

MANDATORY REPORTING FORM POSSIBLE RABIES EXPOSURE REPORT

High risk exposures must be phoned and faxed to Public Health Services. Low risk exposures can be faxed only. Refer to Rabies Risk Assessment Reporting Guideline. Phone: 905-546-3570 Use this form to FAX all exposure reports. FAX: 905-546-2787

Personal information contained on this form is collected under the authority of the Health Protection & Promotion Act, for the purposes of investigation by Public Health Services and the entry of the information to the Provinces database in the potential eventuality of Rabies

Immunoprophylaxis or a Human Rabies case.						
Reporting Office or Hospital: _		Phone:Back line if available.				
Attending Physician:						
	PERSON EXP	OGED				
l	FEROUR LAI	<u> </u>				
Please affix patient label with name, address, telephone, sex and date of birth. Provide guardian information for under-aged children in the comments section below. Comments regarding incident/exposure:		Date of Exposure:				
		Type of Exposure Bite: ☐ Handling: ☐ Scratch: ☐ Other:				
		Area Affected Head/Face Neck Specify:				
		WEIGHT*: KG/LBS (Please circle) * Weight required if rabies PEP ordered.				
Vaccine Update Recent changes to rabies post-exposure prophylaxis now include 4 doses on day 0, day 3, day 7 and day 14 with the exception of those persons who are immunocompromised including those on corticosteroids, other immunisuppressive drugs, antimalarials and those with immunosuppressive illnesses who will continue to require the 5 th dose on day 28. Please have the ordering physician determine if the patient is considered immunocompromised, requiring the 5 doses to ensure that the correct amount of vaccine is delivered. For assistance please call (905) 546-2424 ext. 3327.						
PROVIE	DE KNOWN ANIMAL INF	FORMATION BELOW				
T-me of Animal	If exposed is also animal ow					
Type of Animal	If exposed is also animal owner please tick box. If not please fill out below:					
Dog □ Bat □ Cat □ Fox □ Skunk □						
Livestock Raccoon Other:		City:				
Is the domestic animal vaccinated against rabies? ☐ Yes ☐ No	against rabies?					

High Risk Exposures

Animal species	Condition of animal at time of exposure	Reporting required for Public Health Services (PHS)	Management of exposed person
Dog, Cat or Ferret →	Rabid or suspected to be rabid.** Unknown, stray or escaped.	→ Phone _ and Fax	Local treatment of the wound. Rabies Prophylaxis (Rablg & HDCVor PCECV)
Skunk, bat, fox, coyote, raccoon, and other carnivores.	Regard as rabid as raccoon strain rabies is established in the local animal population in this area.	Phone → and Fax —	Local treatment of the wound. Rabies Prophylaxis (Rablg & HDCVor PCECV)

Note: In cases where the bite has occurred to the head or neck, rabies prophylaxis should be started immediately and can be discontinued if the animal test is negative for rabies.

Low Risk Exposures

Animal species	Condition of animal at time of exposure	Reporting required for Public Health Services (PHS)	Management of exposed person
Dog, Cat or Ferret _	Healthy, +/- rabies immunization available for 10 day observation	→ Fax →	Local treatment of the wound. At first sign of rabies in animal, PHS may recommend administering Rablg and starting HDCV or PCECV. If bite wound is to the head or neck; then begin immediately.
Livestock, rodents, lagomorphs (hares and rabbits)	Consider Individually.	Fax If animal behaviour unusual; phone report is also required.	Local treatment of the wound. Bites of these animals may warrant post-exposure rabies prophylaxis if the behaviour/circumstance of the animal was highly unusual.***
Non- contact bats found in bedroom —	Consider → individually. →	If child or adult cannot give a reliable history, phone report is also required.	Local treatment of the wound. Rabies post- exposure prophylaxis may be warranted. A risk assessment must be conducted by PHS.