Chronic Wasting Disease Surveillance Form

A chronic wasting disease surveillance form for recording observations of deer or elk that look sick, so landowners can pass accurate information to the wildlife agency.

Farm / unit: _____ Date: _____ By: _____

Date of sighting _____

Location _____

Species _____

Signs observed _____

Animal status _____

Number of animals _____

Photos taken _____

Agency contacted _____

Handling precautions noted _____

Reporter name _____

NOTES / CALCULATIONS

TIP Contact your state wildlife agency for testing and carcass handling rules before moving any animal.