

Live Domestic Animal Submitted to Animal Facility

Recent history of biting human or another animal? *

Yes, or not sure

No

Animal submitted has rabies symptoms?

Follow facility's protocols

Yes

No, or not sure

**Call ACD immediately
Tel. 215 685-6741**

Current on rabies vaccine?

Yes

No, or not sure

**Call PA Dept. of Agriculture immediately
Tel. 610 489-1003
After hours 717 772-2852**

Bit Human?

Bit Human?

Yes

No, bit another animal

Yes, or not sure

No, bit another animal

**Fax report to ACD and quarantine animal for 10 days
Fax: 215 545-8362**

Consult a veterinarian

**Call ACD immediately
Tel. 215 685-6741**

Consult a veterinarian

* Within past two weeks.