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| **Patient Information** |
| **Patient Last Name:** Last Name | **Patient First Name:** First Name |
| **Date of Birth:** MM **/**DD**/**YYYY | **Age:**## | [ ] **Male** [ ]  **Female** [ ] **non-Binary** [ ] **Unknown** |
| **Patient Street Address:** Address |
| **Patient City:** City | **State:** ST | **Zip:** ##### |
| **Cell Phone: (**###**)**###**-**#### | **Home Phone: (**###**)**###**-**#### | **Work Phone: (**###**)**###**-**#### |
| **Ethnicity:**  | [ ]  **Hispanic or Latino** | [ ] **Not Hispanic or Latino**  | [ ] **Unknown** |
| **Race:** | [ ] **American Indian or Alaska Native**  | [ ] **Asian** | [ ] **Black or African American** |
|  | [ ] **Native Hawaiian or Other Pacific Islander** | [ ] **White**  | [ ] **Unknown** |
| **Name of Additional Contact:** Name | **Phone of Additional Contact: (**###**)**###**-**#### |
| **Incident Information** |
| **Incident Date:** MM **/**DD**/**YYYY | **City of Incident:** City | **State of Incident:** ST |
| **Name of Person Reporting to RIDOH:** Name | **Report Date:** MM**/**DD**/** YYYY |
| **Phone Number of Person Reporting to RIDOH: (**###**)**###**-**#### |
| **Organization of Person Reporting to RIDOH:** Organization |
| **Exposing Animal:** [ ] Dog[ ] Cat[ ] Bat[ ] Raccoon[ ] Skunk[ ] Other (*specify species*): Other Animal |
|  *If Dog, Cat, or Ferret:* [ ] Owned [ ] Stray [ ] Unknown |
| *If Owned Dog, Cat, or Ferret:* [ ]  Owner is the Victim [ ] Owner is NOT the Victim |
| ***If dog or cat is NOT owned by the victim, please report owner information below:*** |
| **Owner’s Last Name:** Last Name | **Owner’s First Name:** First Name |
| **Owner’s Street Address:** Address |
| **Owner’s City:** City | **State:** ST | **Zip:** ##### |
| **Owners Phone Number: (**###**)**###**-** #### |
| **Status of animal at time of report (check one):** |
| [ ] Not Captured but known to victim | [ ] Submitted to RI State Health Lab for Testing | [ ] Not captured  |
| [ ] Quarantined (location) | [ ] Dead but NOT tested for rabies  |  |

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| **Wound Type** |
| [ ] Bite- Penetration of the skin by teeth | [ ] Saliva of animal on wound/lesions/mucosa |
| [ ] Scratch or Abrasion | [ ] Proximity to a bat  |
| **Wound Location** |
| [ ] Arm or Hand | [ ] Leg or Foot | [ ] Head of Neck | [ ] Trunk |
| **Description of Incident** |
| Description |