

# Washington State VETERINARIAN



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## COVID-19 Animal Testing WSDA Guidance April 2020

### Animal Testing Authorization

- Neither the Centers for Disease Control (CDC), United States Department of Agriculture (USDA), nor American Veterinary Medical Association (AVMA) recommends that companion animals be routinely tested for COVID-19 at this time. WSDA will not authorize testing of the general companion animal population.
- The decision to test an animal will be authorized by the Washington State Veterinarian, Dr. Brian Joseph or, in the event he is unavailable, Washington State Assistant State Veterinarian, Dr. Amber Itle in conjunction with the interim Department of Health (DOH) Public Health Veterinarian, Dr. Beth Lipton.
- The Washington State and Public Health Veterinarians can only authorize testing of Washington origin animals.
- **Authorization for testing will be conducted on a case by case basis:**
  - When requested by a **private veterinarian** who is reporting
    - A new, concerning illness that cannot be otherwise explained **AND**
    - The companion animal has had close contact with a person with confirmed or suspected COVID-19 infection **AND**
    - That testing for infectious diseases that commonly cause companion animal illness to have been conducted to rule out COVID-19.

CONTINUED ON PAGE 2

## Inside this issue

Important COVID-19 resources for Veterinarians	Page 2
Reportable disease statistics	Page 3
Subscribe to CDC's new Healthy Pets, Healthy People newsletter	Page 3
A COVID-19 message to equestrians	Page 4
Many imported dogs skirt rules, pose heartworm risks	Page 5
Sheep and Goat official ID decision tree for interstate commerce	Page 6
Sheep and goat regulations	Page 6
Bolster equine immunity for show season	Page 7
States that still accept 7001 forms	Page 7
Moving Cattle	Page 8
Important changes to equine infectious anemia testing	Page 8
There's a new tick in town	Page 9
Rabbit hemorrhagic disease update	Page 10

## COVID-19 Animal Testing WSDA Guidance April 2020, continued from page 1

- When requested by **academic institutions** for the purpose of research:
  - The proposal, sampling criteria, animal species and scope of the project will be outlined prior to authorization.
  - Researchers will establish an endpoint for each study in conjunction with WSDA based upon time and date or number of animals/households tested.
  - If the scope of the project, the testing criteria, or the endpoint changes, the State Veterinarian must authorize those changes.



### Veterinarian Authorization:

- Once the decision is made to test, the State Veterinarian will authorize and designate, a state-appointed veterinarian, USDA accredited veterinarian, or Foreign Animal Disease Diagnostician (FADD) to collect the sample using [appropriate personal protective equipment](#).
- Sample collection methods will be verified with guidance from the Washington Animal Disease and Diagnostic Laboratory (WADDL).
- Official sampling will follow [USDA guidance](#).

### Laboratory and Reporting:

- [Washington Animal Disease and Diagnostic Laboratory \(WADDL\)](#) will conduct initial animal testing and provide test kits to authorized veterinarians.
- SARS-CoV-2 (COVID-19) detection in any animal is reportable per [OIE guidance](#).
- **Positive results**
  - Will require confirmation through additional testing by USDA's National Veterinary Services Laboratory (NVSL).

### Important COVID-19 Resources for Veterinarians:

- » [WSVMA COVID-19 resources for veterinarians](#)
- » [CDC's FAQs pertaining to COVID-19 and animals](#)
- » [USDA sample procedures](#)
- » [United States Department of Agriculture FAQ on companion animal testing](#)
- » [CDC Guidance for managing people in home care and isolation with pets](#)
- » [American Veterinary Medical Association](#)
- » [OIE guidance](#)
- » [National Association State Public Health Veterinarians](#)

- Will only be reported publicly when confirmed by NVSL and information has been communicated with the Washington State Veterinarian and the Public Health Veterinarian.
- WSDA will communicate the information to USDA, AVMA, CDC and National Assembly State Animal Health Officials (NASAHO) and work with those groups for unified messaging.

### Management of animals in COVID-19 positive households

- WSDA will default to [AVMA guidance](#) and [CDC's guidance](#) concerning the management of animals in [shelters](#) and [households](#) in which a human has tested positive for COVID-19.
- There is no current guidance available regarding quarantine of test positive dogs, cats or other pets. WSDA will follow any guidance provided by the USDA/CDC working group if new information becomes available.
- If an animal has a positive result, WSDA will not remove the animal from the home.
- [AVMA guidance](#) suggests dogs should be walked outside for elimination and exercise but direct contact with other companion animals should be avoided as a best practice to protect animal health.
  - Feces should be collected using gloved hands or a bag and disposed of immediately.
  - Ideally, these dogs should be walked in an area that can be readily sanitized in a dedicated area separate from the general animal population.

### Messaging

- At this time, there is no evidence that companion animals, including pets, can spread COVID-19 to humans.
- WSDA has authorized a limited number of research projects to test animals to:
  - Help identify risk factors for human to animal transmission of COVID-19.
  - Gain an understanding of prevalence of infected dogs and cats in COVID-19 infected homes and shelters in WA.
  - Understand the role of companion animals in virus transmission, if any. ☞

# Washington Reportable Disease Stats

## JANUARY 2020

DISEASE REPORTED	ANIMAL	NUMBER
Brucellosis ( <i>Brucella canis</i> )	Canine (dog)	3
Heartworm	Canine (dog)	4
Leptospirosis	Canine (dog)	2
Streptococcus equi zooepidemicus	Canine (dog)	2
Strangles ( <i>Streptococcus equi subsp. equi</i> )	Equine (horse)	6
Viral hemorrhagic disease of rabbits (calicivirus)	Lagomorphic (hare, rabbit, pika)	1

## FEBRUARY 2020

DISEASE REPORTED	ANIMAL	NUMBER
Heartworm	Canine (dog)	5
Leptospirosis	Canine (dog)	6
Lyme Disease ( <i>Borrelia burgdorferi</i> )	Canine (dog)	2
Salmonellosis	Bovine (cow)	3
Strangles ( <i>Streptococcus equi subsp. equi</i> )	Equine (horse)	2
Streptococcus equi zooepidemicus	Canine (dog)	1

## MARCH 2020

DISEASE REPORTED	ANIMAL	NUMBER
Coccidioidomycosis ( <i>Coccidioides immitis</i> ) (valley fever)	Canine (dog)	1
Contagious ecthyma (Orf)	Caprine (goat)	2
Heartworm	Canine (dog)	8
Leptospirosis	Canine (dog)	1
Strangles ( <i>Streptococcus equi subsp. equi</i> )	Equine (horse)	2

## APRIL 2020

DISEASE REPORTED	ANIMAL	NUMBER
Heartworm	Canine (dog)	1
Salmonellosis	Canine (dog)	1
Strangles ( <i>Streptococcus equi subsp. equi</i> )	Equine (horse)	1

## Subscribe to CDC's new Healthy Pets, Healthy People Newsletter

CDC has a new [Healthy Pets, Healthy People](#) newsletter to provide updates and tips on staying healthy around animals, including pets, farm animals, and wildlife.

[Subscribe](#) to the newsletter to get information on the benefits of pet ownership, tips on keeping pets and people healthy, and updates on outbreaks linked to animals and animal products. ☘



# A COVID-19 message to equestrians

**Dr. Brian Joseph, Washington State Veterinarian**

For horse owners and people who work with horses, we see little cause for concern about equine susceptibility or transmission; no evidence currently links the virus that causes COVID-19 with disease in horses nor are there any indications that horses can infect humans with the virus.

A virus in the coronavirus family, equine coronavirus (ECoV), can cause gastrointestinal disease in horses with signs of fever, depression diarrhea and colic, but this variant is NOT the same as the virus that causes COVID-19.

The [Equine Disease Communication Center](#) has recently put together valuable resources about the [differences in ECoV and COVID-19](#).

## Concern about people

Although our horses are relatively safe for the pandemic, people participating in equine activities and events such as group trail rides, boarding, training and lessons are still at risk.

At a time when we are trying to control the spread of COVID-19, we need Washington's equine enthusiasts to do their part, too, by adhering to strict limits on, or completely avoiding gatherings of any kind.

## Improve your biosecurity for horses

We need to improve our personal biosecurity and that of our horses. So, here are some best practices that were developed with the help of [our colleagues in Kentucky](#) to adjust equine activities to protect public health during this time. I urge you to implement these best practices in your facility and in your activities:

- Open barns to allow as much fresh air exchange as is possible.
- Assign equipment to an individual horse. Virus can be carried on equipment (ie: halters, shovels, brushes, cross ties, etc.)
- [Clean and disinfect equipment daily](#). This is always a good practice and can decrease the spread of other important equine viruses such as equine influenza virus and equine herpes virus. Clean and disinfect surfaces such as desks, rails, gates, floor mats having contact with individuals or equipment daily.
- Prepare and complete records electronically. Paper records or common dry erase boards can be a pathway for virus to pass between people.
- Limit the number of daily visitors to farms. Consider a schedule



*Horses are not susceptible to COVID-19, but horse owners should avoid gathering with people around horse barns etc.*

that limits the number of individuals on the farm to be less than 10 at any one time.

- Farm employees and horse owners should practice social distancing. This is the only way to stop the spread of the virus.
- Farm employees should take their own temperature twice daily and self-quarantine if they have a fever. Fevers should be reported to the barn manager. Designate someone else to care of the sick person's horse.
- Do not to move your horses between stables unless it is essential.
- Practice excellent [biosecurity](#). Clean and disinfect your tack and your trailer including the wheels. Moving horses to new stables causes them stress which can suppress their immune system making them more susceptible to disease.
- Follow [CDC's recommendations](#) and wash your hands frequently with soap and water.

One other note: WSDA's brand program not doing field inspections for horses (lifetimes or annuals) to observe social distancing during this crisis. This work will resume as soon as it is safe.

I understand that some of what we are recommending is inconvenient, some of it costs money, but if we all work together, we can stop the spread of this virus. All our health, our economy and the quality of our lives depends on our working together. ☘

## From the WSDA Ag Briefs Blog

- [A COVID-19 message to equestrians](#)
- [Agriculture, more essential than ever](#)
- [WSDA's COVID-19 response](#)

Read other posts  
and subscribe at:

wastatedeptag.  
blogspot.com

# Many imported dogs skirt rules, pose heartworm risks

Dr. Amber Itle, WSDA Assistant State Veterinarian

Many dog rescue organizations are skirting state and federal regulations by misrepresenting the ownership status and health of dogs they import, increasing the risk of spreading heartworm and other diseases.

Many dog rescue organizations are skirting state and federal regulations by misrepresenting the ownership status and health of dogs they import, increasing the risk of spreading heartworm and other diseases.

The American Veterinary Medical Association (AVMA) estimates that 48 million U.S. households have dogs. The Centers of Disease Control and Prevention (CDC) estimates 1 million dogs are imported into the U.S. each year from all over the world. Texas alone imports 12,000 dogs from other countries annually. Some of the largest export countries to the United States include: China, Republic of Korea, Qatar, Turkey, Russia, Thailand, Ukraine, Spain, and Mexico.

Dogs are imported into major U.S. ports and then moved through rescue organizations all over the country. The U.S. Department of Agriculture (USDA) imposed an import system about three years ago, but many loopholes for movement remain.

Import requirements are different for “owned dogs” and dogs imported by rescue organizations. If dogs are resold or their ownership or control is transferred through adoption, rescues, or wholesales, the organization is required to get a [permit to import dogs](#). If the dog is privately owned (i.e. military personnel), then the dog is exempt from all requirements. Some rescue organizations exploit the system by claiming that they “own” the dogs or that they have arranged adoptions in advance to claim “handler” status as a U.S. buyer and avoid “change of ownership” requirements.

If the rescue dogs follow the legal pathway, four U.S. agencies are involved: USDA’s Animal Care issues a permit for purpose of resale; USDA Veterinary Services requires a certificate veterinary inspection (CVI) for animal health with a screwworm statement; U.S. Centers for Disease Control and Prevention (CDC) enforces rabies requirements for designated countries; and U.S. Customs and Border Protection addresses security and commerce.

Dogs imported into the U.S. for the purpose of resale or adoption must be at least 6 months of age and vaccinated for rabies. Importers can fill out an application and obtain a permit online. The import permit and documents (rabies and CVI) must be signed by a veterinarian. Pets that don’t change ownership are exempt from the permit, creating a loophole for many imported dogs. Dogs that come in as “excess or accessory baggage” are not covered under the regulations.

In February, a pet clinic in Minnesota warned its clients about a counterfeit heartworm product manufactured in China being sold on Amazon. The product’s packaging is almost identical

to the actual Heartgard® preventative manufactured by Merial. Amazon eventually removed the counterfeit, but given the influx of international canine imports this and other scams have already increased heartworm exposure risks for pets in the U.S.

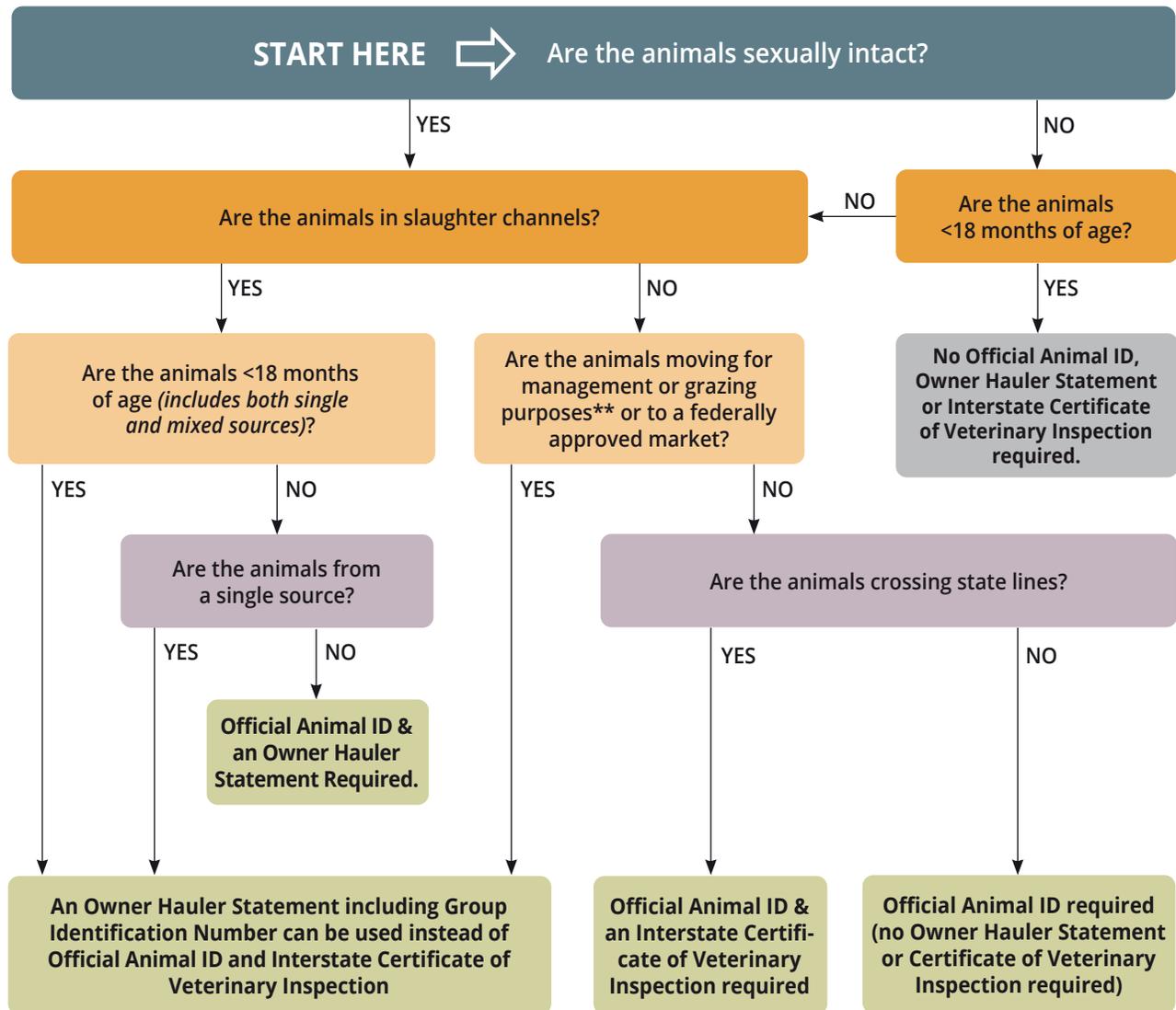
Remember to routinely test dogs for heartworm and verify rabies vaccination, especially those with a history of being “rescued.” A dog may have a TX origin on a health certificate, but there is a chance the dog was imported from other countries. In 2019, there were 167 cases of heartworm reported in Washington State. We believe most of those reports are from dogs imported from out of state. Although the State Veterinarian does not believe heartworm disease is endemic to WA, each year there are thousands of dogs being imported into the U.S. from other countries. Many of these animals don’t meet our requirements, putting our domestic canine population at risk. Counterfeit heartworm preventative certainly isn’t helping solve this problem. ☹



The photos on the left show the real Heartgard products. The photos on the right show the fake products found on Amazon.

[facebook.com/lakevillefamilypetclinic/posts/update-the-fake-heartgard-has-been-pulled-off-of-amazon-so-great-news-thank-you-/2227995817507664/](https://facebook.com/lakevillefamilypetclinic/posts/update-the-fake-heartgard-has-been-pulled-off-of-amazon-so-great-news-thank-you-/2227995817507664/)

# Federal sheep and goat official identification decision tree for animals in interstate commerce\*



\* These rules begin applying when the animal first enters interstate commerce which includes but is not limited to animals unloaded at markets, sales, exhibitions or other sites where interstate commerce occurs; moved across a state line; sold to an out-of-state buyer; or animals acquired by people who engage in interstate commerce.

\*\*Only applies when both premises are owned or leased by the same person and there is no commingling with other unidentified animals from another herd.

## SMALL ANIMALS

# Sheep and goat regulations

Dr. Ben Smith, WSDA Field Veterinarian

USDA enacted a few rule changes for interstate movement of sheep and goats this past year. Primarily, goat tagging requirements are now the same as those for sheep. USDA will no longer supply free scrapie tags to owners. New flock owners qualify for up to 100 free plastic tags, but others must purchase tags. USDA offers guidance with photos of official ID and how to apply ID to animals without ears. To request these official sheep and goat tags, a flock or premises ID or both, call 1-866-USDA-Tag (866-873-2824). Check the [USDA website](#) and more information. ☞

EQUINE

# Vaccinations and boosters to bolster equine immunity for show season

Dr. Susan Kerr, WSDA Education and Outreach Specialist

Washington and many other states around the U.S. saw significant upticks in equine viral disease in 2019. Equine Herpes Virus 1 (EHV-1), Equine herpesvirus myeloencephalopathy (EHM), and Equine Influenza Virus (EIV) were in the news, along with ever-present strangles. Also, several other diseases were reported more than usual in 2019: Eastern and Western Equine Encephalitis (EEE and WEE), Equine Infectious Anemia (EIA), and Piroplasmiasis. West Nile Virus (WNV) continues to be a concern. With milder winters, these vector-borne diseases may become more common in the future.

Vector-borne diseases are a concern for all horses, but contagious viral diseases are higher risk for horses taken off their farm for exhibitions or gatherings with other horses. Timing vaccinations to synchronize maximum protection with maximum risk is possible for EIV, EHV-1, EEE, WEE, WNV, and strangles. Annual booster vaccinations for the mosquito-borne diseases (EEE, WEE, and WNV) should be given to every horse each spring well in advance of mosquito season. EIV boosters should be given to at-risk horses every 6 months and timed to ensure high protective antibodies at least a week before off-farm exposure occurs. Regular application of an effective insect repellent should also be recommended to reduce the risk of vector-borne diseases.

Horses that do not leave their farm but are stabled with horses that do should also be vaccinated for EIV. EHV-1 and/or EHV-4 vaccination recommendations are age and risk-dependent; see below for the American Association of Equine Practitioners' (AAEP) recommendations.



Horses' primary way to greet each other is also an effective way to transmit many pathogens.

### Current AAEP Vaccination Recommendations

- [Current vaccination recommendations](#)
- [Eastern and western equine encephalomyelitis \(EEE and WEE\)](#)
- [West Nile virus \(WNV\)](#)
- [Equine influenza \(EIV\)](#)
- [Equine herpesvirus type 1 \(EHV-1\)](#)
- [Strangles](#)
- [Rabies](#)
- [Tetanus](#)

### ANIMAL DISEASE TRACEABILITY PROGRAM UPDATES

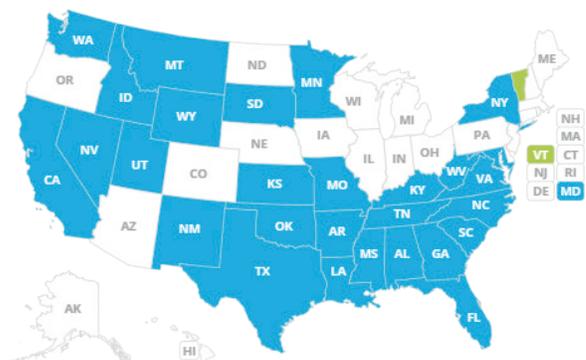
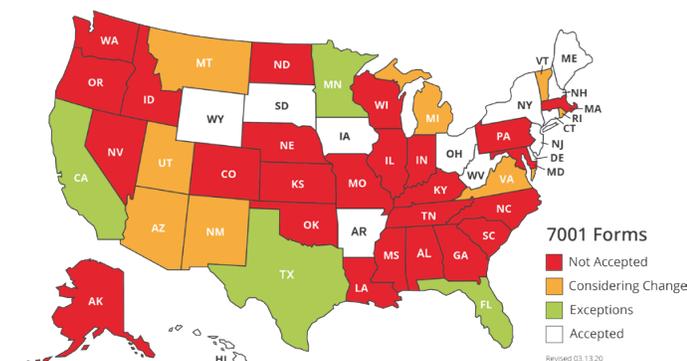
# States that still accept 7001 forms

### 7001 forms

Washington no longer allows the USDA APHIS Form 7001 forms for animal movement. A valid CVI (either electronic or paper) is the only movement document that is accepted for interstate movement of all livestock or companion animals.

### State participating Extended Equine CVI (EECVI) program

Washington State is a participant in the national Extended Equine CVI (EECVI) program that has replaced the "horse passport." However, there are still some states working on legislative changes to allow participation. Prior to issuing an EECVI for your clients, be sure the state of destination [participates in the program](#). If they don't, your client will be required to obtain a 30-day CVI.



## BOVINE

# Moving Cattle

**Dr. Dana Dobbs, WSDA Field Veterinarian**

Are you moving cattle interstate, planning a dairy sale, or simply testing your herd for bovine tuberculosis (TB)? If so, here are some important factors to keep in mind.

On average, veterinarians detect responders in one to three percent of cattle tested with the Caudal Fold Test (CFT) for tuberculosis. This will result in a Hold Order to stop movement of any cattle on your farm, and a WSDA regional field veterinarian will be required to follow up with a Comparative Cervical Test (CCT) on the responders.

### Planning ahead is essential

The CCT must be conducted within 10 days of your veterinarian's initial CFT injection, or after 60 days. The CCT requires animals be restrained to allow clipping two spots on the animal's neck, measuring skin thickness with calipers, and injecting two types of tuberculin. Three days later, the skin thickness at the two sites is measured and the reactions are compared to determine TB status. Any positive CCT suspects will require necropsy and additional laboratory diagnostics.

### Avoid added expense, allow time for follow-up testing

Finally, don't assume there won't be any TB responders when conducting your herd testing. A common mistake is to schedule cattle transport trucks at the conclusion of your veterinarian's initial CFT testing. This can be costly and frustrating when the cattle are not permitted to load due to a Hold Order. Allow two to three weeks for any follow-up testing.

Together, we can keep cattle moving in a smooth and efficient manner. Contact the Animal Health Program at (360) 902-1878, or your [WSDA field veterinarian](#) with any questions. ☚



*Dr. Dobbs performing a follow-up test on a suspect TB responder.*

## EQUINE

# Important changes to equine infectious anemia (EIA) testing

## Message from WSU WADDL

USDA/APHIS Veterinary Services has released a [new guidance document](#) for equine infectious anemia (EIA) testing.

The new guidelines came into effect on April 15, 2020.

Under the new guidelines, laboratories can only accept samples from federally authorized, Cat II Accredited veterinarians, accredited in the state the sample was drawn. The Washington Animal Disease Diagnostic Laboratory (WADDL) is now required to check the accreditation status of the submitting veterinarians prior to testing samples for EIA.

Submitters must use the current federally approved EIA forms version Feb2018 or newer. Other options include GlobalVetLink (GVL), Veterinary Services Process Streamlining (VSPS), OVIS (Oregon Veterinary Information System, serving WA and OR) or other USDA authorized state forms. Samples submitted with unapproved or outdated forms will not be tested.

The WSDA "Six Month Passport" is no longer being accepted.

All form information/data points are required and must be filled in, if any field is "none", "none", "NA" or a line through must appear on the form; fields must not be left blank.

Samples older than 30 days will not be tested.

Accredited vets in Washington can get the official VS 10-11 forms through WSDA by calling the State Office at 360 902 1878.

USDA APHIS has [additional information regarding EIA submissions](#).

If you have questions regarding EIA submissions to WADDL, contact David de Avila at (509)-335-9696.

**Questions regarding the new EIA rules can also be addressed to:**

Washington:  
POC: Dr. Leonard Eldridge  
[Leonard.E.Eldridge@usda.gov](mailto:Leonard.E.Eldridge@usda.gov)  
Phone: 360-753-9430  
Fax: 360-753-9585

# There's a new tick in town:

## Asian longhorned tick threatens livestock, wildlife, pets and possibly people in twelve Eastern states

**Dr. Ric Torgerson, WSDA Field Veterinarian**

The aggressive, disease-carrying East Asian or longhorned tick, *Haemaphysalis longicornis*, has now reached 12 Eastern states: Arkansas, Connecticut, Delaware, Kentucky, Maryland, North Carolina, New Jersey, New York, Pennsylvania, Tennessee, West Virginia and Virginia, according to a recent Centers for Disease Control and Prevention report.

The tick was since first discovered on a sheep in New Jersey in 2017.

Though NOT known to be in Washington State, the large numbers of livestock and pet movements open the possibility that this invasive species could arrive and quickly spread.

Take for example Virginia, since the first confirmed case of the tick in May 2018, the tick's range across the state now covers 24 counties. Primarily found in eastern coastal states, livestock and dairy producers, along with pet owners, are looking out for this invasive tick and on edge about how to deal with it.

Studies conducted on this tick have revealed that it is an aggressive biter. Another major concern is that the females of the species produce offspring pathogenetically, laying 1,000 to 2,000 eggs at a time. Reproducing in such high numbers, the ticks can multiply to the point that an animal could become infested by hundreds or even a thousand of ticks. The infestation can be so severe, especially on young animals, that it can drain the host to the point of acute anemia or even death.

While the tick's ability to reproduce asexually and high reproductive rates are legitimate reasons for concern for cattle producers, dairy producers also have reason to worry. For example, across parts of the tick's native range such as New Zealand and Australia, a typical dairy herd's milk production has dropped up to 25 percent with infestations of these ticks.

The tick may also carry diseases that could transfer to U.S. human populations. In other countries, disease spread via bites from these ticks can make people and animals seriously ill. In cases where it is indigenous, the longhorned tick can carry *Borrelia*, which is one of the bacteria that causes Lyme disease; *Rickettsia japonica*, which causes Japanese spotted fever; and other viruses.

To date, the Asian longhorned ticks collected and studied in the United States have not carried pathogens.

"The full public health and agricultural impact of this tick's discovery and spread is unknown," Ben Beard, deputy director of CDC's Division of Vector-Borne Diseases said in a release last year. "In other parts of the world, the Asian long-horned tick can transmit many types of pathogens common in the United States. We are concerned that this tick, which can cause massive infestations on animals, and possibly on people and the environment, is spreading in the United States."

According to a CDC report, the first human bitten in the US by a long-horned tick was reported recently in a 66-yr-old man who did not get sick from the bite. The victim, Mike Beahm, a member of the Virginia Farm Bureau Federation livestock advisory committee, operates a beef cattle farm in Botetourt County, where the long-horned tick has been identified. "I am aware of this tick issue," he said in a recent release. "I've been reading about the long-horned tick for a couple of years. Our county Extension agent keeps us informed about those things, but I haven't seen it or talked to anybody who has."

Beahm noted that, as with any invasive species, it is important to stay out in front of the issue.

"It's a potential problem. The more we can do now to combat it and bring it under control, the better. I encourage farmers to be aware of the issue and be alert," he said.

The tick is small, about one-eighth of an inch long. It is reddish brown in color and carries no distinguishing white markings.

Last year the North Carolina Department of Agricultural and Consumer Services reported the deaths of five cows in Surry County, North Carolina that were all confirmed to have been linked to the effects of acute anemia as a result of heavy infestations of the long-horned tick. This was the fourth confirmed case in North Carolina since 2018. The deceased young bull brought to North Carolina State's Animal Disease Diagnostic Lab had more than 1,000 ticks on it and the owner had lost four other cattle under the same circumstances. This was essentially death by exsanguination.

For the latest or more information on the East Asian tick or other tick species, current warnings, descriptions, geographic distribution and other data, go to [cdc.gov/ticks/index.html](https://www.cdc.gov/ticks/index.html). ☞



Photo: Eric R. Day, Virginia Polytechnic Institute and University, Bugwood.org

SMALL ANIMAL

# Rabbit hemorrhagic disease update

**Dr. Susan Kerr, WSDA Outreach and Education Specialist**

An outbreak of rabbit hemorrhagic disease type 2 (RHDV2) was identified on Orcas Island in July 2019. Throughout last summer and fall, RHDV2 virus cases were identified in domestic and feral rabbits on Orcas, Lopez, San Juan, and Whidbey Islands. Affected premises were quarantined for 30 to 120 days, and control areas were established 10 km beyond the borders of each island. The quarantine period for San Juan, Lopez, and Orcas Islands expired on Jan. 18 and the Whidbey Island quarantine expired on March 7.

Since then, RHDV2 outbreaks have also occurred in New Mexico, Arizona, and Texas. Domestic rabbits are affected, but for the first time in the U.S., so are wild rabbits (cottontails and jackrabbits). It was initially thought tularemia was to blame, but liver samples tested negative for *Francisella tularensis*.

New Mexico veterinarians are pursuing permits to allow import and use of RHD vaccines. Unlike outbreak management in Washington, surviving rabbits on infected premises in New Mexico were euthanized; premises were disinfected and required to remain unpopulated for three months. The New Mexico outbreak differed from Washington's in that thousands of wild rabbit carcasses have been observed in the southern and eastern part of the state. In Washington, very few carcasses were found; sick rabbits were presumed to have sought shelter and died in burrows, and no die-offs of wild rabbits were noted.

The last reported outbreak in Washington was seen on a single premise in Clallam County in late December; deaths were reported through early January. The Clallam County quarantine was premise-specific and will expire on May 7. All of Clallam County was designated as vaccination-eligible.

Mortality rates on multi-rabbit premises ranged from 33 to 74 percent. Carcasses from domestic and feral rabbits submitted from premises in King, Skagit, Pierce, and Clallam County tested negative for RHD.

This year, a King County veterinarian received USDA APHIS approval to import RHD vaccine. She conducted vaccination clinics in Coupeville, Friday Harbor, and Sequim in February. Contact the State Veterinarian if you have questions about the vaccination application or would like to speak with this King County veterinarian about the application process, vaccination clinics, or other queries.

Anyone interested in receiving prompt updates about RHD or other animal health concerns can subscribe to the WSDA listserv at [WSDA-Animal-Health](mailto:WSDA-Animal-Health). Anyone with questions about RHD or other Washington State animal health questions or concerns can call 360-902-1878 or email [ahealth@agr.wa.gov](mailto:ahealth@agr.wa.gov). ☞



*The presence of feral domestic rabbits increases the risk of persistence of RHDV in an area.*



Washington  
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Agriculture

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