It’s STILL Warm Out Side but with cold water

More turtles arrive, we took in 4 more to max out our capacity, but the NEAq is getting swamped. We’re finding some old injuries, lots of abrasions and scrapes, a few minor eye problems, and lots of blood chemistry abnormalities but most are improving. Our goal is to identify the really sick turtles, careful observation by staff, weights and measures, veterinary exams, radiographs and lab work are our tools.
Harbor Seals: Lemongrass NMLC 15-030 PPv weanling inflammatory bowel disease, rectal prolapse, and renal calculi, right nasal discharge, ‘hyperammonemia’
female [admit] wt=14.5 kg, SL= 97.5 cm; [current] 13.6 kg BS=3/5
stranded Biddeford ME 8/29/15; admit: 9/3/15;
last blood: 11/28/15 bile acid WNL, ammonia elevated, uric acid WNL
last rads: 12-1-15: ABD lat VD: WNL no lesions, small amounts of gas
last ultrasound: 12-1-15 renal calculi
last fecal: 10/30/15 NPS-CRW
cytology 12-11-15: neutrophils, mixed bacteria, mucous, mononuclear cells- chronic active inflammation with bacteria, r/o sinusitis, or lung disease, leaning towards upper respiratory infection
PE: visual inspection [Williams / Berridge 12/22/15] breathing better, less right sided nasal discharge, no reports of rectal prolapsed recently
A: improving, start weaning off meds CT scheduled Jan 22
Meds: tramadol 25 mg PO SID-BID 7 days
metranidizole 250 mg 1.2 PO BID 7 day
pred 10 mg PO BID 7 days then taper
doxycline and enrofloxicin PO BID
nebulization BID with saline or saline + albuterol only as needed

Harbor Seals: Onion Flake NMLC 15-034 PPv weanling
male [admit] wt=11.8 kg, SL= 96.5 cm; [current] 11.9 kg BS=2/5
CC: chronic otitis media (left), ruptured globe (right)[post PHV1], pox stranded Province town 9/17/15; admit:9/17/15;
last blood: 11/5/15; electrolytes are improved and now normal
last rads: 10-20-15 canalography DV skull, improved lungs (normal) but ruptured ear drum
last ultrasound: 10-20-15
last fecal 9-22-15 (post 25 mg/kg fenbendazole) 2 samples NPF-CRW
PE: (Berridge & Voorhis 11/3/15) Small bump on head between eyes, no ulcer, cause is unclear R/O very early pox.
Right eye with corneal edema, irregular surface and central pink area may be sycheia.
Visual inspection [Williams 12/11/15]: the forehead central pox lesion is starting to regress, the ruptured right globe does not appear painful and also appears to be headed towards a healing by secondary intension, behavior and body score!

**turtles: water temperature 12/11/15 am 77 °F, all turtles swimming**
*All turtles will be continued on prophalaxis antibiotics for bacterial non-Mycobacterial pneumonia, either ceftazadime 22 mg/kg IM q 3d, or oxytetracycline 42 mg/kg diluted IM q 7 days for a total of 60 days of treatment per their original assigned group at NEAQ*
*All turtles receive the following supplements daily [calcium 1/4 tab PO, Seatab 1/4 PO, vit B 1/4 tab PO, injectable super B complex 0.1 cc SQ q 7 days for 1 month].
*Standing medical order for 1% bw LRS SQ BID if not observed to eat.

**Sea Turtles / Kemp’s ridley : turtle NMLC 15-048 TLk juvenile**
ST 2015-157, NEST 15-042Lk, 9849 no band
unknown [admit] wt=2.3 kg, SL= 25.9 cm; [current] 2.4 kg BS = 2/5
CC: cold stun, healing face abrasions, possible pneumonia, swollen RHF
stranded loc:Brewster date: 11/24/15;
admit:12/8/15:
last blood: 12/11/15; increased ALKP, low K, proteins, heterophilia
last rads: 12/17/15; 12/22/15
Rads 15-048 TLk
3 views
lateral-lungs are well inflated, vasulcar pattern is normal, normal edicular pattern, similar to mammal bronchiolar pattern, possible small nodular lesions or superimposition of shell lesions on the lungs CT would be necessary to distinguish or monitor clinical response and report rads in 1-2 months.
DV- limbs WNL, coleum WNL, skeletal WNL
AP tilters, lung volume is good, loss of distinct large airway may be positional, banding edicular pattern in both lungs is common and may not be associated with pathology. CT would be necessary to distinguish lung pathology or monitor clinical response and report rads in 1-2 months.

Possible pneumonia

C Rogers Williams VMD

Hind limb rads 12-22-15- no fractures, soft tissue swelling to RHF

PE [Williams 12-22-15]: HR=48, temp = x, small head wound, right upper eye lid wound, nuchal scute margin with mild separation. New finding of swollen RHF, no skin lesions A: new radiographs taken today., also nuchal scute skin separation and carapace abrasions

P: ok for SSD

Meds: oxytetracycline 42 mg/kg diluted IM q 7:

Sea Turtles / Kemp’s ridley: turtle NMLC 15-049 TLk juvenile

ST 2015-152, NEST 15-043 Lk, 9850 RED LFF

Unknown [admit] wt=2.6 kg, SL= 26.5cm; [current] 2.6 kg BS = 2/5

CC: cold stun, minor skin abrasions

Stranded loc: Brewster date: 11/24/15, admit:12/8/15;

Last blood: 12/11/15; low proteins, and K, elevated cholesterol, glucose, and WBC

Last rads: 12-18-15, 3 views

Laterally-rotated, lung inflation is difficult to assess, edicular pattern is normal

DV-hind limbs obscured, coeleum, skeletal and limbs WNL

AP rotated and tilted, right lung inflation may be decreased, large wire and normal vascular pattern is obscured but may be positional

A: aspects of the study prevent full evaluation but definitive evidence of lung disease is not present

C Rogers Williams VMD

Admission PE [Williams/ Berridge 12-11-15]: BAR HR= 48, temp = 76.6, minor shell lesions, trailing edge of LFF ulcerated, minor nucal scute epidermal separation

OK for SSD

Sea Turtles / Kemp’s ridley: turtle NMLC 15-050 TLk juvenile

ST 2015-159, NEST 15-045 Lk, 9852 RED LFF

Unknown [admit] wt=2.8 kg, SL= 26.5 cm; [current] 2.8 kg BS = x/5

CC: cold stun, neck scaring

Stranded loc: date; admit:12/8/15;

Last blood: 12/11/15; elevated WBC, low
proteins
last rads: 12-18-15, 3 views
lateral - lung inflation is good, edicular pattern is normal
AP - mild tilted view and blurred, lung field with edicial band mid lung on the left rise is
more pronounced then the right side, vascular and large airway is obscured
DV- movement artifact on left hind limb, limbs are over exposed and not fully analyzed,
skeletal. coeleum are wnl
C Rogers Williams VMD
Admission PE [Williams/ Berridge 12-11-15]: BAR HR= 56 temp = 78.0, minor plastron
ulcerations, previous traumatic amputation of RFF and LFF tip, neck lesion superficial on left
side over dorsal sinus, minor carapace lesions
OK for SSD
Meds: ceftazadime 22 mg/kg  IM q 3:

Sea Turtles / Kemp’s ridley: turtle NMLC 15-051 TLk juvenile
ST 2015-X, NEST 15-052 Lk, 9859
unknown [admit] wt=2.7 kg, SL= 28.2 cm; [current] 3.1 kg BS = 3/5
CC: cold stun
stranded loc: Brewster date; 11/24/15
admit:12/8/15;
last blood: 12/11/15; elevated CK,
cholesterol, low K, increased uric acid
(improving)
last rads: 12-18-15 3 views
lateral - dense edicular pattern,
lungs adequately inflated, uniform
increase in lung tissue density and
loss of normal mammalian like
bronchiolar pattern
DV linear abrasions on carapace are present on the right side
missing distal flange on the RHF D3 P3 & 4 -suspected old wound
AP- slightly tilted normal vascular patten, large airway pattern is not seen, likely
position, lung inflammation is adequate
P: correlate with physical exam findings
PE [Williams/ Berridge 12-11-15]:BAR HR= 48, temp = 76.4, very clean turtle, minor plastron
lesions, other WNL, piece of hind flipper missing, but a good looking clean turtle
Meds: oxytetracycline 42 mg/kg diluted IM q 7:
OK for SSD

Sea Turtles / Kemp’s ridley: turtle NMLC 15-052 TLk juvenile
ST 2015-176, NEST 15-061 Lk, 9868 YELLOW LFF
unknown [admit] wt=2.0 kg, SL= 24.6 cm; [current] 2.0 kg BS = 2/5

CC: cold stun
stranded loc: Eastham date: 11/24/15
admit: 12/8/15;
last blood: 12/11/15; increased ALKP, cholesterol, UA, WBC (22k), and CK
last rads: 12-18-15, 3 views
lateral - normal edicular pattern and mammal like bronchiolar pattern, lung inflation is good
DV- WNL
AP- severely tilted, and motion artifact. Evaluation of the lungs is not possible
A: no evidence of disease but reevaluation of the AP view is suggested.
C Rogers Williams VMD
Admission PE [Williams/ Berridge 12-11-15]: BAR HR= 48, temp = 77.3, very clean turtle, no significant lesions
Meds: ceftazadime 22 mg/kg  IM q 3:

Sea Turtles / Kemp’s ridley: Orion NMLC 15-053 TLk juvenile
ST 2015-186, NEST 15-065 Lk, 9872 YELLOW LFF
unknown [admit] wt=1.95 kg, SL= 23.6 cm; [current] 2.1 kg BS = 2/5
CC: cold stun, right eye corneal lesion, minor abrasions and ulcers, CRASH on day 1, possible pneumonia
stranded loc: Duxbury date: 11/25/15, admit: 12/8/15;
last blood: 12/11/15; increased ALKP and decrease potassium
last rads: 12-18-15, 3 views
lateral- egs eel inflated, normal edicular pattern with mammal like bronchiolar pattern, with increased density patch at the 4th lateral scute
DV with movement artifact and limbs over exposed, coeleum contact are WNL, circular areas on the right side may be superimposition with carapace defects
AP- tilted but lung inflation is adequate with edicular bands across the lung fields bilaterally and the vascular pattern and large airway pattern is obscured
A: possible pneumonia, correlate with clinical signs and relate radiographs in 2-4 weeks
Hind limb rads 12-22-15, no fractures,
PE [Williams 12-22-15]: BAR, HR= 48, temp = x, Right eye with crusting corneal lesion at the dorsal position, smallest of the turtles, eyes sunken appearance, minor shell and skin lesions, missing part of RHF, minor welling of RHF repeat rads of hind flippers.
Meds: **ceftazadime** 22 mg/kg IM q 3:
P: neo / poly ophthalmic 1/8” SID-BID Right eye
LRS 20 ml SQ SID 7 days
SSD to skin

**Sea Turtles / Kemp’s ridley**: turtle NMLC 15-054 TLk juvenile

ST 2015-119, NEST 15-013 Lk, 9807 band
unknown [admit] wt=1.7 kg, SL= 22.5 cm; [current] 1.7 kg BS = 2/5
CC: cold stun
stranded Eastham on date: 11/15/15, admit:12/14/15;
last blood: 12/15/15 CG8= acidosis-mixed; 12/15/15, increased ALKP 3418,
increased sodium 163, increased WBC 12K all parameters improving
last rads:
Admission PE:[Voorhis/Williams 9-15-15] HR= 40, temp = 75
RFF tips, top head with abrasions, rostral rub lesion, small turtle
Meds: **ceftazadime** 22 mg/kg IM q 3:

**Sea Turtles / Kemp’s ridley**: turtle NMLC 15-055 TLk juvenile

ST 2015-145, NEST 15-33 Lk, 9840 band
unknown [admit] wt=1.7 kg, SL= 24.2 cm; [current] 1.7 kg BS = 2/5
CC: cold stun, UA (6.2 to 1)
stranded Brewster on date: 11/23/15, admit:12/14/15;
last blood: 12/14/15; increased ALKP 2228, decreased alb 0.9, UA from 6.2 to 1, WBC 19k(het and lymph), HCT 25%
last rads: 12-18-15, 3 views
lateral - lung inflation may be slightly impaired with rounded lung edges and more inflammation caudally, edicular pattern is uniform and normal
DV- minimal skin missing on trailing edge of RHF, other WNL
AP- movement and oblique view, appearance of increased densities in the left lung field, with increased density at the mid body ventral aspects of the lung fields
A: lung pathology is suspected, correlate with clinical signs and repeat radiographs in 2-4 weeks
Admission PE [Voorhis Williams 12/15/15] HR=50, temp 73.5, carapace with marginal scute damage
Meds: **ceftazadime** 22 mg/kg IM q 3:
Sea Turtles / Kemp’s ridley: turtle NMLC 15-056 TLk juvenile
ST 2015-142, NEST 15-37 Lk, 9844 band
unknown [admit] wt=2.0 kg, SL= 24.2 cm; [current] 2.0 kg BS = X/5
CC: cold stun, R upper plastron indentation, increased LDH (25k), Uric acid (5.2 to 1.5)
stranded Brewster on date: 11/24/15, admit:12/14/15;
last blood: 12/14/15; increased ALKP 2038, AST 1410, CK 63k, LDH 25919, Alb low 0.7, low pro tine 2.3, elevated CHOPL 456, UA 5.2 to 1.5 HCT 24%
last rads: 12-18-15, 3 views lateral - normal edicular pattern with mammal like bronchiolar pattern, lungs are well inflated
DV - motion artifact in RHF, other WNL
AP- lungs well inflated, normal vascular pattern, obscured large airways possible edicular banding low in the lung fields
A: Correlate with clinical picture possible lung pathology
repeat rads in 2-4 weeks
Admission PE [Voorhis / Williams 9/15/15] HR+ 50, temp = 73.4
separation of the skin from shell, plastron lesion in the right upper quadrant, compression type issue
Meds: ceftazadime 22 mg/kg IM q 3:

Sea Turtles / Kemp’s ridley: turtle NMLC 15-057 TLk juvenile
ST 2015-204, NEST 15-204? Lk, 9889 band
unknown [admit] wt=2.7 kg, SL= 27.4 cm; [current] 2.7 kg BS = 2/5
CC: cold stun, UA from 5 to 0.6
stranded Turo on date: 12/3/15, admit:12/14/15;
last blood: 12/14/15 BG-OK-crw;
12/15/15 increased ALKP 2938, low proteins (alb, TP, glob), UA from 5 to 0.6, WBC 11.2 mild heterophilia
last rads: Admission PE [Voorhis / Williams 9/15/15] HR= 40 temp = 71.4, minor shell lesions, plastron abrasion, marginal scute abrasions and ulcers
Meds: **oxytetracycline** 42 mg/kg diluted IM q 7:

**Sea Turtles / Kemp’s ridley**: turtle NMLC 15-058 TLk juvenile

ST 2015-223, NEST 92-X Lk, 9904 band
unknown [admit] wt=2.7 kg, SL= 27.1 cm; [current] 2.8 kg BS = X/5
CC: cold stun, mandibular rhampotheca lesion, increased LDH (9810)s
stranded Eastham on date: 12/5/15, admit:12/14/15;
last blood: 12/14/15; increased ALKP 2107, CK 48k, LDH 9810, chop 387, blu 163, UA 2.3; low alb 0.9
last rads: 12-20-15, 3 vies
lateral- slightly overexposed, lung volume is adequate
DV - flippers slightly overexposed WNL
AP tilted- obscured large airways and vascular patterns, right lungs appear to have less volume
A: may have lung disease on R, repeat AP in 2-4 weeks
PE [Williams 9-22-15] HR= 48 temp = x, right lower rhampotheca lesion, does not affect function
Meds: **oxytetracycline** 42 mg/kg diluted IM q 7:

**Sea Turtles / Kemp’s ridley**: turtle NMLC 15-059 TLk juvenile

ST 2015-225, NEST 15-94 Lk, 9906 band
unknown [admit] wt=2.2 kg, SL= 25.9 cm; [current] 2.6 kg BS = 2/5
CC: cold stun, lots of surface trauma
stranded Eastham on date: 12/5/15, admit:12/14/15;
last blood: 12/15/15 CG8 iCa=0.69 O, blood collected (lymph contaminated, no CBC)
last rads:
PE [Williams 9/22/15] HR= 20, temp = x
minor shell lesions, scabs and crusting exudate, vental caudal surfaces but tail and cloaca are OK, over all pretty beat up with relative minor surface scrapes and abrasions that appear to be healing
Meds: **oxytetracycline** 42 mg/kg diluted IM q 7:

**Sea Turtles / Kemp’s ridley**: turtle NMLC 15-060 TLk juvenile
ST 2015-228, NEST 15-97 Lk, 9909 band
unknown [admit] wt=1.8 kg, SL= 24.5 cm; [current] 1.8 kg BS = 2/5
CC: cold stun, linear carapacial excoriations, anemic 25%, UA 2.5
stranded Eastham on date: 12/5/15, admit: 12/14/15;
last blood: 12/14/15, increased ALKP (2142), CK (22k), GLU (175), UA (2.5), WBC (12k heterophilic);
decreased ALB (0.8), HCT 25%
last rads: 12-18-15, 3 views
lateral-lungs well inflated, discrete density between 2-3 lateral sucre, may be end on vessel, normal edicular pattern with mammal like bronchiolar pattern
DV- FF tips off plate, RHF missing D2 P3&4, deformed D1 P3 and D2 P2, other WNL
AP- large airway obscure on right, edicular band bilateral, and left lung is less inflated then the right
A: suspect lung pathology, correlate with clinical picture and repeat rads in 2-4 weeks
Admission PE [Berridge / Williams 9/15/15] HR = temp = 72.1
linear carapace abrasions on left side
Meds: ceftazadime 22 mg/kg IM q 3:

Sea Turtles / Kemp’s ridley: turtle NMLC 15-061 TLk juvenile
ST 2015-222, NEST 15-98 Lk, 9910 band
unknown [admit] wt=2.8 kg, SL= 28.2 cm; [current] 2.8 kg BS = 2/5
CC: cold stun, UA (2.1)
stranded Wellfleet on date: 12/5/15, admit: 12/14/15;
last blood: 12/14/15; increased (3557), CK (10k), GLU (216), UA (2.1), WBC (11k- heterophilia); decreased (0.8), TP (2.4), Ca (6)
last rads:
Admission PE [Berridge / Williams 9-15-15] HR= 60, temp = 71.6, minor
RFF missing area, inor carapace lesions, mild neck scaring
Meds: oxytetracycline 42 mg/kg diluted IM q 7:

Sea Turtles / Kemp’s ridley: turtle NMLC 15-062 TLk juvenile
ST 2015-231, NEST 15-101 Lk, 9913 band
unknown [admit] wt=1.8 kg, SL= 23.5 cm; [current] 2.3 kg BS = 3/5
CC: cold stun
stranded Brewster on date: 12/5/15, admit: 12/14/15;
last blood: 12/14/15
last rads: 12-18-15, 3 views
lateral - lungs well inflated, normal edicualr pattern, discrete increased focal are in the second lateral scute like an end on vessel
DV - WNL
AP - lungs well inflated, bilateral edicualr bands right sided obscured vascular pattern and large airway
A: possible right sided lung disease, correlate with clinical signs and repeat radiographs in 2-4 weeks
PE [Williams 9-15-15] HR = 48, temp = x, no major lesions
Meds: ceftazadime 22 mg/kg IM q 3:

Sea Turtles / Kemp’s ridley: turtle NMLC 15-063 TLk juvenile
ST 2015-232, NEST 15-102 Lk, 9914 band
unknown [admit] wt=1.9 kg, SL= 25.4 cm; [current] 2.35 kg BS = 3/5
CC: cold stun
stranded Brewster on date: 12/5/15, admit: 12/14/15;
last blood: 12/14/15
last rads:
PE [Williams 9/22/15] HR = 52, temp = x, carapace leison palston lesions, mucous in eye, pale mucous membranes, RFF tip leisons, soft tip to nasal area
Meds: oxytetracycline 42 mg/kg diluted IM q 7:, vit B

Sea Turtles / Kemp’s ridley: turtle NMLC 15-064 TLk juvenile
ST 2015-X, NEST 15-X Lk, X band
unknown [admit] wt=2.1 kg, SL= 24.4 cm; [current] 2.1 kg BS = 2/5
CC: cold stun, plastron crater
stranded X on date: X, admit: 12/14/15;
last blood: 12/14/15; increased ALKP (3945), CK (19k), CHOL (497), UA (1.6); decreased (ALB (0.8)
last rads:
Sea Turtles / Kemp’s ridley:
turtle NMLC 15-065 TLk juvenile
ST 2015-X, NEST 15-X Lk, X band
unknown [admit] wt=2.4 kg, SL= 26.2 cm; [current] 2.2 kg BS = 2/5
CC: cold stun, missing RHF, AST (902), LDH (18k), UA (1.5)
stranded X on date: X, admit:12/14/15;
last blood: 12/14/15, CG8 alklosis-mix, blood
to IDEXX
increased ALPK (1565), AST (902), CK (81k), LDH (18k), GLU (164), Ca (5.6), UA (1.5), heterophilia
last rads:NMLC 15-065 TLK3 view radiograph series 12-16-15
AP slightly off center
left sided GI dissension, normal vascular pattern
DV complete very good exposure
missing the right hind flipper below the stifle, a reminate of the tibia is present, the femur is normal
other limbs normal, no ostetolytic lesions
coleum is WNL as is shell and axial skeleton
Lateraal WNL
A: previous traumatic amputation of RHF healed
GI distension causing positive buoyancy
C Rogers Williams VMD 12-17-15
PE [ Williams 12/22/15] HR= 44  temp = x, missing flipper of the right hind leg, old injury, no wound
Meds: fludis

Sea Turtles / Kemp’s ridley: turtle NMLC 15-066 TLk juvenile
ST 2015-X, NEST 15-X Lk, X band
unknown [admit] wt=2.7 kg, SL= 26.5 cm; [current] 2.7 kg BS = 2/5
CC: cold stun, left hind
inguinal rash, UA over 12 !,
now 3.2, LDH>36000, AST 938,
stranded X on date: X, admit:12/14/15;
last blood: 12/14/15 increased ALKP (1814), AST (938), CK (343k), LDH (36k), GLU (298), UA (12.7 to 3.2)
last rads:
Admission PE [Berridge / Williams 12/15/15] HR= 40, temp = 69.8, rash left inguinal pouch, scrapes on plastron and carapace.

**Sea Turtles / Kemp’s ridley**: turtle NMLC 15-067 TLk juvenile

ST 2015-236, NEST 15-106 Lk, 9918 band
unknown [admit] wt=3.2 kg, SL= 29.4 cm; [current] 3.2 kg BS = 2/5

CC: cold stun, right nictatans laceration (minor), increased UA (2.5)

stranded Turo on date: 12/5/15, admit:12/14/15;
last blood: 12/14/15, increased ALPK (1657), CK (15k), CLOH (375), GLU (156), UA (2.5)
last rads: 12-17-15

Rads: 15-067 TLk, 3 views
AP- left main bronchus is obscured, normal fine edicualr pattern, good inflation of both lungs, no nodules
DV- front limbs are a little too dark but no lesions are seen
no abnormal GI contents or lesions, skeleton is normal
lateral - normal edicular pattern with mammal bronchiloar-like pattern, lungs are well inflated
A: no significant lesions-CRW

Admission PE [Berridge / Williams 12/15/15] HR= cant get, temp = 71.2, small linear tear/laceration to leading edge of the nictatans, can be elevated b flushing but not removed, no corneal lesions
Meds: oxytetracycline 42 mg/kg diluted IM q 7:

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**Sea Turtles / Kemp’s ridley**: turtle NMLC 15-068 TLk juvenile

ST 2015-240, NEST 15-108 Lk, 9920 band
unknown [admit] wt=1.8 kg, SL= 24.1 cm; [current] 2.0 kg BS = 2/5

CC: cold stun, elevated AST and LDH, elevated UA

stranded Dennis on date: 12/5/15, admit:12/14/15;
last blood: 12/14/15; increased ALKP (3524), AST (830), LDH (12054), CK (40k), UA (3.7), heterophilia; decreased (0.8)
last rads:
PE [Williams 12/22/15] HR= 44, temp 70.5, RFF digit missing old injury, no active wounds
A: needs rads review, plastron and carapace abrasions
Meds: oxytetracycline 42 mg/kg diluted IM q 7: SSD

**Sea Turtles / Kemp’s ridley**: turtle NMLC 15-069 TLk juvenile
ST 2015-241, NEST 15-109 Lk, 9921 band
unknown [admit] wt=2.7 kg, SL= 27.2 cm; [current] 2.7 kg BS = 2/5
CC: cold stun, increased UA
stranded Dennis on date: 12/5/15,
admit:12/14/15;
last blood: 12/14/15; increased ALKP (1935), CK (20 k), CHOL (378)< UA (2.2); decreased ALB (0.8)
last rads: 12-18-15, 3 views
lateral- slightly rotated no lesions
DV- WNL
AP- tilted and obscured
A: positional issues, repeat films in 1-2 mo., sooner if clinical problem
Admission PE [Voorhis / Williams 12/15/15] HR= 48, temp = 71.9, neck scaring, skin, carapace
and plastron abrasions, typical and mild, 1 skin ulcer
Meds: ceftazadime 22 mg/kg IM q 3:

**Sea Turtles / Kemp’s**

**ridley**: turtle NMLC 15-070
TLk juvenile
ST 2015-X, NEST 15-X Lk, X band
unknown [admit] wt=1.3 kg, SL= 20.7 cm; [current] 1.3 kg BS = 1/5
CC: cold stun (smallest),
pockmarked carapace,
elevated UA (2.9)
stranded X on date: X, admit:12/14/15;
last blood: 12/14/15; increased ALKP (7657), CK (18k), GLU (167), UA (2.9); decreased
ALB(0.8), Ca (5.6)
last rads:
pock-marked but superficial.

**Sea Turtles / Kemp’s ridley**: Captn’ NMLC 15-071 TLk juvenile
ST 2015-X, NEST 15-X Lk, X band
unknown [admit] wt=4.4 kg, SL= 31.8 cm; [current] 4.5 kg BS = 3/5
CC: cold stun (largest), calcium issues improving, not eating well, glucose issues
stranded X on date: X, admit:12/14/15;
last blood: 12/15/15  CG8 *** iCa,
blood hemolymph contaminated no CBC, blood to IDEXX; 12/22/15 CG8
iCa= 0.8, pH uncorrected 7.6, glu from 157 (hi) to 87 (lo)
last rads:
PE [Williams 12/22/15] HR= 46, temp = x, scabs and nucal scute skin seperation but no major external lesions
Meds: oxytetracycline 42 mg/kg diluted IM q 7: fluids, vitB

Sea Turtles / Kemp’s ridley: turtle NMLC 15-072 TLk juvenile
ST 2015-256, NEST 15-123 Lk, 9935 band
unknown [admit] wt=1.8 kg, SL= 24.0 cm; [current] 1.8 kg BS = 2/5
CC: cold stun, increased UA
stranded Eastham on date: 12/7/15, admit:12/14/15;
last blood: 12/14/15; increased ALKP (3093), CK (9680), CHOL (406), GLU (152), UA 1.4), WBC 11k heterophilic)
last rads:
Admission PE [ Voorhis /Williams 12/15/15] HR= 40, temp 69.6, neck lesions, minor abrasions
Meds: ceftazadime 22 mg/kg  IM q 3:

Sea Turtles / Kemp’s ridley: turtle NMLC 15-073 TLk juvenile
ST 2015-261, NEST 15-128 Lk, 9940 band
unknown [admit] wt=2.3 kg, SL= 26.2 cm; [current] 2.3 kg BS = 3/5
CC: cold stun, increased UA
stranded Turo on date: 12/7/15, admit:12/14/15;
last blood: 12/14/15, increase ALKP (2930), CK (26k), CHOL (494), GLU (196), UA (1.7)
last rads: 12-18-15 3 views
radiographs 15-073 TLk
lateral- lung fields are 80% inflated but no lesions are observed
DV-small skin tear to right hind flipper between digit 3 and 4  no clinical significance, no other lesions, GI WNL
AP- right edicular pattern is slightly increased compared to LEFT, lungs are well inflated, large air ways are normal
A: no significant lesions-CRW
Admission PE [Voorhis / Williams 12/15/15] HR= 50, temp= 69.6, linear abrasions on carapace

Sea Turtles / Kemp’s ridley: turtle NMLC 15-074 TLk juvenile
ST 2015-296, NEST 15-153 Lk, 9970 band
unknown [admit] wt=3.2 kg, SL= 29.1 cm; [current] 3.2 kg BS = 2/5
CC: cold stun, elevated LDH,
anemic
stranded Turo on date: 12/12/15, admit:12/21/15;
last blood: 12/21/15; increased CK (28k), LDH (10 K), GLU (200);
decreased HCT (19%), ALN (0.8), TP (2.4), Ca (5.8)
last rads:
Admission PE: [Williams 12-22-15],
HR= 44, plastron ulcers, neck lesions, front and hind flipper lesions, carapace ulcers and abrasions, healing wound over the right upper eye lid and head
Meds: fluids, SSD

Sea Turtles / Kemp’s ridley: turtle NMLC 15-075 TLk juvenile
ST 2015-195, NEST 15-155 Lk, 9972 band
unknown [admit] wt=2.6 kg, SL= 26.1 cm; [current] 2.6 kg BS = 3/5
CC: cold stun, old jaw injury, elevated LDH
stranded Turo on date: 12/12/15, admit:12/21/15;
last blood: 12/21/15; increased WBC (13.2 hemophilic), ALKP (3636)< CK(21k), LDH (9081), GLU (194);
decreased ALB (0.8), TP (2.2), Ca (5.7), PHOS (4.2), K (2.8)
last rads:
Admission PE: [Williams 12-22-15] HR = 40, left old jaw lesion, deformed maxillary rhampoheca, no junctional problems are anticipated with this lesion, plastron with circular impression lesions, and minor abrasions and ulcerations
Meds: fluids, SSD

**Sea Turtles / Kemp’s ridley**: turtle NMLC 15-076 TLk juvenile

ST 2015-299, NEST 15-156 Lk, 9973 band

unknown [admit] wt=2.3 kg, SL= 25.4 cm; [current] 2.3 kg BS = 3/5

CC: cold stun, elevated LDH and UA

stranded Turtle on date: 12/12/15, admit:12/21/15;

last blood: 12/21/15 increased CK (51k), LDH (13k), CHOL (422), GLU (250) UA (2.3); decreased ALB (0.8), K(2.8)

last rads:

Admission PE: [Williams 12/22/15] HR = 44, minimal nuchal scute skin separation, other minor abrasions
Meds: SSD

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**Sea Turtles / Kemp’s ridley**: turtle NMLC 15-077 TLk juvenile

ST 2015-301, NEST 15-158 Lk, 9975 band

unknown [admit] wt=2.4 kg, SL= 26.3 cm; [current] 2.4 kg BS = x/5

CC: cold stun

stranded in Turtle on 12/12/15, admit:12/21/15;

last blood: 12/21/15, increased ALKP (842), CK (17k), CHOL (530), GLU (181), decreased ALB (0.8), K (2.9)

last rads:

Admission PE: [Williams 12/22/15] HR = 40, BAR, minimal nuchal scute skin separation, minor head ulcerative laceration, minor abrasions
Meds: fluids, SSD

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**Sea Rogers Williams VMD**

attending veterinarian and director of science

[STAFF: Kathy Zagzebski, Kate Shaffer, Margo Madden, and Ashley Bolbrock]

@Rounds: Drs. Andrew Voorhis, and Dr. Bruce Berridge