

# SARS-CoV-2 Wildlife Rehabilitation Biosecurity Requirements

## Special Species Rehabilitation Application

<b>Certification</b>
I agree to abide by all biosecurity requirements in this document. I hereby certify that the information I provided is true and correct. I understand that not abiding by requirements or providing incorrect information may result in revocation of authorization to rehabilitate the species indicated on this application.
<b>Wildlife rehabilitator signature</b>
<b>Date signed</b>

Indicate which species this application is for:

- White-tailed deer (spring/summer only, overwintering will not be authorized)
- Big brown bats (spring/summer months only; overwintering will not be authorized)

Rehabilitator information

Name(s):

Facility name:

Address:

Phone:

Email:

Provide descriptions, pictures and documentation that includes an explanation of all the following. Refer to the above outline for further details and include information for all required sections.

- Personal Protective Equipment** – Provide documentation of this practice.

Describe below or attach PPE protocol:

Facemasks/respirators -

Eyewear -

Gloves -

Clothing -

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**Training** – Develop and institute training for personnel on risk mitigation measures that reduce the risk of transmission between people or people and wildlife patients.

Describe below or attach:

Risk of disease transmission training -

Biosecurity principles and practices -

**Communications** – Develop an internal communications protocol for staff and volunteers.

Describe below or attach:

Sick leave policy/Transfer protocol -

Care-taker mask and social distance policy -

Self-reporting policy -

**Staffing** – provide protocol.

Describe below or attach:

Staffing protocol -

**Wildlife Care** – Describe how protocols are modified to meet biosecurity needs.

Describe below or attach:

Initial quarantine protocol -

Species specific log -

Describe workflow: including descriptions of indoor and outdoor enclosures, animal care housing, handling, food, water, and medical supplies, care-taker hand washing procedures.

Release criteria -

**Facility Biosecurity** – Describe below or attach how the facility meets biosecurity needs.

Ventilation -

Power and utility supply -

Footbaths/shoe covers -

Disposal protocol -

Cleaning and disinfecting protocol -

**Reporting/notification of suspects** – Describe reporting protocol for both animal and human health.

Will IMMEDIATELY report to:

Dr. Lindsey Long, [lindsey.long@wisconsin.gov](mailto:lindsey.long@wisconsin.gov)

Amanda Kamps, [amanda.kamps@wisconsin.gov](mailto:amanda.kamps@wisconsin.gov)

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Tami Ryan, [tamara.ryan@wisconsin.gov](mailto:tamara.ryan@wisconsin.gov)