Use this form to report rescue call outs for badger cubs. Please complete the assessment checklist during the rescue. Try not to rely on memory. The information helps decide if a cub requires rescue. It is important to assess possible suitability for Monitored Natal Return (MNR). This information will be needed if asking for advice from experienced MNR rehabilitators. Refer to: volunteer rescue protocol (OGB\_032).

|  |  |
| --- | --- |
| **Office use:** | **Enter the call out no. / Badger ID / donation made to the hospital?** |
| **Name of contact/ finder** |  |
| **Phone number/ email** |  |
| **Date & time called in** |  |
| **Comments/  info. provided/**  **advice given** |  |

|  |  |
| --- | --- |
| **Location address** |  |
| **Grid Ref. /what3words** |  |
| **Location description** |  |
| **Did you mark location?** |  |
| **Rescue volunteer names** |  |
| **Time arrived on scene** |  |
| **Others involved** e.g. Police, RSPCA |  |

**1) Initial assessment checklist:**

|  |  |
| --- | --- |
| **✓ if yes** | **Is the cub showing any of the following signs? (tick all that apply)** |
|  | Injured |
|  | Very underweight |
|  | Very quiet (not wickering/ keckering) |
|  | Showing signs of dehydration, loose skin, sunken eyes |
|  | Cold to touch |
|  | Lethargic |
|  | In immediate danger, very public place, on a road etc |
|  | Are there any factual indications that the sow may be dead or an injury prevents her from attending the cub(s)? |
| **Notes:** |  |

|  |
| --- |
| **Any ticked boxes in the above section?  Action: Admit to (wildlife centre/vet) for assessment**  Must have fully accurate location and contact details in case of return to sett  Inform person OBG rescue coordinatorof this action immediately  **No ticked boxes, consider MNR. Please continue with rest of form** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **2) Development of the cub:** | | | | **(tick all that apply)** |
| **✓ if yes** | | **Has the cub any of the following features?** | | |
|  | | Pink colour to most of body | | |
|  | | Little or no fur present | | |
|  | | Eyes closed | | |
|  | | Cub fits easily in the palm of your hand | | |
|  | **Any ticked boxes in the above section?  Action: Cub vulnerable, consult with experienced badger cub rehabilitator/ rescuer** | | | |
| **3) Is the cub** | | | **✓ (tick all that apply)** | |
|  | | Small, head/body approx. 6"- 8" (150-200mm) long (not including tail) | | |
|  | | Partly mobile but unsteady on legs due to lack of development rather than weakness or injury | | |
|  | | Found on or very near to a sett | | |
|  | | Cub looks healthy, chubby appearance | | |
|  | | Fur present with distinctive black and white face markings (unless albino!) | | |
|  | **The ticked boxes above the better for MNR. Action: Contact experienced rehabilitator. Consider monitored return to sett.** | | | |
| **4) Is the cub** | | | **(tick all that apply)** | |
|  | | Mobile, strong, fluid movement | | |
|  | | Size “bag of sugar or larger | | |
|  | | Not necessarily found near a known sett | | |
|  | | Cub looks healthy, chubby appearance | | |
|  | | Fur present with distinctive black and white face markings (unless albino!) | | |
|  | **Action: Contact experienced rehabilitator. Consider monitored natal return. Consider support feed return. Consider hard release (area found) for larger cubs later in season (following possible examination/treatment at Wildlife Centre)** | | | |

**End Result/ Actions taken to resolve (complete / delete as applicable)**

|  |  |
| --- | --- |
| **Animal hospital** | NutkinOWS TiggywinklesValeOther (specify) |
| **Admission date and time** |  |
| **Follow up date(s) & report** |  |
| **Released date:** |  |
| **Location & date of death** |  |
| **Crime number if applicable** |  |
| **Finder notified of outcome?** | date notified (if applicable) |

**Other Comments/ notes (if any)**

|  |
| --- |
|  |

**Please complete and return ASAP once the outcome is known to: OBG@OxonBadgerGroup.org.uk**