

## Wildlife Incident Report Form

Submitter Information	Incident Information
Submitter's Name: _____	Date of Observation: _____
Dept/Organisation: _____	Date of Report: _____
Address: _____	<b>Location</b> (Exact Location - with GPS data if possible): _____
_____	
_____	
_____	
Phone: _____ Fax: _____	Landowner and land access: _____
Mobile #: _____	_____
Signature: _____	_____

**Animal Details:**

Species Affected:

Total of Each Species: Unaffected/Normal:

Sick:

Dead:

Approximate Ages of Affected Animals:

Sex of Affected Animals:

Male:

Female:

**Description of Incident:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**Environmental Conditions:** Weather, recent rainfall, sea conditions, recent local use of chemicals, changes in ground water levels, changes in domestic animal management: **Clinical Signs of Animals:**

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Management Actions Taken:** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**Specimens Collected:**

Animals Euthanased/Died:

Samples Fresh/Frozen:

Entire Carcasses: \_\_\_\_\_

\_\_\_\_\_

Microbiology: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Histopathology: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Photos: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Frozen Tissues (for Toxicology or Viral Culture): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Tissues for Other Researchers: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Specimens Sent Where or Stored Where: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_