

Rabies Specimen History

Wadsworth Center
Griffin Laboratory
5668 State Farm Road, Slingerlands, NY 12159

NYS Lab Number

Date Received

FOR LABORATORY USE ONLY

Animal being submitted for testing:

Submitter's specimen number (optional)

- 1. Species: _____ Owned Wild (feral) or stray
- 2. Age: Adult Juvenile Unknown
- 3. Sex: Male Female Unknown
- 4. Rabies vaccination status: Current Not current Unvaccinated Unknown
- 5. Was the animal sick or acting strangely? Yes No Unknown
 Signs of rabies (check all that apply): Neurologic disorder Paralysis Difficulty swallowing Unusual aggression
 Other (describe): _____
- 6. Date of death: _____
- 7. If killed, how? _____
- 8. **Owner or complainant (REQUIRED):** _____
Name Daytime phone number

Location where the submitted animal was found or the exposure occurred:

House number and street _____ City _____ State _____ ZIP _____

Nearest cross street _____ If public place (example: school, children's camp, church), provide name _____

County _____ **Town (REQUIRED)** _____ Latitude (North-South) (optional) _____ Longitude (East-West) (optional) _____

Human and domestic animal exposure to the submitted animal:

- 9. Was any person bitten by the animal? Yes No Unknown If yes, provide the date of the bite _____
- 10. Has rabies post exposure prophylaxis (PEP) been initiated? Yes No Unknown If yes, provide the date _____
- 11. Was any person scratched by the animal or had contact with its saliva or nervous tissue? Yes No Unknown
- 12. If the animal is a bat, is there a reasonable probability that any person was exposed? Yes No Unknown
 Example: a bat was found near an unattended child or a person who was asleep and unable to tell if they were bitten.
- 13. Did any domestic animal have contact with the submitted animal? Yes No Unknown
 Species of exposed domestic animal(s): _____

Specimen prepared by (for drop-off specimens, the submitter):

Agency _____ Daytime phone number _____

Address _____

Comments (explain exposures):

THE COUNTY HEALTH DEPARTMENT MUST BE NOTIFIED OF ALL HUMAN AND DOMESTIC ANIMAL EXPOSURES

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This is a FINAL report. Results of virus isolation tests will be reported only if they contradict the fluorescent antibody test.

The fluorescent antibody test was negative for evidence of rabies.

The specimen was unsatisfactory for examination due to: decomposition inappropriate tissue
 mutilation other _____

Other

EVIDENCE OF RABIES WAS FOUND BY THE FLUORESCENT ANTIBODY TEST.