VETERINARY PUBLIC HEALTH-RABIES CONTROL PROGRAM
Phone: (213) 288-7060 Email: vet@ph.lacounty.gov Fax: (213) 481-2375
publichealth.lacounty.gov/vet

COUNTY OF LOS ANGELES
Public Health

Animal Disease/Death Reporting Form

(if the disease you are reporting has a specific form, ideally use that form instead)

Date form completed_____

SUSPECTED DISEASE/CONDITION BEING REPORTED: _____

1. Animal Information

Type of animal involved: ☐ Domestic Pet ☐ Livestock ☐ Wild animal
☐ Exotic ☐ Zoo animal
Number of animals: ☐ One ☐ Multiple (give number _____)
Species of Animal _____
Other Identifying Information:
Breed _____ Color _____
Sex _____ Name _____
Age _____ IMPOUND # _____

2. Animal Owner (if applicable)

Name(s)
Address
City, ZIP
Telephone:
Is it okay for Public Health to call the owner(s) to ask more about the history? ☐ **YES** ☐ **NO**

3. Animal Location (where in community animal originated, if not same as owner)

Name(s)
Address
City, ZIP

4. Reporting Veterinary Clinic or Shelter

Name of veterinarian or technician:
Vet Clinic Name:
Address:
City, ZIP:
Telephone Fax E-mail:

5. History

Date of onset of first symptoms_____ Date of presentation_____
Date of death(s), if applicable_____
History (include vaccine history, if applicable):

Fax 2-page form to: (213) 481-2375 **2013**
5/2013

6. Clinical Findings

Highest body temperature measured_____

Physical Examination

	Normal		Comments
General:	☐ Yes	☐ No	_____
Skin:	☐ Yes	☐ No	_____
Head Area:	☐ Yes	☐ No	_____
Respiratory:	☐ Yes	☐ No	_____
Cardiovascular:	☐ Yes	☐ No	_____
Abdomen/digestive:	☐ Yes	☐ No	_____
Urogenital:	☐ Yes	☐ No	_____
Musculoskeletal:	☐ Yes	☐ No	_____
Nervous:	☐ Yes	☐ No	_____
Lymph nodes:	☐ Yes	☐ No	_____
Other:	☐ Yes	☐ No	_____

7. Treatment.

Please describe treatment given, particularly antibacterial, antiviral, antifungal, antiparasitic.

Treatment Date	Describe Treatment
1. _____	_____
2. _____	_____
3. _____	_____

8. Laboratory results

Please fax all laboratory results to us along with this form.

9. Additional comments.

Please use an additional sheet if needed.