Animal Bites
Training Module
October 2011
Welcome to I-NEDSS

The **Indiana National Electronic Disease Surveillance System** training program!

This training module introduces users to Animal Bite reporting via I-NEDSS.

This module also presents the electronic process and workflow of Animal Bite reporting.
410 IAC

410 IAC 1-2.3-52 Animal bites; specific control measures

Authority: IC 16-19-3-4; IC 16-41-2-1
Affected: IC 15-17-6-11; IC 16-41-2; IC 16-41-9

Sec. 52. (a) The specific control measures for animal bites are as follows:

(1) Every case of a human bitten by a domestic or wild mammal shall be reported within twenty-four (24) hours to the local health officer having jurisdiction. If a physician is in attendance, the physician shall report the bite. It shall be the duty of the local health officer to report information concerning the bite on the prescribed form. The report shall include requested information on postexposure rabies prophylaxis if it is being administered to the bite victim. Each reported bite shall be investigated immediately by the local health officer. This investigation shall be conducted with the purpose of determining the need for postexposure rabies prophylaxis of the bite victim and either:

(A) imposing a ten (10) day observation period on the biting animal (dog, cat, or ferret only) to determine if the animal was capable of transmitting rabies at the time of the biting incident; or

(B) submission of the head, if the biting animal is a potential rabies vector, to the department laboratory to determine if it was infected with rabies.

To review the remaining control measures of Animal Bites, click link in the CD List located in I-NEDSS.
Who reports animal bites?

- Animal Control Officers
- Hospital Infection Preventionists
- Physicians
- Local Health Departments
- Humane Societies
- Police Officers
- Others?

*Animal bites can be reported via I-NEDSS by an authorized I-NEDSS user.*
Animal bites to report:

- Any mammal bite
Animal bites not to report:

- Arthropods (insects)
- Reptiles
- Amphibians
- Birds
- Fish
I-NEDSS is changing Indiana’s communicable disease reporting method

Paper reporting form: I-NEDSS electronic reporting:
How to become an I-NEDSS user:

- Contact the I-NEDSS Support Desk: I-NEDSS@isdh.IN.gov or call 317.233.7379
- Credentials must be confirmed by ISDH
- Training is provided via ISDH Field Staff

Last revision 10/20/2011
New Organization Type

Animal Quarantine Facilities can now become users of I-NEDSS for reporting animal bites.

Contact the I-NEDSS Support Desk to become an I-NEDSS user:
I-NEDSS@isdh.IN.gov or call 317.233.7379
I-NEDSS Reporting Features

- Electronic reporting saves time & paper
- Easy to use Internet web browser-based system
- Database of patient demographics & historical records
- Online entry of data, inquiries and updates
- Print and report options available
- I-Mail securely sends sensitive patient data
- I-Reports generates user-based activity reports
- Automatic notifications are sent to LHD and ISDH

Last revision 10/20/2011
### Acronyms & Info to Know

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AQF</td>
<td>Animal Quarantine Facility</td>
</tr>
<tr>
<td>CDR</td>
<td>Communicable Disease Report</td>
</tr>
<tr>
<td>EPI</td>
<td>Epidemiologist</td>
</tr>
<tr>
<td>IAC 410</td>
<td>Indiana Administrative Code 410 (Communicable Disease Reporting Rule)</td>
</tr>
<tr>
<td>IP</td>
<td>Infection Preventionist</td>
</tr>
<tr>
<td>ISDH</td>
<td>Indiana State Department of Health</td>
</tr>
<tr>
<td>LHD</td>
<td>Local Health Department</td>
</tr>
<tr>
<td>SME</td>
<td>Subject Matter Expert (a.k.a. EPI)</td>
</tr>
</tbody>
</table>
Accessing I-NEDSS

- Authorized log-in ID (username) required
- Password required
- Contact Support Desk for user access
- Initial User Training required (3 hours)

Reminders:
- Automatic system time-out after 30 minutes of inactivity
- User deactivation if no system activity in 90 days

Last revision 10/20/2011
To Report an Animal Bite (non-LHD role):

- Log-in I-NEDSS
- Search for patient (victim) name
- Create patient file if name is not found in database
- Open patient file
- Add CDR (Disease = Animal Bite)
- Animal Bites Case Investigation form appears
- Complete & submit form (automatically sent to LHD)
- After report is reviewed by LHD, reporter can File CDR

Last revision 10/20/2011
I-NEDSS Homepage

All names and data on slides is fictional test data

Last revision 10/20/2011
Search for Patient File

Click patient name to open patient file

Last revision 10/20/2011
Create Patient only if not found
Open Patient File

Last revision 10/20/2011
Click Add CDR
Select “Animal Bites” for Disease
Animal Bites Case Investigation form is displayed for entry:
Report Information

Necessary data includes:
- Incident location address,
- County
- Exposure Date
- Victim first and last name,
- Species
**Victim Information**

<table>
<thead>
<tr>
<th>Person bitten/Animal victim's owner:</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Name:</strong> JOHN DOE</td>
</tr>
<tr>
<td><strong>Patient ID:</strong> P487027</td>
</tr>
<tr>
<td><strong>Mothers’ Maiden:</strong> N/A</td>
</tr>
<tr>
<td><strong>Address:</strong> 123 MAIN ST., APT 13</td>
</tr>
<tr>
<td><strong>City:</strong> YOURTOWN, IN 46204</td>
</tr>
<tr>
<td><strong>County:</strong> MARION</td>
</tr>
<tr>
<td><strong>Telephone Number:</strong> N/A</td>
</tr>
<tr>
<td><strong>Date of Birth:</strong> 3/27/1962</td>
</tr>
<tr>
<td><strong>Age:</strong> 49 Years</td>
</tr>
<tr>
<td><strong>Multiple Birth:</strong> No</td>
</tr>
<tr>
<td><strong>Gender:</strong> MALE</td>
</tr>
<tr>
<td><strong>Race(s):</strong> OTHER/MULTIRACIAL</td>
</tr>
<tr>
<td><strong>Ethnicity:</strong> UNKNOWN</td>
</tr>
<tr>
<td><strong>Physician’s Name:</strong> Dr. Timothy Winters</td>
</tr>
<tr>
<td><strong>Phone Number:</strong> (800)555-1212</td>
</tr>
<tr>
<td><strong>Fax Number:</strong></td>
</tr>
<tr>
<td><strong>Address:</strong> 403 UNIVERSITY BLVD</td>
</tr>
<tr>
<td><strong>City:</strong> INDIANAPOLIS, IN 46202-5148</td>
</tr>
<tr>
<td><strong>Occupation:</strong> N/A</td>
</tr>
</tbody>
</table>

[EDIT DEMOGRAPHICS]
## Owner Information

**Communicable Disease Report - Animal Bites**

### Owner of Animal:
- **Last name:** Smith
- **First name:** Richard
- **Middle name:**
- **Date of birth:** 09/22/1952
- **Street address:** 123 Main St.
- **City:** Anytown
- **Sex:** Male
- **Home phone:** (765) 555-1111 x___
- **Work phone:** (317) 555-1234 x___

### Biting Animal:
- **Breed:** unknown
- **Color/Markings:** Brown & white
- **Name:** Mickey
- **Sex:** Male
- **Neutered:** Unknown
- **Animal's Veterinarian:**
  - **Name:** none
  - **Phone:** (___) ____ __________
- **Rabies vaccine:** No
- **Vaccination date:**

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Comments:

Victim was treated at hospital.
Attachment & Saving the CDR

The Animal Bites reporter may Save & Submit once all data is completed. Submitted CDR is transmitted to proper LHD.
The Animal Bites report is checked as “Submitted.” Once CDR is reviewed by the LHD, the Reporter may “File” CDR (this removes CDR from My Reports).
LHD Role

LHD must review all Animal Bite notifications. Upon receipt of Animal Bite notification, start a case investigation. Review submitted information and confirm that the following is recorded:

- Incident Location Address
- County
- Exposure date
- Victim Last and First name
- Species (animal identification or other)
LHD Role continued

After receiving and confirming necessary data, submit Animal Bite Case Investigation for Review.

After submitting, the case appears as Submitted and Reviewed in My Reports on Homepage. The case may be “Filed” which removes the case from My Reports.

If LHD initiates an Animal Bite report, LHD should initiate a Case Investigation (not a CDR) to record and submit data in I-NEDSS.
When the LHD receives an Animal Bites notification, the Investigator clicks “View” to open the report and start a Case Investigation:
LHD Investigator confirms necessary data is present:

<table>
<thead>
<tr>
<th>Report Information</th>
<th>Victim Information</th>
<th>Owner Information</th>
<th>Comments</th>
<th>Status</th>
</tr>
</thead>
</table>

**Incident location address:** 101 Main St.  
**County:** Hancock  
**Exposure Date:** 10/03/2011  
**Reported Date:** 10/04/2011  
**Reported Time:** 10:00 AM  
**Reported by (name):** R. Kelley  
**Reported by (phone):** (317) 555-1212 x___  
**Received by (name):** Mike Pace  
**Received by (phone):** ___-___ x___  
**Release date:** Not Available  
**Reporting agency case number:** Not Available  
**Reporting agency:** Not Available  
**Bite classification:** Not Available  
**Biting Animal Species:** Cat  
**Was incident on property?:** Not Answered  
**Did the animal exhibit any of the following:** Inability to eat/drink

**Necessary data includes:**  
- Incident location address,  
- County  
- Exposure Date  
- Victim first and last name,  
- Species
LHD Submits Case Investigation for Review

To dismiss or reassign a case, submit a Support Request stating this needs to be done. Include the case investigation ID and/or patient ID.
After LHD Submits for Review

Animal Bite Case Investigations will appear immediately as “Submitted” and “Reviewed.” Investigator may “File” report to remove case from My Reports.
Process of Animal Bite Reports

1. Reporter submits Animal Bite CDR
2. LHD receives Animal Bite notification and starts a Case Investigation
3. LHD reviews and/or requests required data, then Submits Case Investigation for Review (process completed)

Last revision 10/20/2011
Paper Animal Bite Report

If I-NEDSS cannot be used for an Animal Bite Report, please submit the paper Animal Bite Report form which is located online:

http://www.in.gov/isdh/19042.htm
Questions and Review
Thank you!

If you have questions or comments, please contact the I-NEDSS Support Desk:

I-NEDSS@isdh.IN.gov or call 317.233.7379