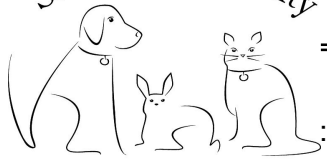


Santa Cruz County



Animal Services

# COUNTY OF SANTA CRUZ

## Santa Cruz County Animal Services

831-454-7303 Fax: 831- 454-7222

January 2008

Dear Health Care Providers:

We are writing today to remind you of the importance of reporting animal bites. Attached is a form to be used at the time of treatment for animal bites. We are requesting that you copy and distribute the following bite report form throughout your facility so that the County of Santa Cruz may streamline our intake of these reports. This way, each facility will be providing us with identical information, as available, and we will be able to expedite any necessary animal quarantine.

Just as a protocol reminder, please complete the form, including as much detail as possible, at the earliest convenience, once the victim intake process is complete. As soon thereafter as possible, please fax the completed form to our dispatcher at (831) 454- 7222\*. We ask that you expedite this task as animal quarantines need to be done as soon after the bite as possible to ensure proper disease control.

According to CCR §2606, isolation of biting animals in officially declared rabies areas (Santa Cruz County included), is mandatory. California Health and Safety §121705 states that any person who willfully conceals information about the location or ownership of an animal subject to rabies, that has bitten or otherwise exposed a person to rabies, with the intent to prevent quarantine or isolation of that animal by the local health officer is guilty of a misdemeanor. Any person who violates this section is guilty of a misdemeanor. (Enacted 1995)

If you have any questions regarding this matter, please feel free to contact our Animal Control Dispatch line Monday thru Friday 9:00 am – 5:30 pm, at (831) 454-7303 ext. 2, on weekends please leave a message and your call will be returned during regular dispatch hours.

If you need information on rabies (including PEP) please refer to the:

CDC <http://www.cdc.gov/mmwr/pdf/rr/rr5902.pdf>,

CDPH <http://www.cdph.ca.gov/HealthInfo/discond/Pages/rabies.aspx>, or

Santa Cruz County <http://www.santacruzhealth.org/phealth/cd/3reportingguidelines.htm>.

If additional phone consultation is needed, please contact the Communicable Disease Unit at (831) 454-4114.

Thank you for your cooperation in this matter.

Sincerely,

Lisa Holland  
Animal Control Dispatch

Todd Stosuy  
Supervising Animal Services Field Manager

\* Fax number only applies for reports in City of Santa Cruz, City of Scotts Valley, City of Watsonville, and other Unincorporated areas, please see the Medical Provider Report of an Animal Bite form for where to report for City of Capitola and UCSC.



# COUNTY OF SANTA CRUZ

## Santa Cruz County Animal Services

Susan Pearlman, Interim General Manager  
Phone: 454-7303 Fax: 454-7222

### MEDICAL PROVIDER REPORT OF AN ANIMAL BITE

This form must be completed by a health services worker.

California state law stipulates that all animal bites resulting in human skin being broken must be reported to the local animal control authority. In order to comply, this form must be completed with as much detail as is available. **Please fax the completed form the following number, where it will be received by an animal control worker: (831) 454-7222.** If you have further questions, please dial (831) 454-7303 ext 2.

Person Bitten		Age	Sex	Date Reported
Street Address (No P.O. boxes, please)		City	Phone(s)	
Reporting Party / Relationship to Victim		Date of Bite	Time of Bite	
Provoked? <input type="checkbox"/> Yes <input type="checkbox"/> No	Skin Broken? <input type="checkbox"/> Yes <input type="checkbox"/> No	Location of bite on body/ Extent of Injury		
Post Exposure Prophylaxis given <input type="checkbox"/> Yes <input type="checkbox"/> No		Treatment Summary		
Treated by: <input type="checkbox"/> Hospital Phone: <input type="checkbox"/> Clinic Phone:		Name of Medical Provider		
Signature of Medical Provider				
Type of Animal <input type="checkbox"/> Dog <input type="checkbox"/> Other _____ <input type="checkbox"/> Cat		Description of Animal		Animal's Name
Name of Animal Owner			Phone(s)	
Street Address (No P.O. boxes, please)			Nearest Cross St.	City
<b>Where to Report</b>	For: <b>City of Santa Cruz, City of Scotts Valley, City of Watsonville and Unincorporated Areas of Santa Cruz County:</b>		For: <b>City of Capitola</b>	For: <b>UCSC</b>
	To: Santa Cruz County Animal Services Authority 27 Janis Way Scotts Valley, CA 95066 Phone: (831) 454-7303 Fax: (831) 454-7222		To: Capitola Police Dept. 422 Capitola Avenue Capitola, CA 95101 Phone: (831) 474-7300 Fax: (831) 479-8881	To: Jen Holz Animal Control Officer UCSC Police Dept. 1156 High Street, ERC Santa Cruz, CA 95064 Phone: (831) 459-3688 Fax: (831) 458-5021