The State of Rhode Island
Manual for Rabies Management and Protocols

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(Supersedes and replaces all previous versions)
The State of Rhode Island  
Manual for Rabies Management and Protocols

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Part 1: Introduction

This version of the Manual for Rabies Management and Protocols (the Manual) represents a revision of the previous edition dated May of 1998. This version is an attempt to clarify some issues that caused confusion in the previous version and to modify the content to reflect timely issues. Notably, there have been numerous omissions in this version to make it more user-friendly as a reference.

The authority to issue regulations and policies regarding rabies control can be found in RI General Laws §4-13-1.3 and §4-13-29.3, as well as Rules and Regulations Governing the Prevention, Control, and Suppression of Rabies Within the State of Rhode Island. The Compendium of Animal Rabies Prevention and Control, 2007, serves as the primary reference for this Manual. Other modifications have been made as the result of critiques of the previous version, which this document has replaced.

Part 2: Definitions

1. The term "Animal Control Officer" (ACO) shall mean any person(s) employed by a city or town as a canine control officer, a dog or animal warden or a police officer responsible for animal control delegated authority by the Rhode Island Rabies Control Board.

2. The term "Cat" shall mean any member of Felis catus (excluding hybrids with wild felines).
3. The term “Close Observation” shall mean a level of confinement for low risk animals (based on vaccine status and as determined by the ACO, State Veterinarian, or official from the RI Department of Health) whereby the animal may be kept at home; and, the owner is informed of potential rabies risk; and, the owner is required to immediately notify the Animal Control Officer or Police, with jurisdiction over the municipality where the animal is being kept, upon discovery of any unusual behavior or change in the health status of the animal.

4. The term "Compendium" shall mean the most recent Compendium of Animal Rabies Control as published by the National Association of State Public Health Veterinarians, Inc.

5. The term "Currently Vaccinated" shall mean properly stored and subsequently injected by or under the direct supervision of a licensed veterinarian with a rabies vaccine licensed for use in that species by the U.S. Department of Agriculture (USDA) and satisfying the following criteria:

   a. For dogs, cats and ferrets:
      i. The vaccine manufacturer's protocol with regards to minimum age of animal as well as frequency and intervals of vaccination(s) was followed; and
      ii. At least thirty (30) days have elapsed since the initial vaccination; and
      iii. Not more than twelve (12) months have elapsed since the last vaccine if last vaccine was the initial vaccination or the animal is a ferret, or if the vaccine has an annual booster recommendation. Dogs, cats, and ferrets shall be considered currently vaccinated if the last booster was administered within the time frame specified by the most current Compendium regarding frequency and interval of vaccination for the particular product used and for the specific species that the product was used in.
      iv. Dogs, cats, and ferrets that were previously vaccinated but are not considered currently vaccinated are required to receive a booster vaccination within twelve (12) months of the most recent current vaccination in order to be considered currently vaccinated for the interval stated on the vaccine product label. (For example: If a dog, or cat is presented for vaccination thirty-seven (37) months after a vaccination that was labeled for use every three (3) years, the result of the new vaccination will be that the animal will be considered currently vaccinated for a maximum of one year.)
      v. Vaccine status will be determined from the dates on the most recent rabies vaccination certificate. It will be the responsibility of the animal owner to maintain and produce that document as proof of vaccine status.
b. **For all other species** for which there exists an unconditionally licensed rabies vaccine, the animals must be vaccinated against rabies in accordance with the most current *Compendium of Animal Rabies Control*. Failure or inability by the owner/keeper of a dog, cat or ferret to present or make available a rabies certificate or a copy thereof to an ACO investigating a possible rabies exposure shall result in classification of the animal in question as not currently vaccinated against rabies.

6. The term "**Dog**" shall mean any member of *Canis familiaris* (excluding hybrids with wild canids).

7. The term "**Domestic Animal**" shall mean animals which, through extremely long association with humans, have been bred to a degree which has resulted in genetic changes affecting the temperament, color, conformation or other attributes of the species to the extent that makes them unique and distinguishable from wild individuals of their species. This includes, but is not limited to, the following:
   a. Domestic dog (*Canis familiaris*);
   b. Domestic cat (*Felis catus*);
   c. Domestic horse (*Equus caballus*);
   d. Domestic cattle (*Bos taurus* and *Bos indicus*);
   e. Domestic sheep (*Ovis aries*)

8. The term "**Environmental Police Officer**" shall mean any commissioned environmental police officer for the Department of Environmental Management, Division of Law Enforcement.

9. The term "**Euthanasia**" shall mean the humane destruction of an animal accomplished by a method that involves nearly instantaneous loss of consciousness followed immediately by death or by a method that involves anesthesia produced by an agent that causes painless and rapid loss of consciousness and death during that period of unconsciousness. All methods of euthanasia must comply with Rhode Island General Laws and with the most current American Veterinary Medical Association Guideline on Euthanasia.

10. The term "**Exposure**" shall mean the possible exposure to the rabies virus via a direct bite or scratch, which results in a break in the skin of the victim, or contact between infectious material (i.e., saliva or Central Nervous System (CNS) tissue and fluid) and the eye, inside the nose or mouth, or a pre-existing break in the skin.

11. The term "**Exposure by Proximity**" shall mean a level of exposure where a domestic animal has been seen in a common area with a wild animal but there was no possible contact between the domestic animal and the wild animal. (An example of this would be a dog being walked on a leash and being approached by a wild animal, but the wild animal never having contact with the dog.)
12. The term "**Ferret**" shall mean any member of the family *Mustela putorius* or Common European Ferret.


14. The term "**Owner/Keeper**" shall mean any person or agency keeping, harboring or having charge or control of or responsibility for control of an animal or any person or agency which permits any dog, cat, ferret, or domestic animal to habitually be fed within that person's yard or premises. This term shall not apply to veterinary facilities, any licensed boarding kennel, municipal pound, pet shop, or animal shelter. (see RIGL 4-13-1.2)

15. The term "**Person(s)**" shall mean an individual, firm, joint stock company, partnership, association, private or municipal corporation, trust, estate, state, commission, political subdivision, any interstate body, the federal government or any agency or subdivision of the federal government, other government entity, or other legal entity.

16. The term "**Quarantine**" shall mean the act of holding an animal for a definite period of time in a means that prevents contact of that animal with other animals or the public at an escape-proof facility that has been approved for this use by the State Veterinarian. **NOTE:** For livestock only, quarantine may be carried out at the farm where the animal is usually kept provided that access by the public can be restricted and the animal can be kept isolated from other susceptible species.

17. The term “**Quarantine Facility**” shall mean a facility that has been approved by the State Veterinarian for the purpose of quarantine as defined.

18. The term “**Strict Confinement**” as applied to:
   a. **attacking animals** shall mean the act of confining an animal at the home of the animal in a manner that the animal is not allowed to run free and is not allowed to come into contact with any person or animal that does not reside at that location. This type of action may be done *in lieu* of quarantine at the discretion of the Animal Control Officer and only when the animal being confined is currently vaccinated against rabies and is not considered a high risk to escape, and the person in control of the animal is
considered by the Animal Control Officer to be certain to adhere to the order for Strict Confinement.

b. animals that are the victims of wounds of unknown origin or attacks of domestic animals shall mean the act of confining an animal at the home of the animal in a manner that the animal is not allowed to run free and is not allowed to come into contact with any person or animal that does not reside at that location. This type of action may be done in lieu of quarantine at the discretion of the Animal Control Officer and only when the animal is not considered a high risk to escape and the person in control of the animal is considered by the Animal Control Officer to be certain to adhere to the order for Strict Confinement.

19. The term "Target Species" shall mean those animals at high risk for incubating rabies, including, but not limited to, raccoons, foxes, skunks, bats and woodchucks.

Part 3: Roles and Responsibilities

1. Local Animal Control Officer:
   a. The key person in rabies management is the local Animal Control Officer. All potential rabies exposures to humans or domestic animals are to be reported to the Animal Control Officer that has legal jurisdiction over the town/city where the exposure occurred.
   b. It is the responsibility of the Animal Control Officer to take the appropriate actions regarding the exposed animal and;
   c. If the victim of the exposure is a person, to report the incident to the Rhode Island Department of Health (HEALTH) for proper follow-up assessment and/or prophylaxis.
   d. The Animal Control Officer with jurisdiction over the municipality where the first known human or domestic animal exposure occurred is responsible for the transportation and submission of all specimens (from domestic animals or from wildlife where DEM Environmental Police Officers did not respond) obtained from animals to the virology lab of the Rhode Island Department of Health. This is necessary to ensure that a proper chain of custody is maintained for the sample and that the sample will be appropriately handled and stored en-route to the lab for analysis.
   e. The Animal Control Officer is responsible for enforcing any means of rabies control and/or suppression such as ordering quarantine and enforcing state laws regarding rabies vaccination.

See tables for guidance protocols for exposure of domestic animals to potentially rabid animals.
2. **Rhode Island State Veterinarian:**
   a. The State Veterinarian is the Chairman of the Rabies Control Board.
   b. The State Veterinarian will coordinate and assist Animal Control Officers in procedural matters.
   c. The State Veterinarian may assist in obtaining specimens for rabies testing when the animal to be tested is a farm animal or large wild animal.
   d. The State Veterinarian will also assist Veterinarians in formulation of management plans for animals that have signs consistent with rabies infection.

3. **The Rhode Island Department of Health (HEALTH):**
   a. HEALTH will assess rabies risk to humans who encounter animals. Based upon this assessment HEALTH will recommend the appropriate course of action, which may include post-exposure prophylaxis.
   b. All cases of human rabies exposures must be reported to HEALTH.
   c. HEALTH will test all approved specimens submitted to the virology lab with a request for rabies testing. Approval for testing may come from the Animal Control Officer, DEM Enforcement, the State Veterinarian, or HEALTH.

4. **Department of Environmental Management (DEM) Environmental Police:**
   a. DEM Environmental Police may assist with specific wildlife issues. Specifically, DEM Environmental Police will assist when a bat is found in a room or common area of a house where there is the following: a child, a domestic animal, a sleeping adult, an elderly person, a person who is impaired by the use of alcohol or drugs, or a person with a disability.
   b. DEM Environmental Police will forward information to HEALTH for all incoming calls from the public concerning a bat being found in an occupied dwelling regardless of whether an officer responded to the call.
   c. DEM Environmental Police will assist when there is contact between a wild animal and a person or domestic animal.
   d. DEM Environmental Police may assist when there is a wild animal outdoors that is exhibiting abnormal behavior.
   e. DEM Environmental Police will not assist in removal of nuisance wildlife from a building or other property when there has been no chance of rabies exposure to a person or domestic animal involving that animal.
5. **Physicians:**
   a. All physicians must report animal exposures to the RI Department of Health.
   b. All physicians must report cases consistent with clinical rabies to the RI Department of Health.
   c. Physicians will administer pre-exposure immunization as well as post-exposure prophylaxis as appropriate and as approved by the RI Department of Health.

6. **Veterinarians:**
   a. Veterinarians must have thorough working knowledge of all state Rabies laws, regulations, and policies, as well as the most current version of the Compendium of Rabies Prevention and Control as published by the National Association of State and Public Health Veterinarians.
   b. Veterinarians must promote rabies awareness for staff and clients.
   c. Veterinarians must educate clients of their legal responsibility to maintain current vaccination status of dogs, cats, and ferrets, as well as other animals, for which a USDA approved vaccine exists, that have contact with the public. Veterinarians should document cases where owners willingly fail to comply with rabies laws and make appropriate notation of such failure to comply in the animal’s veterinary record. Veterinarians should consider reporting those situations to the Animal Control Officer in the municipality where the animal resides.
   d. Veterinarians should formulate a hospital/clinic procedural policy for the following:
      i. Reporting and recording of all potential rabies exposures suffered by personnel to the Animal Control Officer in the municipality where the exposure occurred.
      ii. Ensuring that all staff remains currently trained and familiar with the state laws and regulations pertaining to rabies control.
      iii. Establishing and maintaining a contact sheet of rabies contacts.
      iv. Consider a policy for pre-exposure prophylaxis for all employees who handle animals.
      v. Establish a policy for management of animals that are potentially incubating rabies or exhibiting signs of rabies.
   e. All potential rabies exposures to personnel must be reported to the Animal Control Officer in the municipality where the exposure occurred.
   f. All animals for which rabies is a differential diagnosis must be reported to the State Veterinarian as soon as rabies becomes a consideration.
   g. All animals that present with a wound of unknown origin that is consistent with being inflicted by fighting with or being bitten by another animal (including but not limited to bite wounds, scratches, abscesses) must be reported to the Animal Control Officer in the municipality where the animal resides.
h. All rabies vaccination records and certificates must be kept in accordance with RI laws and regulations.

i. All rabies vaccinations must be performed in a manner consistent with state laws and regulations, and not be performed in a manner that is inconsistent with the guidelines set forth in this manual. Follow vaccine manufacturers label instructions for administration and duration of immunity. Be familiar with the definition of currently vaccinated.

j. Veterinarians may be asked to assist in obtaining samples for submission for rabies testing.

7. Nuisance Wildlife Control Specialists (NWCS):
   a. Nuisance Wildlife Control Specialists are professionals licensed by the DEM to assist the general public with wildlife problems. NWCS come in contact with a variety of wild mammal species including those classified as “target species” and for this reason should be considered at high risk of exposure.
   
   b. Pre-exposure prophylaxis should be considered for all persons working directly with wildlife.
   
   c. Proper measures such as use of gloves and other protective equipment to limit exposure must always be employed.
   
   d. All potential rabies exposures to humans or domestic animals must be reported to the local animal control officer immediately.
   
   e. If the situation warrants that an animal be submitted to the Department of Health for testing it must be euthanized in a manner that does not damage the brain.
   
   f. Do not immediately release or dispose of any bat that was found in peoples living quarters. Any bat that was found or was present in a room where someone was sleeping, where there was an unattended child, or a person with an impaired ability to communicate is a candidate for rabies testing. The local animal control officer and Department of Health must be contacted immediately.

8. Wildlife Rehabilitators:
   a. Wildlife rehabilitators are licensed by the DEM to provide care for injured and orphaned wildlife until such time as they can be returned to the wild. Wildlife rehabilitators handle a wide variety of wild mammals and should be considered at risk for exposure.
   
   b. Pre-exposure prophylaxis should be considered for all persons working directly with wildlife.
   
   c. Proper measures such as use of gloves and other protective equipment to limit exposure must always be employed.
   
   d. The rehabilitation of adult “target species” and bats of any age is prohibited by regulation.
e. Rehabilitation of juvenile “target species” requires a special permit from the DEM.

f. Any “target species” that dies while in confinement must be reported to the Department of Health.

g. When receiving injured or orphaned wildlife, the name, address, and telephone number of the person submitting an animal and the location where the animal was found must be recorded at the time of intake.

h. All potential rabies exposures to humans or domestic animals must be reported to the Animal Control Officer in the town where the incident occurred.

9. Public

a. Avoid wildlife contact between yourself, your pets, and your livestock.

b. Maintain dogs, cats, and ferrets currently vaccinated as required by law.

c. All animals that have public contact and for which a USDA licensed vaccine exists must be vaccinated according to RI regulation.

d. Report all potential rabies exposures that happen to you or your family to the Animal Control Officer in the municipality where the exposure occurred. All potential rabies exposures must be reported regardless of whether the animal that caused the exposure is domestic, wild, or currently vaccinated. You do not need to report bites from animals that are not mammals, however if an animal that is not a mammal bites you, you should contact your physician for advice.

e. Report all potential rabies exposures, in which your pets or livestock are victims, to the Animal Control Officer in the municipality where the exposure occurred. All potential rabies exposures must be reported regardless of whether the animal that caused the exposure is domestic, wild, or currently vaccinated. You do not need to report bites from animals that are not mammals, however if an animal that is not a mammal bites your pet or livestock, you should contact your veterinarian for advice.

f. Comply with all public health measures designed to protect you, your pets, and your livestock, including receiving rabies immunization, adhering to terms of quarantine or confinement orders, and reporting any illness in your animals.
# Rabies Contact Information

<table>
<thead>
<tr>
<th>Contact Name</th>
<th>Primary Number</th>
<th>Alternate Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Local Animal Control</td>
<td></td>
<td></td>
</tr>
<tr>
<td>RI Department of HEALTH</td>
<td>(401) 222-2577</td>
<td>(401) 222-7906</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(401) 272-5952</td>
</tr>
<tr>
<td>RI State Veterinarian</td>
<td>(401) 222-2781 ext. 4503</td>
<td>(401) 222-3070</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(after hours only)</td>
</tr>
<tr>
<td>RI Veterinary Paramedic</td>
<td>(401) 222-2781 ext. 4515</td>
<td></td>
</tr>
<tr>
<td>RI DEM Environmental Police</td>
<td>(401) 222-3070</td>
<td>(staffed 24/7)</td>
</tr>
<tr>
<td>Rabies Emergencies (After Hours)</td>
<td>(401) 222-3070</td>
<td>(staffed 24/7)</td>
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<td></td>
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<td></td>
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<tr>
<td>RI Division of Fish and Wildlife</td>
<td>(401) 789-7481</td>
<td></td>
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<tr>
<td>RI Dept. of HEALTH Lab (submissions)</td>
<td>(401) 222-5600</td>
<td></td>
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<tr>
<td>RI Veterinary Medical Association</td>
<td>(401) 751-0944</td>
<td></td>
</tr>
</tbody>
</table>
## Protocol Summary for Management of Domestic Animals that Potentially Expose People

<table>
<thead>
<tr>
<th>The attacking animal is a dog, cat, or ferret, and, the animal appears <strong>HEALTHY</strong></th>
<th>Animal is Currently Vaccinated</th>
<th>Animal is NOT Currently Vaccinated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Notify ACO who will: 1. Order Euthanasia and subsequent testing, or; 2. Issue an order of quarantine or strict confinement for 10 days.</td>
<td>Notify ACO who will: 1. Order Euthanasia and subsequent testing, or; 2. Issue an order of quarantine for 10 days, and; 3. Vaccinate at time of release from quarantine</td>
<td></td>
</tr>
</tbody>
</table>

| The attacking animal is a dog, cat, or ferret and the animal does not appear to be healthy | Contact HEALTH who will: 1. Consult with State Veterinarian 2. Consult with ACO 3. HEALTH will make final determination regarding quarantine, confinement, and/or testing of animal | Contact HEALTH who will: 1. Consult with State Veterinarian 2. Consult with ACO 3. HEALTH will make final determination regarding quarantine and/or testing of animal 4. If quarantined, vaccinate at time of release |

| The attacking animal is other than a dog, cat, or ferret. (i.e. Livestock) | Contact HEALTH who will: 1. Consult with State Veterinarian 2. Consult with ACO 3. HEALTH will make final determination regarding quarantine, and/or testing of animal | Contact HEALTH who will: 1. Consult with State Veterinarian 2. Consult with ACO 3. HEALTH will make final determination regarding quarantine and/or testing of animal 4. If quarantined, recommend vaccination at time of release unless otherwise required |
# Protocol Summary for Domestic Animals that are Exposed to Wildlife

<table>
<thead>
<tr>
<th>Exposure Level</th>
<th>Animal is Currently Vaccinated</th>
<th>Animal is NOT Currently Vaccinated</th>
</tr>
</thead>
</table>
| **Highest Likelihood of Exposure**: Direct Contact or Exposure From a **Known** Rabies Positive Animal (animal tested and confirmed to have rabies) | 1. Notify ACO  
2. Booster Rabies Immediately  
3. ACO will order Strict Confinement for 45 days | 1. Notify ACO  
2. Euthanize or,  
3. Hold animal in Quarantine for six (6) months.  
4. Rabies Vaccinate Immediately |
| **High Likelihood of Exposure**: Direct Contact or Exposure From a **Suspect** Rabies Positive Animal (animal was not tested or specimen could not be tested) | 1. Notify ACO  
2. Booster Rabies Immediately  
3. ACO will order Strict Confinement for 45 days | 1. Notify ACO  
2. Euthanize or,  
3. Hold animal in Quarantine for six (6) months.  
4. Rabies Vaccinate Immediately |
| **Moderate Likelihood of Exposure**: Wound of Unknown Origin (wounds consistent with being bitten or scratched including cat abscesses) | 1. Notify ACO  
2. Booster Rabies Immediately  
3. 45 day close observation by owner. Owner to report any abnormal behavior to ACO | 1. Notify ACO  
2. Rabies Vaccinate Immediately  
3. ACO will order Strict Confinement for six (6) months* |
| **Low Likelihood of Exposure**: Exposure By Proximity (the domestic animal could not have had contact with the wild animal even though they were near each other) | 1. Notify ACO  
2. No further action is necessary, ACO will recommend vaccine booster  
3. recommend 45 day close observation by owner. Owner to report any abnormal behavior to ACO | 1. Notify ACO  
2. Rabies Vaccinate Immediately  
3. 6 month close observation by owner. Owner to report any abnormal behavior to ACO |

*Strict confinement may be used for **victim** animals if they are not currently vaccinated but not for **attacking** animals.
# Protocol Summary for Domestic Animals that are Attacked by Other Domestic Animals

<table>
<thead>
<tr>
<th>Status of Attacking Animal</th>
<th>Victim Animal is Currently Vaccinated</th>
<th>Victim Animal is NOT Currently Vaccinated</th>
</tr>
</thead>
</table>
| **Highest Likelihood of Rabies Transmission:** Attacking Animal has been Confirmed Positive for Rabies Virus Infection | 1. Notify ACO  
2. Booster Rabies Immediately  
3. ACO will order Strict Confinement for 45 days | 1. Notify ACO  
2. Euthanize or,  
3. Hold animal in Quarantine for six (6) months.  
4. Rabies Vaccinate Immediately |
| **High Likelihood of Rabies Transmission:** Attacking Animal is not Present for Quarantine or Testing | 1. Notify ACO  
2. Booster Rabies Immediately  
3. ACO will order Strict Confinement for 45 days | 1. Notify ACO  
2. Euthanize or,  
3. Hold animal in Quarantine for six (6) months.  
4. Rabies Vaccinate Immediately |
| **Medium Likelihood of Rabies Transmission:** Attacking Animal is NOT Currently Vaccinated and is Present | 1. Notify ACO  
2. Quarantine Attacker for ten (10) days  
3. Vaccinate Attacker upon release from Quarantine | 1. Notify ACO  
2. Quarantine Attacker for ten (10) days  
3. ACO will order 10 day Strict Confinement for Victim*  
4. Vaccinate Attacker upon release from Quarantine  
5. Vaccinate Victim Immediately |
| **Low Likelihood of Rabies Transmission:** Attacking Animal is Currently Vaccinated and is Present | 1. Notify ACO  
2. Strict Confinement for the Attacking Animal for ten (10) days | 1. Notify ACO  
2. Vaccinate Victim Immediately  
3. Strict Confinement for the Attacking Animal for ten (10) days |

*Strict confinement may be used for victim animals if they are not currently vaccinated but not for attacking animals.
Rhode Island State Health Laboratories (SHL)
Protocol for Rabies Specimen Submission (Feb 2012)

General Requirements:

1. Clinical rabies in any suspect domestic or wild animal must be reported to the State Veterinarian (222-2781 or 222-3070 after hours). Consultation with the State Veterinarian is required regarding management of these animals. The State Veterinarian will in turn report to IDE (Division of Infectious Disease and Epidemiology) to assess human risk. Lab testing will be recommended on a case-by-case basis.

2. Any potential exposure to a human from a clinically rabid animal or any other animal must be reported immediately to IDE (222-2577 and after-hours: 272-5952.) Do not discard animals (especially bats) before IDE has determined that no exposure has occurred.

3. Only the heads of domestic and wild animals (not whole animals) must be submitted.

4. Bats may be submitted whole.

5. Cattle, goats, sheep or other animals with suspect TSE (Transmissible Spongiform Encephalopathy) diseases are not tested at the SHL. See further instructions in following section on bovine and small ruminants.

6. Package the animal head in a two layers of heavy-duty plastic bags. Deliver to the lab as soon as possible to ensure integrity. If you cannot deliver specimen within 24 hours of death, refrigerate or place in a cooler with ice until delivered, avoid freezing.

7. Deliver to the SHL between 8:30 AM-4:30 PM, Monday through Friday (excluding holidays).

8. For DEM use only, an outside refrigerator with a number combination lock is available for weekend drop-off and storage.

9. Submit all specimens with a Rabies Testing Form (see below). Fill out the form completely.

10. Testing on improperly submitted specimens and/or specimens accompanied by incomplete forms will be delayed. The submitter will be required to return to the SHL and repackage or complete the form. If you have any questions about packaging, contact the SHL at 222-5588, before submitting.

11. If attending veterinarians wish to have any remaining specimens held for further testing or for cremation or burial (for rabies negative specimens only), note this on the Rabies Testing Form. The SHL will contact the veterinarian when rabies testing is completed.
Species Specific Requirements:

Wild Animals (small terrestrial animals such as Skunks, Raccoons, Foxes, etc):

- Decapitate (or arrange with a veterinarian to decapitate) and submit the head. Exceptions must be discussed on a case-by-case basis.

Wild Animal (Bats Only):

- Submit whole bats only.
- Euthanize bats unless it cannot be performed without risk of escape of the bat or without risk of rabies exposure to the person performing the euthanasia. Ideally, make arrangements with a pest control company or veterinarian for euthanasia.
- When euthanasia cannot be performed, submit live bats in a small, clear plastic, and well-sealed container in a manner that the bat can be seen within the container. Also, place the container within a leak-proof bag. Make small ventilation holes in the container so the bat can breathe and conspicuously mark the container with “CAUTION-Live Bat Inside.” DEM staff must deliver live bats during business hours only. Do not place live bats in the outside refrigerator.

Dogs and Cats:

- The ACO in the town where the most recent known exposure occurred is responsible for transportation of the animal’s head to the SHL.
- The ACO in the town where the most recent known exposure occurred is responsible for ensuring that only the head of the animal is submitted.
- Veterinarians are encouraged to assist with proper specimen preparation for dogs and cats by performing the decapitation of animals being submitted.

Other Small Domestic Pet Animals:

- Follow the same policy for Dogs and Cats

Large Animal Species (Equine):

- Attending veterinarian is to decapitate the animal when possible (if euthanized by veterinarian), and to safely package the specimen for transportation to the SHL.
- The ACO in the town where the animal was euthanized is then responsible for transportation to the SHL.
- If the attending veterinarian is not present when the animal dies, the State Veterinarian or Animal Health Technician will decapitate the animal and transport the specimen to the SHL.
- Attending veterinarian is required to report suspicion of EEE and/or WNV if these diseases are considered differential diagnoses at the time of submission for rabies testing. Rabies testing will be completed as a priority, and if the results are negative for rabies, EEE and/or WNV testing will be performed at the SHL.
Large Animal Species (Bovine and Small Ruminant):

- TSEs are possible in some cattle and small ruminants (sheep and goats), and the signs may be consistent with rabies. If a TSE is a potential differential diagnosis when an animal is being tested for rabies, notify the State Veterinarian prior to submission since the sample will need to be handled differently and submitted to a lab with the capability to diagnose TSEs, and not the SHL.
- All cattle specimens will be submitted to the University of Connecticut Veterinary Diagnostics Laboratory. Rabies testing will be the priority, and if negative for rabies, the remaining sample will be tested for TSE. Exceptions may be discussed on a case-by-case basis.
- Sheep and Goat samples for which Scrapie is a possibility will be submitted to the University of Connecticut Veterinary Diagnostics Laboratory. Rabies testing will be the priority, and if negative for rabies, the remaining sample will be tested for Scrapie.
- Sheep and Goat samples for which Scrapie is not considered a differential diagnosis will be tested at the SHL.
- For all Cattle, Sheep, and Goats that die with signs consistent with rabies, but were not euthanized by a veterinarian, the State Veterinarian or Animal Health Technician will obtain appropriate samples for testing and will be responsible for proper packaging and lab submission.
- For all Cattle, Sheep, and Goats that are euthanized by an attending veterinarian, the veterinarian should decapitate the animal and properly package the sample.
- For all Sheep, and Goats that are euthanized, decapitated, and tissue samples packaged by a veterinarian:
  - For those that are only being tested for rabies, the ACO in the town where the animal is euthanized is required to transport to the SHL.
  - For those that a TSE is a differential diagnosis, the State Veterinarian or Animal Health Technician will arrange proper transportation to the proper laboratory.

All OTHER Animals not specifically covered: Contact the State Veterinarian for specific advice and/or assistance with submission of samples.

Test Results and Reporting

SHL will perform the rabies test on properly submitted specimens only. In most cases, testing will be completed the day of submission (if submitted before 11 AM) or on the following day. In rare cases the specimen will require additional testing, which will delay the results by several days. When testing is completed, SHL will immediately report (fax) test results to IDE and the State Veterinarian. IDE and the State Veterinarian will report results to the submitter and/or follow up with case management.

Important Telephone Numbers

State Health Laboratories Rabies Lab: 222-5588 or 222-5600 (main switchboard)
Health Department IDE: 222-2577 and after-hours: 272-5952

State Veterinarian: 222-2781, x 4503 and after hours: DEM Dispatch 222-3070.
Instructions for Submitter: Use this form to submit animal specimens for rabies testing. Complete sections I, II and III below. Submit animal head in double heavy-duty plastic bags. Deliver to the State Health Laboratories 8:30 AM-4:30 PM, Monday through Friday (excluding holidays). Infectious Disease and Epidemiology staff will provide results by telephone (usually within three business days). Contact the Food and Water Microbiology Lab Unit (222-5588) for submission questions. Contact Infectious Disease and Epidemiology (222-2577) for human exposure case management questions. Contact the State Veterinarian (222-2781) for animal exposure case management questions.

I: Submitter Information

Name and Organization: ____________________________________________________________
Street, City, State and Zip: _______________________________________________________
Telephone number(s): ___________________________________________________________

II: Specimen Information

Animal species (type): ____________________________ □ Pet □ Stray □ Wild □ Other_________

III: Exposure Information

<table>
<thead>
<tr>
<th>Name of Person(s) and/or Pet(s) Potentially Exposed</th>
<th>Telephone number(s)</th>
<th>Street and City/Town Where Exposure Occurred</th>
<th>Date(s) of Exposure</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>
Please provide exposure details:
________________________________________________________________________
________________________________________________________________________

Note: Use reverse if more space is needed

IV: Lab Information and Test Results

For Lab Use Only

<table>
<thead>
<tr>
<th>Specimen number:</th>
<th>Date Received:</th>
<th>Tech:</th>
</tr>
</thead>
</table>

Results for Rabies: □ Negative □ POSITIVE by Direct Fluorescent Antibody Method □ Other (list)

Results completed by: __________ Date: __________
Results confirmed by: __________ Date: __________
Results faxed by: __________ Date: __________
Entered into NEDSS by: __________ Date: __________