New Hampshire Department of Health and Human Services Division of Public Health Services Public Health Laboratories

SUBMISSION OF ANIMAL SPECIMENS FOR RABIES TESTING

The following guidelines are to be followed when submitting an animal specimen to the Public Health Laboratories for rabies testing:

- The accompanying form is required when specimens are submitted.
- Specimens may be submitted by authorized individuals, including NH veterinarians, NH Fish & Game officers, and Animal Control Officers.
- Private citizens may only submit specimens after obtaining approval from either the Bureau of Infectious Disease Control (603-271-4496) or the State Veterinarian's office (603-271-2404).
- If you wish to have a specimen tested but have not yet obtained approval, please contact the Bureau of Infectious Disease Control at 603-271-4496.

NH PUBLIC HEALTH LABORATORIES

29 Hazen Drive, Concord, NH 03301

General Lab: 603-271-4661 Rabies Lab: 603-271-4665 SUSPECT RABIES INFORMATION FORM

Please type or prin	orm must be on the <u>outside</u> o t. Please do not tape this for required for specimen exami	m to the container.	FOR PHL LAB USE ONLY DATE: TIME: RECEIVED BY:	
PERSON / FACILI	TY - AGENCY REQUESTING	3 TESTING:		
PERSON / FACILITY - AGENCY REQUESTING TESTING: Last Name:First Name:				
		Fax:		
City/town:		State:	Zip:	
Last Name:		First Name:		
Phone:	Address	S:		
City/town:		State:	Zip:	
TOWN OF INCIDE	:NT:	COUNTY:		
ANIMAL TYPE: ANIMAL ID (VET #; OWNER'S NAME):				
SUBMITTED ANIMAL'S RABIES VACCINATION STATUS:			REASON FOR REQUEST: Please check ALL that apply.	
			☐ Bite ☐ Scratch ☐ Saliva ☐ Handling	
☐ CURRENT	☐ UNVACCINATED	11	☐ Symptoms/Signs of Rabies☐ Found in Home (bats)☐ Domestic Animal Exposure	
		☐ Unknown Cause of Death		
☐ EXPIRED ☐ UNKNOWN		☐ Other	☐ Other	
	lunt Force Trauma 🗆 Drowni	ng □ Euthanasia □ Illness □ n □ Other	•	
DATE OF DEATH: BY				
(If applicable) Person(s) Exposed: Part of Body Exposed:				
Person(s) Exposed: Part of Body Exposed: Date Of Exposure: Domestic Animal Exposed:				
Parent or guardia	n of exposed person, if ap	plicable		
Phone:Address:Zip:				
City/town: Zip:				
Please list all per	sons exposed. If additiona	Il space is needed, please a	ttach list to this form.	
ADDITIONAL RE	SULT RECIPIENT		Hard copy needed	
Phone:		Fax:		
Address:				
City/town:		State:	Zip:	
FOR PUBLIC HEA	ALTH LAB USE ONLY			
☐ Test NEGATIVE for Rabies		Time Reported to BIDC:	Time Reported to BIDC:	
☐ Test POSITIVE	for Rabies	Analyst Initials:		
☐ Unable to Test	Comment:	-		

NH PUBLIC HEALTH LABORATORIES 29 Hazen Drive, Concord, NH 03301

GUIDELINES FOR SUBMITTING A SPECIMEN FOR RABIES TESTING

DELIVER SPECIMEN MONDAY THROUGH FRIDAY 8:00 AM TO 3:30 PM
IF POSSIBLE, NOTIFY LABORATORY PRIOR TO DELIVERY: CALL 603-271-4661 or 603-271-4665
AFTER HOURS EMERGENCY TESTING CALL 603-271-5300

The New Hampshire Public Health Laboratories (PHL) performs rabies testing free of charge on any mammal that has been determined to have exposed a human or domestic animal in a New Hampshire town/city by a Public Health Nurse or other authorized party (see page 1). <u>Small rodents may be tested only on a case-by-case basis</u> after consult with the NH Bureau of Infectious Disease Control (603-271-4496) or NH State Veterinarian (603-271-2404).

Border towns: Be aware that incidents only occurring in NH may be tested at the NH PHL. Specimens associated with incidents occurring outside of NH must be sent to the respective state lab of the town of incident.

DO NOT DELIVER LIVE ANIMALS. The lab does not provide euthanasia.

The state does not provide transportation. The city/town where the domestic animal incident occurred is responsible for transporting the suspect animal to the PHL. However, anyone can transport a properly packaged specimen in a timely manner including: the owner of the animal, vet staff, couriers, or the exposed person/ family involved in the incident.

Wild animals: contact the NH Dept. of Fish and Game dispatch: 603 - 271- 3361.

Large animals (i.e. horses) suspected of neurological disease: please contact the NH Veterinary Diagnostic Laboratory Tel: 603-862-2726. They will remove the brain for testing.

Please LEGIBLY COMPLETE ALL AREAS of the Information Form on the reverse side and attach to the OUTSIDE of the transport container. Please do not use packing tape to attach it.

SPECIMEN PREPARATION:

- A. Do not club or shoot in the head. The skull must remain intact.
- B. Refrigerate specimen immediately.
- C. Freezing is not recommended. Contact the Public Health Labs before freezing a specimen. Frozen brain tissue softens when thawed and this can prevent reliable testing.
- D. The **head of the animal must be removed** from the body. The only exception is bats, which are accepted whole because we need the body to identify the species.
- E. **Specimen must be fresh**. The specimen should be delivered as soon as possible after the animal's death. The test cannot be performed if the specimen is decomposed or infested with maggots.
- F. Do not send specimen in formalin. The test cannot be performed on formalin-fixed tissues.

PACKAGING:

- A. Specimen should be <u>double bagged</u> in heavy plastic bags.
- B. EACH bag should be properly sealed.
- C. If specimen has any sharp protruding parts (shattered bone or porcupine quills), wrap it in several layers of newspaper first.
- D. Place <u>properly</u> bagged specimen in an insulated container and surround the specimen with frozen packs or wet ice contained in plastic bags.
- E. If an insulated container is not available, line a box with several layers of newspaper and surround specimen with frozen freezer packs, ONLY. Wet ice may leak.
- F. Close securely with tape.
- G. TRANSPORT CONTAINER CANNOT BE RETURNED.