

AZ SICK BIRD CALL FORM

Risk: High Low

AZ Prem ID

NPIP #

FAD #

Date Time Call Taken By

Bird Owner Caller Name

Premise Address

E-mail Mobile Number Home Number

City State Zip Code County

GPS

Chickens Turkeys Ratites Waterfowl Exotics Other

Total Birds in Flock Operation Type

Sick Age Onset Date How Long?

Dead Age Onset Date

New additions last 90 days? YES NO When Arrived Name/Address

Birds shipped last 90 days? YES NO When Shipped Name/Address

Bird shows last 90 days? YES NO When Name/Address

Foreign Travel last 90 days? YES NO When Where

Any Wildlife Contact? YES NO When

Vaccinations

Veterinarian Phone # Address

Feed Store Used, Phone #, Address

Neighbors with birds? YES NO Name/Address

History & Clinical Signs

Assessment/Plans Advised take to Vet Path Lab AI/END samples taken Samples sent to UA NVSL NAHLN
 Quarantine Premises (verbal) No action taken refer to DVM

Plans / Comments

Please save and email this form to diseasereporting@azda.gov