# **Department of Legislative Services**

Maryland General Assembly 2014 Session

#### FISCAL AND POLICY NOTE

House Bill 89 (Delegate Tarrant) Health and Government Operations

#### **Health - Reports Relating to Dog Bites - Required Information**

This bill creates additional data elements to be captured when a dog bite is reported locally. Individuals who know or suspect that an animal, or another individual, has been exposed to a possible rabies infection from a dog bite must report (1) the breed of the dog; (2) the approximate size of the dog; and (3) the circumstances surrounding the incident, including the physical location of the individual when the bite occurred.

# **Fiscal Summary**

**State Effect:** The Department of Health and Mental Hygiene (DHMH) and the State Public Health Veterinarian can handle the bill's requirements within existing budgeted resources. This bill requires that additional data be captured at the local level, but it does not otherwise affect reporting requirements.

**Local Effect:** Local health departments and the Frederick County animal control center can handle the bill's requirements with existing resources. These departments already collect data on animal bites, and several already require individuals to report the additional information specified by the bill.

Small Business Effect: None.

# **Analysis**

**Current Law:** An individual must report to the local police or sheriff, or in Frederick County to the animal control center of Frederick County, if that individual knows or suspects that an animal or another individual has been exposed to a possible rabies infection.

Once reported, the police, sheriff, or animal control center staff must notify the health officer for the county where the report is made and enforce any subsequent orders from the health officer and the public health veterinarian. If an order to surrender an animal is issued, a person may not hide the animal. Any person who fails to comply is guilty of a misdemeanor and subject to a fine up to \$500.

**Background:** There is no uniform collection of dog bite data in the United States, and no national agency in charge of collecting dog bite data. As a result, it is difficult to draw conclusions on dog bite trends. Dog bite data is collected by different entities and under different circumstances. Data is collected by hospitals, animal control departments, government agencies, and various interest groups. Data can be self reported, collected from hospital administrative records, or collected in surveys.

A dog bite incident is defined and verified by the data collecting entity, which range in their qualifications and standards. A "dog bite" could include anything from a benign nip to a severe bite. In some circumstances, coding decisions by some organizations could result in a scratch being tallied as a bite incident. In addition, information on the circumstances surrounding the incident, such as whether the dog was provoked, is not usually collected.

In Maryland, local health departments report on a monthly basis to the State Public Health Veterinarian at DHMH on animal bites to humans in each county, broken down by species. A representative from DHMH, however, cautioned that the county breakdown for this data could be unreliable because counties define "bite" differently and use different tracking and reporting systems.

On the national level, the most reliable information on dog bites is collected through samples of hospital administrative data. Nationally, representative samples of hospital inpatient and emergency department data allow research on national dog bite trends with limited problems from duplicate reports of the same incident, self reporting errors, varying definitions and verification standards, and political bias. This data still provides an incomplete picture, however, because the vast majority of dog bites are not severe enough to warrant a trip to the emergency room.

#### **Additional Information**

**Prior Introductions:** None.

**Cross File:** None.

**Information Source(s):** Carroll, Harford, Montgomery, Queen Anne's, and St. Mary's counties; Department of Health and Mental Hygiene; Maryland Association of Counties; Maryland Association of County Health Officers; Department of Legislative Services

Fiscal Note History: First Reader - January 23, 2014

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