

Animal Bite Reporting Form

Environmental Health

Oregon State Law requires that Animal Bites be reported within **One (1) Working Day**

- Report animal bites that happened in Benton County to the Benton County Health Department
- Fax the completed form to 541-766-6248 within one (1) working day of evaluation.
- Please inform the person who was bitten that the Health Department will contact them.

ABOUT THE PERSON BITTEN

Name: _____ DOB: _____ Age: _____

Name of Parent/Guardian (if minor): _____

Street Address: _____ Phone: _____

City, State, Zip: _____ Home Work Cell

ABOUT THE INCIDENT

Date of incident: _____ Time: _____ AM PM

Address/Location of incident: _____

How did the incident occur: _____

Physical Location of Bite: _____ Bite Severity: Skin broken Skin unbroken

MEDICAL TREATMENT

Treatment administered by: _____ at: _____

Treatment: _____

Wound cleaned with soap & water? yes no Antibiotic prophylaxis? yes no

Victim cautioned about risk of infection? yes no Tetanus immunization current? yes no

ABOUT THE ANIMAL

Type of animal: (dog, cat, other): _____ Age: _____ Sex: M F

Description of animal (name, breed, relevant history): _____

Relationship to person bitten:

- Their own pet Acquaintance's pet Stranger's pet
 Stray pet Wild Unknown

Owner's Name: _____

Street Address: _____ Phone: _____

City, State, Zip: _____ Home Work Cell

Current rabies vaccination? yes no If yes, expiration date: _____

Traveled outside USA? yes no If yes, where/when? _____

Current location of animal: _____

REPORTING INFORMATION

Date reported: _____

Name of reporting person/agency: _____ Phone: _____

Home Work Cell