

**COUNTY OF LOS ANGELES - DEPARTMENT OF PUBLIC HEALTH  
VETERINARY PUBLIC HEALTH PROGRAM**

**VPH/Shelter Rabies Control and Specimen Communication Logs**

SHELTER STAFF LOG							VPH STAFF ONLY		
Date	Shelter Staff Name	Impound Number	Impound Date	Species	Specimen prepared for rabies testing	Bite Report emailed to VPH	Date of pick up by VPH	VPH Staff Initials	VPH Site Visits
				<input type="checkbox"/> Dog <input type="checkbox"/> Bird _____ <input type="checkbox"/> Cat <input type="checkbox"/> Other _____ <input type="checkbox"/> Bat	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> VPH Site Visit Only
				<input type="checkbox"/> Dog <input type="checkbox"/> Bird _____ <input type="checkbox"/> Cat <input type="checkbox"/> Other _____ <input type="checkbox"/> Bat	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> VPH Site Visit Only
				<input type="checkbox"/> Dog <input type="checkbox"/> Bird _____ <input type="checkbox"/> Cat <input type="checkbox"/> Other _____ <input type="checkbox"/> Bat	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> VPH Site Visit Only
				<input type="checkbox"/> Dog <input type="checkbox"/> Bird _____ <input type="checkbox"/> Cat <input type="checkbox"/> Other _____ <input type="checkbox"/> Bat	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> VPH Site Visit Only
				<input type="checkbox"/> Dog <input type="checkbox"/> Bird _____ <input type="checkbox"/> Cat <input type="checkbox"/> Other _____ <input type="checkbox"/> Bat	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> VPH Site Visit Only
				<input type="checkbox"/> Dog <input type="checkbox"/> Bird _____ <input type="checkbox"/> Cat <input type="checkbox"/> Other _____ <input type="checkbox"/> Bat	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> VPH Site Visit Only
				<input type="checkbox"/> Dog <input type="checkbox"/> Bird _____ <input type="checkbox"/> Cat <input type="checkbox"/> Other _____ <input type="checkbox"/> Bat	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> VPH Site Visit Only
				<input type="checkbox"/> Dog <input type="checkbox"/> Bird _____ <input type="checkbox"/> Cat <input type="checkbox"/> Other _____ <input type="checkbox"/> Bat	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> VPH Site Visit Only