



ANIMAL BITE INTAKE REPORT

Pursuant to Ohio Administrative Code 3701-3-28, this report must be faxed within 24 hours to the Health District where the bite occurred. See back of page for list of Health District fax numbers.

To be completed by treating facility:

Facility name:		Physician:
Address:		City:
State:	Zip code:	Phone number:
Rabies post exposure treatment started: Yes <input type="checkbox"/> No <input type="checkbox"/>		

Victim (please provide as much information as possible):

Date of injury:		Location of injury:	
Incident address/location:			
Circumstances of incident:			
Victim name:			Age:
Victim address:			
City:		State:	Zip code:
Phone number:		Email:	
Parent/guardian name (if minor):			
Parent/guardian address (if different):			
Phone number (if different):			

Animal (please provide as much information as possible):

Animal type: Dog <input type="checkbox"/> Cat <input type="checkbox"/> Bat <input type="checkbox"/> Raccoon <input type="checkbox"/> Other <input type="checkbox"/>		Stray/Wild: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Animal name:		Breed:	Color:
Owner name:			
Owner address:			Same as victim <input type="checkbox"/>
City:		State:	Zip code:
Phone number:		Email:	
Current rabies vaccination: Yes <input type="checkbox"/> No <input type="checkbox"/> Unsure <input type="checkbox"/>		Rabies tag #:	
Veterinarian:		City:	State:
Location of animal: Owner's Home <input type="checkbox"/> Animal Shelter <input type="checkbox"/> Shelter:		Other <input type="checkbox"/>	
Other address:			

County/Health District	Fax #
Butler County	(513) 863-4372
Clark County	(937) 390-5500
Clermont County	(513)732-7937
Clinton County	(937) 382-7027
Darke County	(937) 548-9654
Fayette County	(740) 333-3528
Franklin County	(614) 525-6672
Greene County	(937) 374-5619
Hamilton City	(513) 785-7065
Hamilton County	(513) 946-7890
Madison County	(740) 852-5418
Miami County	(937) 573-3501
Middletown City	(513) 425-7852
Montgomery County	(937) 496-3070
Preble County	(937) 456-6382