



# ALEXANDRIA HEALTH DEPARTMENT

## Environmental Health Division

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Health Director

October 26, 2015

Meghan Webb – Executive Director  
Animal Welfare League of Alexandria  
4101 Eisenhower Ave  
Alexandria, VA 22304

Dear Ms. Webb:

### **RE: Proposed changes to City Ordinance 5-7-37**

The Alexandria Health Department supports the changes proposed by the Animal Welfare League of Alexandria to Alexandria City Ordinance Section 5-7-37 to remove the current requirement to confine any animal for a period of ten (10) days or more that has committed an attack on an animal or person as the language as currently written is not based on public health rationale and requires healthy, vaccinated animals to be subject to confinement when bitten by other healthy, vaccinated animals, which is an unnecessary burden.

The proposed change allows the Health Department to give instructions to the Animal Welfare League of Alexandria regarding appropriate confinement of animals based on scientific principles and current Centers for Disease Control and Prevention guidance.

To support the proposed change to City Ordinance 5-7-37, the Health Department has drafted an updated Rabies Control Plan which aims to ensure that the residents of Alexandria are protected from the rabies virus. The plan acts as a working document and ensures that only those animals most at risk of infection are quarantined and confined on grounds of public safety.

Attached is a copy of the draft plan that would be implemented in the event that Council adopts the proposed changes to City Ordinance 5-7-37.

I hope that our letter of support, combined with our mutual commitment to work together to ensure that safety of our residents, will assist in the adoption of this Ordinance change.

Sincerely,

Stephen A. Haering, MD, MPH, FACPM  
Health Director

Enc: Draft Rabies Control Plan

**ALEXANDRIA HEALTH DEPARTMENT**

**VECTOR-BORNE ILLNESS PREVENTION  
PROGRAM**

**RABIES CONTROL PLAN**

**DRAFT**

**October 2015**

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## **I. Introduction**

Rabies is a deadly disease caused by a virus that attacks the central nervous system of those it affects. Once symptoms of the disease develop rabies is nearly always fatal. Rabies is transmitted primarily through bites from infected animals, or by exposure to saliva or brain tissue of an infected animal. Due to the serious nature of this disease, the Alexandria Health Department, through coordination with the offices of Vector-Borne Illness Prevention, Epidemiology, Public Health Emergency Management, and Health Director, has developed a Rabies Control Plan.

### **A. Purpose**

The Alexandria Health Department (AHD) and the City of Alexandria are committed to protecting individuals and their pets from the rabies virus. The purpose of this plan is to describe how AHD and its City partners and contractors will communicate with each other and the public, as well as coordinate and provide services necessary to the prevention and control of rabies in the community.

This document serves as the City of Alexandria Rabies Control Plan as required by the Code of Virginia [§ 3.2-6562.1](#).

### **B. Scope and Applicability**

The AHD Rabies Control Plan provides direction and guidance to AHD and city partners for both routine rabies control operations, as well as response to larger rabies-related incidents. This plan is applicable to AHD and City Departments and contractors that have routine responsibilities in rabies management, and works in accordance with the [Virginia Guidelines for Rabies Prevention and Control](#).

### **C. Plan Assumptions**

Because rabies is endemic to Virginia and the entire National Capitol Region, residents and pets of the City of Alexandria are vulnerable to exposure.

The City of Alexandria contracts with the Alexandria Animal Welfare League for animal sheltering and rabies source reduction services, as well as animal specimen preparation and decapitation for testing.

Key AHD and Animal Control personnel, as well as alternates, are identified and trained by their respective organizations in the implementation of this plan.

Inova Alexandria Hospital and Veterinary offices within the City of Alexandria will follow State reporting requirements regarding possible rabies exposure or case of rabies in animal or human.

All organizations ensure that employees to whom this plan applies will maintain up-to-date voicemail message and other out-of-office tools indicating alternate contact

information for the next available contact when they will be unreachable for one business day or longer.

Reports for non-Alexandria residents are forwarded to the appropriate home jurisdiction; likewise, reports for Alexandria residents occurring in other districts are forwarded to AHD for follow-up. A hospital syndromic surveillance system will continue to be operated and accessible by AHD staff.

## **II. Rabies Control Plan**

### **A. Initial Response and Notification**

Notification of possible human and/or animal rabies exposures are generally received through three possible methods. The procedures followed for each of these methods of notification are outlined below.

#### **1. Case Received by Animal Control**

Upon notification of an animal bite or exposure:

- The Animal Control Officer (ACO) shall collect a brief history of the event and contact information will be collected and will be forwarded to the Environmental Health (EH) Division of AHD.
- If a suspected rabid animal is at large, an ACO shall notify EH by phone immediately. These instances will be handled on a case-by-case basis with close coordination between the Health Director, EH, Epidemiology, Animal Control, and other entities as necessary.
- When an ACO responds to a call in which a possible human and/or domestic animal has had a low risk rabies exposure, they shall send an Animal Control Bite Report to AHD's EH Division by email within 24 hours.
- When an ACO responds to a call in which a possible human and/or domestic animal has had a high risk rabies exposure, they shall notify AHD's EH Division by phone immediately. Animal Control shall forward a copy of their Bite Report within one business day.
- ACO shall notify EH by phone of any concerns regarding exposures immediately.

#### **2. Case Discovered through Hospital Syndromic Surveillance System**

Epidemiologist shall review all bites from Hospital Syndromic Surveillance System each business day.

Potential human rabies exposures may be discovered by AHD staff during routine emergency room syndromic surveillance. This occurs when records indicate a patient has received Post-Exposure Prophylaxis (PEP) for rabies or has been bitten by an animal.



### 3. Case Received from Hospital or Health Care Provider

Health care providers should notify AHD of bites or wounds inflicted by animals as required by [Sec 5-7-40 b. of Alexandria, Virginia - Code of Ordinances](#); health care providers are encouraged to consult with AHD for any possible rabies exposure. Notification of possible human exposure from hospital or urgent care facilities may be received through fax or phone call to AHD. Health care providers may call AHD's 24/7 Communicable Disease phone with questions about possible rabies exposure as they arise. Upon receiving a call, the epidemiologist will advise the provider regarding recommendations for PEP; the epidemiologist shall provide initial information regarding [confinement](#) or [testing](#) of an animal as well as instructing the facility to send AHD a bite report.

Epidemiologist shall determine if a case meets the definition of human exposure as defined in the Virginia Guidelines for Rabies Prevention and Control.

#### B. Case Follow Up

For all bite reports, the following applies:

- EH shall forward all reports requiring confinement of an animal to Animal Control within one business day.
- The ACO shall assume responsibility for locating all affected parties within 24 hours and shall enforce confinement according to the Virginia Guidelines for Rabies Prevention and Control. The decision to confine an animal shall be made through consultation with EH when necessary.
- A fully completed Animal Control Bite Report shall be faxed or emailed to EH within one business day.
- Epidemiologist shall forward all low risk human exposures reported within one business day to EH for follow up.
- EH shall follow-up on potential [high risk domestic animal](#) exposures immediately (within 24 hours).
- EH shall call all individuals with low risk human exposure to conduct a phone interview within two business days.
- All high risk human exposures shall be followed up by the Epidemiologist immediately (within 24 hours). If PEP has not been initiated, but is recommended, an Epidemiologist will make [PEP recommendations](#) and follow up with individual to ensure proper compliance, and follow all [human exposure response](#) procedures.
- EH shall ensure all information about animals submitted for testing and bite reports are entered into the AHD Bite Database within two business days.
- Cases that are more complicated than average shall be managed by an Epidemiologist and brought to the Health Director; EH will be notified of all such cases.

## **C. Confinement Responsibility and Reporting**

### **1. 10 Day Confinement**

EH shall notify Animal Control of any confinements issued by AHD regarding a possible rabies exposure. Animal Control shall enforce all confinements issued by AHD in accordance with the Virginia Guidelines for Rabies Prevention and Control, Virginia Code [§ 3.2-6522](#) and [Alexandria Code Sec 5-7-37](#). Animal control is responsible for ensuring the animal is confined. Animal Control shall be responsible for verifying and reporting the status of the animal during confinement.

When AHD determines that an animal shall be placed into 10 day confinement, AHD shall notify Animal Control within 24 hours. The health status of the animal shall be verified by an ACO upon the animal's release and the ACO shall notify EH of the release within 24 hours. EH shall notify affected persons of the release of the confinement within two business days.

### **2. 45 Day Confinement**

When it is determined that an animal shall be placed into 45 day confinement Animal Control shall be notified. Exposed animals shall be given a rabies booster immediately (within 24 hours). A fully completed Animal Control Bite Report shall be faxed or emailed to EH within one business day. The health status of the animal shall be verified by an ACO upon the animal's release and the ACO shall notify EH of the release within 24 hours.

Depending on the type of exposure, animals with a history of multiple vaccinations and a recently expired vaccination may be handled as if the animal was currently vaccinated.

### **3. 6 Month Confinement**

AHD shall be responsible for determining six-month confinements on a case-by-case basis – all decisions will be made in conjunction with the Health Director.

When a six-month strict isolation is enforced, as defined in the Virginia Guidelines for Rabies Prevention and Control in accordance with Virginia Code § 3.2-6522, EH and Animal Control shall cooperatively inspect and approve the structure of the isolation pen. Animal Control shall verify the health status and detention of the animal through an in-person visit each month and upon release. A fully completed Animal Control Bite Report shall be faxed or emailed to EH within one business day of each inspection and upon release.

Animal Control shall verify appropriate rabies vaccination has been administered to animal in isolation, either upon the animal's entry into

isolation or before its release as described in the Virginia Guidelines for Rabies Prevention and Control.

#### **4. High Risk Domestic Animal Quarantines**

Healthy vaccinated domestic animals that bite, scratch, or expose other healthy vaccinated domestic animals are considered low risk for rabies transmission, and are not subject to quarantine. There are circumstances where quarantine and observation for rabies may be appropriate. The following domestic animals may have an elevated risk for rabies transmission and will be subject to quarantine.

- If the exposing animal is stray or feral.
- If the owner of the exposing animal is not present at the time of exposure, and cannot be located.
- If the exposing animal is exhibiting symptoms associated with rabies.
- If the exposing animal has recently traveled or has been imported into the country.

When the exposing animal is a dog or cat the quarantine period for that animal is ten days. A longer quarantine period may be established by the health director under extreme circumstances to determine the health status of any animal. The exposed animal will be subject to confinement if the exposing animal meets any of the above criteria and is not available for observation.

#### **5. Animal Health Incidents during Confinement**

If an animal in confinement exhibits symptoms consistent with rabies or expires for any reason, Animal Control shall notify EH within 24 hours. If the animal was involved in a human exposure, EH shall immediately notify Epidemiology who will consult with the Health Director. If the animal is showing signs of rabies, the animal shall be evaluated by a licensed veterinarian. If the veterinarian confirms the signs of illness are indicative of rabies infection, then upon direction of the Health Director in accordance with the Virginia Guidelines for Rabies Prevention and Control, the animal shall be euthanized by an ACO or licensed veterinarian by one of the methods approved by the State Veterinarian. If the animal was implicated in any exposure prior to or during confinement, it should be tested for rabies in accordance with the Virginia Guidelines for Rabies Prevention and Control. AHD shall notify potentially exposed individuals of the change in the exposing animal's health status, and of possible need for PEP.



## **D. Laboratory Testing**

### **1. Specimen Submission**

EH shall coordinate all laboratory testing. If an animal is to be submitted for rabies testing, the ACO shall ensure euthanasia, and appropriate, safe decapitation for specimen submission to [DCLS](#). If specimen is a bat or small rodent, the whole animal shall be submitted for testing. EH shall provide coolers to ship rabies samples. The ACO shall then deliver the prepared specimen to EH within 24 hours of capture, or the following business day if the animal was captured on a holiday or weekend. If AHD is closed for three or more consecutive days (e.g. three-day or holiday weekend), Animal Control shall call the EH 24/7 phone number or Epidemiology 24/7 phone number for guidance.

### **2. Testing Results and Reporting**

If laboratory test results are positive, EH shall notify Epidemiology (if human exposure associated) and Animal Control of laboratory test results immediately. In the case of a human exposure, AHD will immediately attempt to contact the exposed individual and advise them to visit a local hospital emergency department as soon as possible for initiation of appropriate rabies immune globulin and PEP. The Health Director shall be notified. Activating an Incident Management Team will be considered.

If laboratory test results are negative, EH shall notify Epidemiology (if human exposure associated) and Animal Control within one business day of receipt of test results. AHD shall inform the exposed person of negative test results within one business day.

Animal Control will inform the owners of animals involved of any laboratory results within one business day of receiving them from EH.

## **E. Human Exposure Response**

For any human who meets the definition for exposure as defined in the Virginia Guidelines for Rabies Prevention and Control, AHD will make the following determinations & recommendations:

- Determine if PEP treatment for rabies has been initiated.
- Determine previous rabies vaccination history of person exposed (not the animal).
- Establish status of last tetanus vaccination (recommend booster if not up to date).
- Medical conditions (Note: There are no known contraindications to rabies vaccine).

- Recommend that exposed individual obtain immediate medical treatment, including PEP if needed.
- If PEP is indicated, advise persons with compromised immune system to receive additional rabies vaccine on Day 28 after initiation of the full PEP series.
- Discuss potential future travel that may interfere with rabies prophylaxis.

The Epidemiologist will consult with the Health Director before making a final decision on PEP recommendations with regard to potentially exposed persons who have unusual exposure circumstances for whom recommendations may not be clearly delineated in the VDH or the [Centers for Disease Control and Prevention \(CDC\) guidelines](#).

## **1. PEP Recommended**

AHD will refer the individual to an emergency room for initiation of the vaccine series and Rabies Immune Globulin (RIG) if indicated, as well as explain the proper schedule of visits and vaccine administration. For all Alexandria residents receiving PEP, Epidemiologist will enter the information into the AHD Bite Database. This will be the source of information for required notification to VDH. Epidemiology will notify EH of all Alexandria residents receiving PEP.

Once PEP has been initiated, the Epidemiologist will track adherence with vaccine schedule until the full series is completed. If a dose is missed, the individual will be contacted within one business day to ensure follow-up.

In the event that PEP is recommended and the individual declines or does not complete the series, the Epidemiologist will make every attempt to ensure that the individual understands the associated risk and potential consequences of refusing prophylaxis. Documentation of conversations will be made in the report file. The Epidemiologist shall immediately consult the Health Director for all persons who decline PEP or fail to complete their series. A follow-up certified letter, return receipt requested, will then be mailed to the individual's home reiterating what was discussed. If a parent refuses PEP for a child, Epidemiologist will notify the Health Director for assistance in determining if involvement of Child Protective Services is required.

## **2. PEP Not Recommended**

IF exposure is determined to be low risk for rabies, the Epidemiologist will forward the report to EH for follow up to inform that PEP is not indicated; individuals with medical concerns will be referred to follow up with their health care provider.