



Rick Scott
Governor

H. Frank Farmer, Jr., M.D., Ph.D.
State Surgeon General

ANIMAL BITE REPORT

Florida Administrative Code (FAC) 64D-3.002(1)(a), Communicable Diseases, requires that any animal bite to a human by a potentially rabid animal or nonhuman primate, be reported to the local county health department within 72 hours of recognition. To facilitate this process, the required information on this form may be faxed to the **MANATEE COUNTY HEALTH DEPARTMENT** at **#(941) 750-9364**.

PATIENT INFORMATION

Date of Bite/Exposure: _____ Patient Date of Birth: _____
 Name of Patient: _____ Weight: _____ lbs.
 Address: _____ Race: _____ Sex: M F
 City: _____ State: _____ Zip: _____
 Phone: (H) _____ (W) _____
 Parent Name and Phone (if minor): _____

Type of Exposure: Bite Scratch Other: _____
 Skin Broken? Yes No Drew Blood? Yes No
 Location of Wound(s): _____
 Location and Circumstances of Incident: _____

Treatment Provided?: Yes No If Yes, describe: _____
(Tetanus, Antibiotics, bandages, stitches, etc.)

ANIMAL INFORMATION

Location of Animal (if known): _____
 Type of Animal: Dog Cat Other: _____
 Description: Breed: _____ Color: _____ Sex: M F Unk
 Manatee County License Tag: Yes No Unknown
 If Yes, Tag # and Year: _____
 Rabies Vaccination Current?: Yes No Unknown
 If Yes, Date of Vaccination: _____ By: _____
 Quarantined?: Yes No Unknown
 If Yes, Where?: _____

ANIMAL OWNER INFORMATION

Name of Owner: _____ Phone: (H) _____ (W) _____
 Owner Address: _____ City/St: _____ Zip: _____

REPORTED TO CHD BY: <input type="checkbox"/> Animal Services <input type="checkbox"/> Health Care Facility: _____ <small>(EH OFFICE USE ONLY)</small> <input type="checkbox"/> CHD Epidemiology <input type="checkbox"/> Other: _____
Taken By: _____ Log#: _____ PIN#: 41-66-_____

Manatee County Health Department
 Environmental Health Services
 410 Sixth Avenue East • Bradenton 34208-1928
 PHONE (941) 748-0747 ext. 1340 • FAX (941) 750-9364