Leeds, Grenville & Lanark District HEALTH UNIT

ANIMAL EXPOSURE REPORT

Infectious Diseases Program
Community Health Protection Division
Population Health Department

PLEASE FAX ALL EXPOSURE FORMS TO:
613-345-5777, ASAP
IF YOU REQUIRE A CONSULT OR IF USING PEP
PLEASE CALL 1-800-660-5853

REPORTING AGENCY:	**Reported By:**
Date Reported:	**Date of Incident:**
Attending Physician (*first/last name*):	Attending Physician Phone #:
Animal Description: Dog ☐ Cat ☐ Bat ☐ Raccoon ☐ Other ☐ If other please state:	
Incident Type: Bite ☐ Scratch ☐ Saliva ☐ Other ☐ If other please state:	
Exposure Location on person's body:	

PERSON EXPOSED (Please Print)

Surname:	First Name:	
Male ☐ Female ☐ Transgender ☐ Other ☐	DOB (m/d/y):	
Phone #:	Cell #:	Work #:
Home Address:	Town/City:	Postal Code:
Email:		

Name of Parent/Guardian (*if applicable*):

Work #:	Cell #:	Home Phone #:
Family Physician *(first & last name)*:	Phone #:	Fax #:

ANIMAL OWNER (Please Print)

Surname:	First Name:	
Phone #:	Work #:	Cell #:
Address:	Town/City:	Postal Code:
Email:		
Additional Comments:		

PRIOR TO ISSUING PROPHYLAXIS (PEP) CONTACT THE LGLD HEALTH UNIT 1-800-660-5853

Health Unit Employee Consulted:	Date:	Time:

RECORD LOT NUMBER LOCATED ON BOX

IMMUNOGLOBULIN ADMINISTERED TO PATIENT	# of total VIALS used:	Patients Weight in kg:
Lot Number:	Expiry Date:	# of Vials:
Lot Number:	Expiry Date:	# of Vials:
Lot Number:	Expiry Date:	# of Vials:
Lot Number:	Expiry Date:	# of Vials:
RABIES VACCINE ADMINISTERED TO PATIENT:	Lot Number:	Expiry Date:

☐	Healthy individuals not previously immunized with rabies vaccine **(4 doses) OR**
☐	Immunocompromised persons (including those taking corticosteroids or other immunosuppressive agents and those who have immunosuppressive (illness) and those taking chloroquine and other antimalarials **(5 doses)**

Personal information on this form is collected under the authority of the Health Protection and Promotion Act, S.O.1990, H.7 and will be used for the provision of recording health information.Questions concerning the collection of this information should be directed to the Director of Population Health Department of the Leeds, Grenville and Lanark District Health Unit, 458 Laurier Blvd., Brockville ON K6V 7A3. Phone: 613-345-5685.