

# Poultry Avian Influenza Incident Form

## 1. Location Information

Farm Name

Farm Address

City

State/Province

Postal Code

Country

## 2. Contact Person

Full Name

Phone Number

Email Address

## 3. Flock Details

Poultry Species

**Number of Birds**

**Average Age of Birds**

**Production Type**

#### **4. Incident Information**

**Date of Onset**

**Clinical Signs Observed**

**Number of Mortalities**

**Actions Taken**

#### **5. Additional Information**

**Comments**