

Internal Use State ID _____

County _____

Entry Date _____

Dead Bird Submission Form

Internal Use WADDL Log Information

Client

Washington State Department of Health
Office of Environmental Health & Safety
PO Box 47825
Olympia, WA 98504-7825

Submitter

Refer to Submitting Agency below

Case Number (place case number label here)

Submitter Please Complete This Section

Collection Location

Location Name _____

Physical Address _____

Address 2 _____

City/State _____

County _____

Zip Code _____

GPS Coordinate

Latitude (i.e., 47.198062) _____

Longitude (i.e., -122.386037) _____

(Please report your GPS coordinate in decimal degrees with a minimum of six decimal places.)

Location Description _____

Collection Date ____/____/____

Species of Bird Collected _____

Trauma Associated Unsure Yes No

FedEx Airbill # _____

Local ID _____

Online Tracking Number _____

(For reports received through the DOH Online Dead Bird Reporting System)

Submitting Agency

Name _____

Address _____

City/State/Zip _____

Contact Person _____

Phone _____

Fax _____

Email _____

Person Reporting Dead Bird(s)

Date of initial report ____/____/____

Name _____

Phone _____

Date dead bird(s) found or seen ____/____/____

Number of bird(s) seen _____

Species of bird(s) _____

Comments _____

Submit Specimen For Testing To

Please submit specimen to:

Washington Animal Disease Diagnostic Laboratory
Washington State University
Bustad Hall Room 155-N
Pullman, WA 99165-2037
(509) 335-9696

Only submit specimens from birds that have been dead for no more than 24 hours. Complete a reporting form for each specimen submitted. Additional questions contact David Kangiser of Washington State Department of Health at 360.236.3064 or email at david.kangiser@doh.wa.gov.