



# HARMFUL ALGAL BLOOM-RELATED ANIMAL ILLNESS NOTIFICATION

State Form 55580 (3-14)  
INDIANA STATE DEPARTMENT OF HEALTH  
INDIANA STATE BOARD OF ANIMAL HEALTH

State use only

HABISS # \_\_\_\_\_

Date \_\_\_\_\_

## Identifying Information for Notifying Party

Name \_\_\_\_\_

Telephone \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

County \_\_\_\_\_

Animal Owner (if not notifying party)  
\_\_\_\_\_

## Notifying Party (check one)

- General Public
- Veterinarian
- County Agency
- Other (specify): \_\_\_\_\_
- Biologist
- State Agency

## Animal Description

Does the case involve a domestic animal?

- Yes
- No
- Stray
- Unknown

Species:

- Canine – Breed/Description \_\_\_\_\_
- Livestock – Type \_\_\_\_\_
- Bird – Number Affected \_\_\_\_\_
- Other – Type/Describe \_\_\_\_\_

Sex  Male  Female  Unknown

Age \_\_\_\_\_  Months  Years

Neutered  Yes  No  Unknown

Approximate weight \_\_\_\_\_  Pounds  Kilograms

Did the animal receive veterinary care?

- Yes
- No
- Unknown

## Exposure Information

Date of exposure     /    /      
mm dd yyyy

How long exposed? \_\_\_\_\_  Hours  Minutes

Location of exposure

- Home/Private Water body
- Public Water body

Name of water body \_\_\_\_\_

Location \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Environmental Conditions

Visible algae or scum present

- Yes
- No
- Unknown

If yes, what color? \_\_\_\_\_

Unusual odors

- Yes
- No
- Unknown

Any sick or dead animals (besides case)?

- Yes
- No
- Unknown

If yes species & number \_\_\_\_\_

Additional information \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Clinical Signs and Symptoms

- General
- Ear, nose, and throat
- Respiratory
- Cardiovascular
- Gastrointestinal
- Genitourinary
- Musculoskeletal
- Neurologic
- Dermatologic (skin)

Explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Animal's Current Disposition

- Date released (mm/dd/yyyy) \_\_\_\_\_
- Still hospitalized (as of (mm/dd/yyyy)) \_\_\_\_\_
- Date died (mm/dd/yyyy) \_\_\_\_\_
- Don't know

Please **FAX** completed forms to: Indiana State Board of Animal Health: (317) 974-2011 or **E-MAIL** to [animalhealth@boah.in.gov](mailto:animalhealth@boah.in.gov).