \_\_\_\_\_  
Location of bite \_\_\_\_\_  
Description of Incident \_\_\_\_\_

**Section III: MEDICAL INFORMATION**

Hospital Where Treated \_\_\_\_\_

**Check all that apply:**

Wound cleansed soap/H<sub>2</sub>O \_\_\_\_\_ Disinfectant applied \_\_\_\_\_  
Medical treatment/attention received \_\_\_\_\_ Tetanus immunization status reviewed \_\_\_\_\_  
Infection risk discussed \_\_\_\_\_ Antibiotic prophylaxis recommended \_\_\_\_\_

Additional Treatment? \_\_\_\_\_  
Was Rabies Post Exposure Vaccine Given? No \_\_\_\_ Yes \_\_\_\_ Date Given \_\_\_\_\_  
Where will person complete post exposure vaccine? \_\_\_\_\_  
Referral Date \_\_\_\_\_

\*\*\* Rabies has been transmitted to humans from bats even when no bite was apparent. A person should be started on rabies post exposure treatment if one of the following occurs: a bat is found in the room of an unattended child, intoxicated, mentally challenged or sleeping individual and the bat is not available for testing, or, a bat comes in physical contact with a person and is not available for testing. \*\*\*

**PLEASE FAX TO THE DETROIT CD PROGRAM**

Office (313) 876-4000 Fax (313) 877-9286

**Animals that do NOT transmit rabies:** Chipmunks, Guinea Pigs, Mice, Shrews, Muskrats, Gerbils, Hamsters, Rabbits, Squirrels, Voles, Gophers, Moles, Rats, and Prairie Dogs.  
**Woodchucks will be tested.**