Rounds Notes is a report on the health of animals at the National Marine Life Center from Sea Rogers Williams VMD for the staff, volunteers, and community of the center including professionals involved the captive care of similar species, the views expressed are not necessarily that of NMLC. Information in Rounds Notes should be considered confidential and used solely to benefit the health of aquatic animals everywhere.

Headline News: What a Difference a month makes

While we can’t say all clear, and 41, 49, and 63 are seriously sick sea turtles, with 40, 46, 48, and 51 all with active but resolving medial problems, the bulk of the bale had made great improvements on their physical exams and have improving lab results. Most turtles are off all medications and in a 2-4 week withdrawal period and will have pre-release blood work assessments in a month, so that is good news.

Blood Groups:

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Pneumonia: 49, 34?, 35, 38?, 42, 46, 51, 54, 58, 61?, 63, 43, 44, 45

Radiograph Rotation

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Sea Turtles: Kemp’s: Larry Bird
33 (NEST 14-11), cold stun, anemia?
wt = 2.9 kg, SCL = 24.0 cm, SCW = 21.3 cm BS = 3/5
stranded: 11/8/14; admit 11/10/14, NMLC 11/20/14
last blood: 11/11/14; 11/20/14, anemia, leukocytosis, heterophilia,
monocytosis,
increased: ALPK, CK, LDH, GLU
decreased ALB, TP, K, BUN, Ca
last rads: 11/10/14, GI gas, 12-19-14
PE: (1/30 CRW) WNL
TX:
1) cefazadine 22 mg/kg IM q3d started 11/10/14 d/c 1-1-15
2) SSD to lesions
3) d/c fluids 12-13-14,
4) add B12, Ca, SeaTab to feed

Sea Turtles: Kemp’s: Hugh 34 (NEST 14-20) Cold stun, (UA 2.9), pneumonia
wt = 3.2 kg, SCL = 25.8 cm, SCW = 23.6 cm BS = 3/5
stranded: X; admit 11/15/14, NMLC 11/20/14
last blood: GLU (14, 26, 40) 11/8/14, 11/20.14
increased: WBC, heterophils, ALP, AST (363), CK, LDH
decreased: ALB (1), TP, Ca, UA (2.9)
last rads: 11/17/14, edecular interstitial bilateral L>R, mineral density,
RFF lysis D3P3 LFF D2-D3, 12-19-14
PE (1/30; CRW): minor caudal plastron rash, abrasions to L upper rhamphotheca
TX:
1) oxytetracycline 42 mg/kg IM q 6 days started 11/18/14 d/c 1-1-15
2) enrofloxacin 20 mg/kg PO q3d, d/c 1-30-15
3) d/c fluids 12-13-14,
4) add B12, Ca, SeaTab to feed
5) topical SSD as needed
Sea Turtles: Kemp’s :Anchor 35(NEST 14-22) cold stun, low K (2.6) UA (1.7), pneumonia
wt = 2.6 kg, SCL = 24.2 cm, SCW = 22.0 cm BS = 3/5
stranded: X; admit 11/15/14, NMLC 11/20/14
last blood: 11/19/14
increased: WBC (14), ALP (3299), CK, LDH (1675), GLU (230), UA (1.7)
decreased: ALB (0.8), K (2.6)
last rads: 11/17/14; 12-23-14 (AP)
PE: (1/30-CRW) BAR robust, no active lesions
TX:
1) oxytetracycline 42 mg/kg IM q6d started 11/18/14 d/c 1-1-15
2) enrofloxacin 20 mg/kg PO q3d d/c 1-30-15
3) d/c fluids 12-13-14,
4) add B12, Ca, SeaTab to feed
Sea Turtles: Kemp’s : Otto 36 (NEST 14-31), cold stun, UA (2.2)
wt= 2.1 kg, SCL = 22.6 cm, SCW = 21.1 cm BS=3/5
stranded: X ; admit 11/15/14, NMLC 11/20/14
last blood: 11/19/14
increased: WBC (21), heterophils and monocytes, CK, LDH (3166), Phos, UA (2.2)
decreased: ALB (0.7), TP, Ca,
last rads: 11/18/14, EI pattern bilateral, 12-23-14 AP

PE: (1/30-CRW) BAR, active, look great, no active lesions
TX:
1) ceftazidime 22 mg/kg IM q3d started 11/18/14 d/c 1-1-15
2) d/c fluids 12-13-14,
3) add B12, Ca, SeaTab to feed

Sea Turtles: Kemp’s : Indie 37 (NEST 14-40) Cold stun
wt= 2.2 kg, SCL = 23.4 cm, SCW = 21.5 cm BS=3/5
HR =48, temp 70.6 °F OK to SWIM, eating
stranded: X ; admit 11/16/14, NMLC 11/20/14
last blood: 11/20/14, 12/16/14, s12-23-14= depressed respiration
increased: ; LDH (29K)
last rads: 12/16/14 AP:

PE:(1/30 CRW) large and robust, BAR, no active lesions, doing well, minimal ventral rash

TX:
1) oxytetracycline 42 mg/kg IM q6d started 11-19-14 d/c 1-1-15
2) add B12, Ca, SeaTab
Sea Turtles: Kemp’s: Bucky
38 (NEST 14-043), cold stun, LDH (7k), pneumonia
wt= 2.4 kg, SCL = 25.2 cm, SCW = 24.2 cm BS=2/5
stranded: X ; admit 11/16/14 NMLC 11/20/14
last blood:11/16/14, 11/20/14, 12-9-14
increased:LDH increased to 7038
last rads: 11/19/14 GI material, 12-23-14 AP
PE: (1/30 crw) mild ventral rash, FF tip lesions L>R
TX
1) ceftazadime 22 mg/kg IM q3d started 11-19-14 d/c 1-1-15
2) enrofloxacin 20 mg/kg PO q3d d/c 1/30/15
3) d/c fluids 12-13-14, add B12, Ca, SeaTab to feed
4) SSD topically PRN

Sea Turtles: Kemp’s: Rocky 39 (NEST 14-45), cold stun
wt= 2.7 kg, SCL = 24.2 cm, SCW = 23.2 cm BS=3/5
stranded: X ; admit 11/16/14 NMLC 11/20/14
last blood:11/21/14
increased: ALPK, CK, LDH
decreased:
last rads: 11/19/14, EI pattern bilateral and cranial, GI content
12-27 AP
PE: (1/30; CRW) minor head laceration, minor rostral rub lesion
TX:
1) ceftazidime 22 mg/kg IM q3d started 11-19-14 d/c 1-1-15
2) d/c fluids 12-13-14, add B12, Ca, SeaTab to feed
3) SSD topically PRN
Sea Turtles: Kemp’s :40 (NEST 14-53)  
cold stun, RFF focal swelling, (UA 1.5)  
wt= 2.4 kg, SCL = 23.7 cm, SCW = 22.2 cm BS=3/5  
stranded: X ; admit 11/16/14, NMLC 11/20/14  
last blood:11/20/14  
increased: WBC (23), UA (1.5) enzymes  
decreased: Alb (0.7)  
last rads: 11/19/14 EI pattern R lung, 2 mineral density in GI, RHF  
missing D4P3, LHF missing D5P3; 11-28-14:1-6-15  
PE: (1-30; CRW) swelling over the LEFT elbow is getting smaller, radiographs show no bone involvement, A: resolving abscess, P: allow to heal, mature nodule, non active full ROM  
TX:  
1) cefazadime 22 mg/kg IM q3d started 11-19-14 d/c 1-1-15  
2) clavamox 30 mg/kg PO SID 14 day d/c  
3) add B12, Ca, SeaTab to feed  
4) SSD  
P: Rads, and FNA with cytology

Sea Turtles: Kemp’s :Camdon 41 (NEST 14-54)  
cold stun, bradycardia, critical appearance  
respiratory compromise, LFF lameness, turtle neck  
wt= 1.2 kg, SCL = 20.7 cm, SCW = 19.3cm BS=1/5  
stranded: X ; admit 11/16/14, NMLC 11/20/14  
last blood:1-13-15, PCO2=54, iCa0.88, K 2.8  
increased:LDH (17440), HCT (38)  
decreased: Alb (0.8), Ca (4.9), iCa (0.8), pO2 =75  
last rads: 12-19-14 no limb lesions 1-6-15, CT-1/20/15  
Ultrasound 12-2, poor cardiac contractility, no free fluid, kidneys OK  
PE: (1-30; CRW) HR= 38, left elbow bite ventral lesions LHF bite, LFF lesions  
TX:  Tube feed 30 cc SID 20 cc gruel & fluids 10 ml LRS SQ SID  
1) oxytetracycline 42 mg/kg IM q6d started 11/19/14  
2) amikacin 10 mg/kg 0.1 cc IM q3 days, fluids SID d/c 1-1-15  
3) vit B complex 0.5 cc SQ q7 day  
4) enrofloxicin 20 mg/kg PO q3d & intraconizole  15 mg/kg PO q3d  
5) add B12, Ca, SeaTab  
6) 0.5 cc calcium gluibinate in gavage tube  
7) 10-20% bw LRS+ KCl SQ SID  
P: continue ABX and fungal 1 mo
**Sea Turtles: Kemp’s Rebecca:**

42 (NEST 14-55) cold stun, low K (2.7)

wt = 2.9 kg, SCL = 26.2 cm, SCW = 23.6 cm BS=3/5

stranded: X ; admit 11/16/14, NMLC 11/20/14

last blood:11/20/14

increased: WBC (28)

decreased: K (2.7), Alb (0.8), GLU (76), Ca (5)

last rads: 11/19/14, mild EI diffuse cranial with scalloping of R lung 12-27 AP

PE: (1/30 crw) Healthy, mild rostral rub lesion, other wise looks good

TX:

1) ceftazidime 22 mg/kg IM q3d started 11/19/14 d/c 1-1-15

2) d/c fluids 12-13-14, add B12, Ca, SeaTab to feed

3) SSD to wounds topically PRN

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**Sea Turtles: Kemp’s :Antena** 43 (NEST 14-56) cold stun, hypo-protenenemic, pneumonia

wt = 1.8 kg, SCL = 22.0 cm, SCW = 20.0 cm BS=2/5

stranded: X ; admit 11/16/14, NMLC 11/20/14

last blood:11/16/14, 1-6-15

increased: ALKP, CK, LDH (11140), GLU (165), WBC (29)

decreased: TP (1.5), Alb (0.5), Glob, Ca, TS

resolved lactic acidosis

last rads: X

PE: (1/30 CRW) WNL

TX:

1) oxytetracycline 42 mg/kg IM q6d started 11/19/14 d/c 1-1-15

2) enrofloxicin 20 mg/kg PO q3d d/c 1-30-15

3) SSD topically PRN

4) 1% LRS SQ EOD until eating, once eating

5) add B12, Ca, SeaTab
Sea Turtles: Kemp's : Hank Arron 44
(NEST 14-58) cold stun, mild tissue
elevations, improving, suspected pneumonia
wt= 3.4 kg loss, SCL = 28.1 cm, SCW = 25.7 cm BS=3/5
stranded: X; admit 11/16/14, NMLC 11/20/14
last blood: 11/20/14, 11-25; 12-9-14
increased: CK (10212), LDH (4949)
decreased: ALB, K (2.6)
last rads: 12-30-14 AP,

PE:(1/13; CRW) BAR big and robust, no active lesions, looks great
TX:
1) oxytetracycline 42 mg/kg IM q6d started 11/19/14 d/c 1-1-15
2) enrofloxicin 20 mg/kg PO q3d d/c 1-30-15
3) SSD topically as needed
4) d/c fluids 12-13-14,
5) add B12, Ca, SeaTab to feed

Sea Turtles: Kemp’s : Free love 45
(NEST 14-60) cold stun, pneumonia
wt= 1.7 kg, SCL = 20.4 cm, SCW = 19.2 cm BS=2/5
HR =48, temp 73.4 °F OK to SWIM and eating
stranded: X; admit 11/16/14, NMLC 11/20/14
last blood: 11/20/14
increased: CK, TP, GLOB, UA (0.7), WBC (28)
decreased: ALB (0.7), Ca, Phos
last rads: 12-30-14 AP,

PE: (1/30, CRW) Healthy, minor rostral rub abrasion
TX:
1) oxytetracycline 42 mg/kg IM q6d started 11/19/14 d/c 1-1-15
2) enrofloxicin 20 mg/kg PO q3d d/c 1-30-15
3) add B12, Ca, SeaTab to feed
4) topical SSD PRN
Sea Turtles: Kemp’s: Patch 46 (NEST 14-68) cold stun, pneumonia, UA increase
wt= 2.7 kg, SCL = 25.1 cm, SCW = 24.0 cm BS=2/5
stranded: X ; admit 11/17/14, NMLC 11/20/14
last blood: 11/20/14, 12/16/14, 12-23
increased: UA (4.1),
decreased:
last rads: 12-14, 12-30-14 AP,
mild persistent lactic acidosis
PE: (1/30; CRW) minor shell lesions, ventral rash, minor FFTip, minor rostral rub lesion
P: fluids SID then recheck UA
TX:
1) oxytetracycline 42 mg/kg IM q6d started 11/20/14 d/c
2) amikacin 10 mg/kg IM q 3 d with 20 ml LRS SQ d/c 1-1-15
3) enrofloxacin 20 mg/kg PO q3d d/c 1-30-15
4) SSD topically PRN
5) add back SQ fluids SID due to increase in UA d/c Jan
6) add B12, Ca, SeaTab to feed

Sea Turtles: Kemp’s: Fiona, 47 (NEST 14-69) cold stun, UA (1.1), plastron pigmentation
wt= 2.4 kg, SCL = 23.8 cm, SCW = 21.6 cm BS=2/5
stranded: X ; admit 11/17/14, NMLC 11/20/14
last blood: 11/20/14, 12-23,
increased LDH (24638), PHOS (13), lymphocytosis, ALK
decreased:
last rads: 11-20-14: mild-mod EI pattern bilaterally, small round mineral density L mid coelom (r/o GI) RH with lux of D4 P1-2 FF claw bleeding -4-15
PE: (1/30; CRW) plastron pigmentation, other WNL
TX
1 ceftazidime 22mg/kg IM q3d started 11-20-14 d/c 1-1-15
1) add B12, Ca, SeaTab to feed
2) ophthalmic ABX combination OU SID
Sea Turtles: Kemp’s : Yertle 48 (NEST 14-72) cold stun, UA=2.3, FX LEFT radius
wt= 1.8 kg, SCL = 21.4 cm, SCW = 18.9 cm BS=3/5
stranded: X ; admit 11/18/14, NMLC 11/20/14
last blood:11/20/14, 12-16-14; 12-23-14
increased:LDH, WBC (11,600), Co2 58.8
decreased: {K=3.0, iCa = 0.99], pH 7.3, pO2=90
last rads: 11-25-14; 1-6-15
PE: (1-30; CRW) welling over the left radius but good use and ROM, other PE WNL
TX:
1) oxytetracycline 42 mg/kg IM q6d started 11-23-14 d/c 1-1-15
2) add B12, Ca, SeaTab
3) amikacin 10 mg/kg IMq3d with 10-12 cc LRS d/c 1-1-15
4) Clavamox 30 mg/kg PO SID 14d d/c CRW

Sea Turtles: Kemp’s : 49 (NEST 14-73)
cold stun, metabolic acidosis (lactate), positive buoyancy, respiratory depression, pneumonia
three granulomas
wt= 1.4 kg, SCL = 20.4 cm, SCW = 18.2 cm BS=2/5
stranded: X ; admit 11/18/14, NMLC 11/20/14
last blood:12-2-14, 12-16-14; 12-23-14
increase: WBC (32), UA (1.7), pCO2 (57)
decrease: Alb (0.6), HCT (12%), pO2 (64) SO2% (95)
last rads: CT 1-20-15, lung lesions
PE: (1-30; CRW) shows improvement with healing, plastron pigmentation, lacerations and skin ulcers much improved
TX: Tube feed SID 20 cc gruel if not eating
1) oxytetracycline 42 mg/kg IM q6d started 11-23-14 d/c 1-1-15
2) amikacin 10 mg/kg 0.1 cc IM q4 day, fluids SID d/c 1-1-15
3) Clavamox 30 mg/kg PO SID 14d
2) 20 ml LRS SQ SID to BID, SID add 1cc 23% calcium for SQ
3) enrofloxacin 20 mg/kg PO q3d, intraconizole 15 mg/kg PO q3d 60 d
4) vitamin B complex 0.5 cc SQ q7d
5) topical SSD to wounds
Sea Turtles: Kemp's :50 (NEST 14-74)
cold stun
wt= 3.1 kg loss, SCL = 25.7 cm, SCW = 25.4 cm BS=3/5
stranded: X ; admit 11/18/14, 11/20/14
last blood: 11/20/14; 12-9-14
increased:LDH (6475) new
decreased:
last rads: 11-28-14 DV duplication of LHF D3P4, also GI material in the
left body cavity no other lesions; lesions healing -4-15
PE:(1/30 CRW) BAR, WNL
TX:
1) add B12, Ca, SeaTab
2) oxytetracycline 42 mg/kg IM q6d started 11-23-14 d/c 1-1-15

Sea Turtles: Kemp’s :51 (NEST 14-75)
“quazi-moto”, colds stun, lung lesions LEFT
wt= 3.4 kg, SCL = 26.2 cm, SCW = 24.4 cm BS=3/5
HR =20 , temp 72.8 °F OK to SWIM
stranded: X ; admit 11/18/14, NMLC 11
last blood:11/18/14, 11/20/14, 11-25-14; 12-23-14 (hemolymph)
increased:AlkP, UA (1), Glu , WBC (11), pCO2(58)
decreased:
last rads:11-25-14 DV, AP, CT 1-20-15
PE: (1/30, CRW) BAR, shell deformity appears more pronounced, minor
pealing from plastron, plastron wounds healing, no active lesions
TX:
1) 1% LRS SQ EOD until eating, one eating add B12, Ca, SeaTab
2) oxytetracycline 42 mg/kg IM q6d started 11-23-14 d/c 1-1-15
3) amikacin 10 mg/kg IM q3d started 12-16-14 d/c 1-1-15
4) enrofloxicin 20 mg/kg PO q3d d/c 1-30-15
5) topical SSD PRN
Sea Turtles: Kemp’s : Sarah Olive 52
(NEST 14-77), cold stun,
wt= 1.8 kg, SCL = 20.5 cm, SCW = 18.2 cm BS=2/5
stranded: Great Island 11/18/14 ; admit 11/18/14, NMLC 11/20/14
last blood:12/3/14
increased: ALKP, CK, UA (1.7)
decreased: Ca (5.2) but ionized OK, K (2.7)
last rads: 11/23/14

PE: (1/30 CRW) BAR no active lesions, WNL
TX:
1) add B12, Ca, SeaTab, SQ
2) oxytetracycline 42 mg/kg IM q6d started 11-23-14 d/c 1-1-15
3) SSD topical to shell PRN

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Sea Turtles: Kemp’s : Don Miquel 53
(NEST 14-380), cold stun
wt= 4.2 kg, SCL = 30.5 cm, SCW = 29.0 cm BS=3/5
stranded: Silver Rd 11/20/14; admit 11/x/14, NMLC 11/26/14
last blood:11/26/14, 12-30-14
increased:ALKP, Chol, GLU (192), WBC
decreased:
last rads: X
PE: (1/13 CRW) BAR, no active lesions, mild ventral rash, looks good,
ophthalmic exam WNL
TX
1) oxytetracycline started 11-28-14 d/c 1-1-15
2) topical ophthalmic ointment OU PRN (SID)
3) add B12, Ca, SeaTab to feed

Sea Turtles: Kemp’s : 54 (NEST 14-383)
stranded: Crosby Island 11/21/14; admit 11/x/14, NMLC 11/26/14, died 1/1/15 necropsy NMLC 1/4-15
progressive deterioration of respiratory status with daily blood gas monitoring, despite improvements in CBC and SCP, finally lead to hypoglycemia and death secondary to complications associated with cold stun event. Hemorrhage was found at the left carotid artery the full significance is unknown but likely contributed as a terminal even in a severely debilitated sea turtle with a poor prognosis being treated for life threatening complications of cold stun.
Sea Turtles: Kemp’s :Snout 55 (NEST 14-384) cold stun
wt= 3.1 kg, SCL = 27.2 cm, SCW = 25.1 cm BS=2/5
stranded: X ; admit 11/x/14, NMLC 11/26/14
last blood:11/26/14; 12-23-14
Chemistry panel WNL
increased: WBC (13; heterophils and lymphs)
decreased: resolved hypoglycemia
last rads: -1-4-15
PE: (1/30 CRW ) BAR no active lesions
P: monitor low HR
TX
1) oxytetracycline started 11-28-14 42mg/kg IM q6d; d/c 1-1-15
2) topical ophthalmic ABX OU d/c 12-16-14
3) add B12, Ca, SeaTab to feed

Sea Turtles: Kemp’s :56 (NEST 14-385)died in care
wt= 2.1 kg, SCL = 24.4 cm, SCW = 22.6 cm
stranded: X ; admit 11/x/14, NMLC 11/26/14, died 12/18/14, necropsy 12/19/14
prosector S R Williams, assistant Joe Hall
An intact immature female Kemp’s ridley sea turtle, with minor external abrasions, scabs, and abrasions with a body score of 2/5 was cool (from ice) freshly dead but with an odor of decay was examined as a gross post mortem evaluation.
The body cavity have small amounts of hemorrhagic fluid. Muscle and skeletal structures appeared normal, no evidence of muscle necrosis in the front limbs was observed. The trachea was clear. he lungs were mottled and black, but the bronchi and attachment to the main-stem bronchi were open. The lung parenchyma was diffusely involved and pigmented, nodules were not observed, they were collapsed against the dorsal carapace. There was a dark black clot in the right atrium which also could have represented an infarct, cardiovascular collapse, or post mortem changes, the ventricle was normal, and there was no pericardial fluid excess. The esophagus had minimal ingesta, the small intestine has gas, fluid and ingesta but was patent, liquid feces could be passed from the cloaca. The liver was mottled and very friable, the gall bladder was patent but full, a nematode was removed from the liver and gall bladder area. the dorsal liver was congested. The pancreatic continued multiple black foci that are interpreted as local infects and involved the entire organ. The spleen was normal. The urinary bladder was distended but normal, urine could be expressed out the cloaca. The right kidney had a triangular pale focus at the margin but the rest of the renal tissue was within normal lints.The eyes and brain were not dissected. A total of 5 small (<3cm) white nematodes were removed from the serosal surfaces.
gross diagnosis:
pneumonia diffuse severe
hepatopathty diffuse severe suspect tissue necrosis, post mortem or peri mortem
pancreatic infarcts diffuse severe
syndrome parasitism nematodes suspect L3 Anisakis simplex
The cause of death was considered respiratory failure and metabolic derangements secondary to server hypothermia and trauma, possible sea water ingestion as the source of pneumonia.
C Rogers Williams VMD
Sea Turtles: Kemp’s :57 (NEST 14-386)

Died
Lk 57
Along the serosal surface of all tissues are small nodules 0.1cm
Musculoskeletal system: emaciated, muscle atrophy, fat is green and waxy (adipocere vs steatitis) <1cm fat noted.
Coelom: WNL
Hepatobiliary system: "nutmeg liver" hepatic congestion noted, discoloration to R side of liver which is overlaying the gallbladder (possible post morteum staining),
Cardiopulmonary system: WNL
GIT: congestion of the mesentary vasculature, no ulcerations, stomach contains rocks and sand, possible food material (algae) in SI, dilatation in several locations along colon, Along the serosal surface of the SI may small nodules (0.1cm).
Genitourinary: empty bladder, immature female

Sea Turtles: Kemp’s :58 (NEST 14-387)
cold stun, pneumonia
wt= 2.2 kg, SCL = 23.9 cm, SCW = 21.4 cm BS=3/5
stranded: 11/21/14 1st Enct. beach ; admit 11/x/14, NMLC 11/26/14
last blood:12-2-14, 12-16-14
increased:ALKP, CK, LDH, Na (165), WBC (32)
decreased:TP (2.2), ALB(0.7), Ca (5.3) but iCa = 1.07, pH 7.3
last rads: 12-14-14 AP
PE: (1/30; CRW ) Appears healthy, no active lesions, WNL
TX
1) oxytetracycline started 11-28-14 42mg/kg IM q6d; d/c 1-1-15
2) enrofloxacin 20 mg/kg PO q3d d/c 1-30-15
3) topical SSD PRN
4) add B12, Ca, SeaTab to feed
Sea Turtles: Kemp’s : Paddles
59 (NEST 14-390) cold stun
wt= 2.8 kg, SCL = 25.1 cm, SCW = 22.6 cm BS=3/5
stranded: 11/20 Turo ; admit 11/x/14, NMLC 11/26/14
last blood:11/26/14; 12-30-14;
increased:AlkP, CK, Chol
decreased:
last rads: X
PE: (1/30; CRW) no wounds, looks good, WNL
TX
1) oxytetracycline started 11-28-14 42mg/kg IM q6d, d/c 1-1-15
2) add B12, Ca, SeaTab to feed

Sea Turtles: Kemp’s : Perigrin 60 (NEST 14-391) cold stun recovering from SX of RFF tip
wt= 3.6 kg, SCL = 26.7 cm, SCW = 25.0 cm BS=3/5
stranded: 11-21 Great Island ; admit 11/x/14, NMLC 11/26/14
last blood:11/26/14; iStat pre-op 12-11-14= WNL
increased:AlkP, CK, LDH, UA (2.5), WBC (13)
decreased:
last rads: 11/28/14 DV, shows skin and bones, some GI material,
Amputation needed RFF D3P3&4 and soft tissue
PE:(1/30; CRW) healed surgery site, big eater
TX
1) oxytetracycline started 11-28-14 42mg/kg IM q6d; d/c 1-1-15
2) Clavamox 30 mg/kg PO SID 14d d/c
3) d/c fluids 12-13-14,
4) add B12, Ca, SeaTab to feed
**Sea Turtles: Kemp’s: Jadager 61 (NEST 14-393) cold stun suspect pneumonia**

- wt = 2.2 kg, SCL = 24.4 cm, SCW = 23.0 cm BS = 3/5
- stranded: 11/22 Dyer Prince; admit 11/x/14, NMLC 11/26/14
- last blood: 11/26/14; 12-9-14
- increased: AlkP, LDH (15665)
- decreased:
- last rads: 12-27 AP
- PE: (1/30; CRW) RFF tip lesions > L, minimal FFT lesions healing.
- TX
  1) oxytetracycline started 11-28-14 42mg/kg IM q6d; d/c 1-1-15
  2) enrofloxicin 20 mg/kg PO q3d d/c 1-30-15
  3) topical SSD PRN
  4) add B12, Ca, SeaTab to feed

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**Sea Turtles: Kemp’s: 62 (NEST 14-395) Died**

- necropsy summary report
- Samara Parker DVM
- 11/30/14
- suspected dead on 11/28, placed on ice 11/29 PM
- Lk -62
- Musculoskeletal system: emaciated, muscle atrophy, fat is green in color and waxy in texture (adipocere vs steatitis) <1cm fat noted.
- Coelom: clear (serosanguinous) fluid ~50mls.
- Heptobiliary system: nodule noted on liver (0.3cm) fibrin noted on the liver capsule around this area.
- cardiopulmonary: Possible enlarged heart, coagulated blood noted in all chambers (post mortem change), lungs are heavy wet hemorrhagic and a large volume of fluid came from the lungs as pulled from the coelom (~40mls).
- GIT: congestion of the mesentery vasculature, no ulcerations, stomach contains rocks and sand, possible food material (algae) in SI, dilatation in several locations along colon, Along the serosal surface of the SI may small nodules (0.1cm).
- Genitourinary: empty bladder, kidneys flat and noted on exam of tissues preserved there were bright yellow streaks noted (visceral gout?)
Sea Turtles: Kemp’s :63 (NEST 14-665)
cold stun, UA (4.4), metabolic derangements
PNEUMONIA, low K (2.7) resp. depression
wt= 2.7 kg, SCL = 25.1 cm, SCW = 23.6 cm BS=2/5
stranded: ; admit 12/4/14, NMLC 12/9/14
last blood: 12/8/14; 12-23-14; 12-30-14; 1-13-15
increased: WBC (24), AST (884), CK, LDH (5119), GLU (141),
UA(4.4), pCO2 (55)
decreased: ALB(1.0), TP, PHOS (6.4), Cl (109), K (2.5)
last rads:12-11-14 AP, advance bilateral pneumonia
PE: (1/30; CRW) minor rostral rub lesion
TX
1) oxytetracycline started 12-11-14 42mg/kg IM q6d; d/c 1-1-15
1) enrofloxicin 20 mg/kg PO q3d, itraconizole 15mg/kg PO q 3d 60d
2) 20 ml LRS + 20 mEq KCl/L SQ SID
3) 0.5cc super B complex SQ q7d

Sea Turtles: Kemp’s :64 (NEST 14-670)
cause of death PNEUMONIA
064 Lk
Musculoskeletal system: emaciated, muscle atrophy, fat is green and waxy (adipocere vs steatitis) <1cm fat
Coelom: clear
Heptobiliary system: multiple nodules (like plicated string) noted on liver margins white to tan cardiopulmonary: mucopurulent discharge from lung tissue and bronchioles (~15mls), pericardial fluid ~5mls of serosanguinous fluid. Small ectopic splenic node in mesentery.
GIT: enlarged ? pancreas. Green material, possibly ingesta in small intestine. Food material from tube feeding in the esophagus and stomach. Serosal surface of stomach has small tan firm nodules. SI has serosal surface nodules.
Genitourinary: empty bladder (serosal surface has small nodules present), immature female
**Harbor Seals**: Kennedy NMLC 14-030PPv nasal discharge, face wounds, jaw fractures, collapsed lung, pneumonia, and lungworm

female wt=19.8 kg, SL= 89.5 cm, BS=3/5

stranded: 10-14-14, NH; admit: 10-14-14

last blood: 10-14-14, 10-21-14; 12-16-14; 12-30-14

CBC and SCP - acceptable -CRW

last rads: 11-18-14, improvement but interstitial pattern 12-16-14

PE: 1/30/15 TPR = 98.6, 80, 10, jaw and lips have healed, other PE WNL

A: OK for release-CRW