

LIFE EUROKITE Project: Case Form

CASE CODE				
DateOfSearch(YYYYMMDD)	CountryCode	ZipCode	SatelliteTagCode	NumberOfCaseForm
SENDER / FINDER		Date of completing Case Form <input type="text"/> / <input type="text"/> /20		
Search alert by (Name/Institution) <input type="text"/>		Date of Search <input type="text"/> / <input type="text"/> /20		
Number of involved searchers <input type="text"/>		Dog included in search <input type="checkbox"/> Yes <input type="checkbox"/> No		
Name / e-mail address / phone number of the searcher:				
<input style="width: 100%;" type="text"/>				
Additional notes on the finder and the course of discovery (e.g. alerted searcher, chance find by hunter or pedestrian):				
<input style="width: 100%;" type="text"/>				
Travel time: <input type="text"/> h <input type="text"/> min (Start <input type="text"/> : <input type="text"/> / Ending <input type="text"/> : <input type="text"/>)				
Distance covered: <input type="text"/> km (Start <input type="text"/> km / Ending <input type="text"/> km)				
Search time: <input type="text"/> h <input type="text"/> min (Start <input type="text"/> : <input type="text"/> / Ending <input type="text"/> : <input type="text"/>)				
Searched area size: <input type="text"/> m ²				
Additional notes:				
<input style="width: 100%;" type="text"/>				
SATELLITE TRANSMITTER / BIRD HAS BEEN FOUND				
GPS-transmitter found: <input type="checkbox"/> Yes <input type="checkbox"/> No		Satellite tag code: <input type="text"/>		
Last date of sending information/time of death according to transmitter:				<input type="text"/> / <input type="text"/> /20
Carcass found: <input type="checkbox"/> Yes <input type="checkbox"/> No		Species: <input type="text"/>		
Additional notes (e.g. abnormalities, indentification markings/ring number, sex, age):				
<input style="width: 100%;" type="text"/>				
LOCALITY DETAILS				
Date and time of finding: <input type="text"/> / <input type="text"/> /20 <input type="text"/> h <input type="text"/> min				
Take photos and attach them: <input type="checkbox"/> Overview <input type="checkbox"/> Makro <input type="checkbox"/> Surrounding				
Location of carcass (GPS-coordinates): <input style="width: 100%;" type="text"/>				
Region and Country: <input style="width: 100%;" type="text"/>				
Radius of searched surrounding: <input type="text"/> m				
Surroundings/Vegetation:				
<input type="checkbox"/> Streets (<input type="text"/> m)		<input type="checkbox"/> Train tracks (<input type="text"/> m)		<input type="checkbox"/> Forest/trees/breeding sites (<input type="text"/> m)
<input type="checkbox"/> Power lines (<input type="text"/> m)		<input type="checkbox"/> Agricultural land (<input type="text"/> m)		<input type="checkbox"/> Wind turbines (<input type="text"/> m)
Further information and additional notes like weather conditions, hunting management plan, predator-control authorisation, name of company, ID of pylon / windturbine / street ect.:				
<input style="width: 100%;" type="text"/>				



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EVALUATION OF CASE		Case suspicious?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Suspected cause of death:		<input type="text"/>		
• More precise cause of death: Trauma		<input type="text"/>		
• More precise cause of death: Drowning		<input type="text"/>		
Additional notes on suspected cause of death (e.g. possible predator, more precise cause of death,...):				
<input type="text"/>				
Police informed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Whom:	<input type="text"/>
Police reference number: <input type="text"/>				
Authority informed?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Whom:	<input type="text"/>
Others (Name, Department) : <input type="text"/>				
Additional notes:				
<input type="text"/>				
EVIDENCES COLLECTED				
Samples collected (including carcass as sample)?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	Total number of samples: <input type="text"/>
Collected by: <input type="text"/>				
Short description of samples:				
<input type="text"/>				
Further investigation of samples:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	By (Laboratory):	<input type="text"/>
Transport carried out by:	<input type="text"/>		Date:	<input type="text"/> / <input type="text"/> /20 <input type="text"/>
Carcass remains with searcher:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Done by:	<input type="text"/>
Additional notes:				
<input type="text"/>				
ADDITIONAL INFORMATION CONSIDERING CASE FORM				
Time necessary to complete form: <input type="text"/> min				
Additional notes on form completion (questions, improvements, ect.):				
<input type="text"/>				

→ REFRIGERATE carcass if it can be submitted*
directly to pathology lab for necropsy
(transport time not more than 1-2 days)

→ FREEZE carcass if it will not be submitted*
directly to pathology lab
(transport time more than 1-2 days)

*Use specialized courier services only.

Thank you for your cooperation!

