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.


NOAA Inspection, and “Pup Room” Approval

With 2 pools, 2 pods, and the new Pup Room, the NMLC has increased our pup capacity to assist the network, leaving dry holding for overnight pups or new admission isolation. Actual capacity depends cases, size/class, isolation, water quality, as well as other issues.
Gray Seals: Cilantro NMLC 15-007 PHg
lungworms (resolved) and infected brand, *Step. phocae* abscess (resolved), tapeworms, intestinal flukes (resolved), weight loss, eosinophilia
male [admit] wt=32 kg, SL= 114 cm; [current] wt= 32.4 BS=4/5
last blood:6/30/15 WNL inhouse CBC WBC=14.84, HCT = 45.9%, PTL = 730
last rads:5/4/12: last fecal: 6/2/15; NPS {no parasites seen}
PE: [Williams /Voorhis 6-30-15] exit physical: EENT WNL, BS 4/5, robust and active, resists restraint. Skin brand has healed, no other lesions. HR=100, temp = 99, RR= 10 apneustic swims and breaths and can haul out. Other WNL Visual Inspection:
A: OK for release, no active problems, withdrawal of 14 days complete, NOAA approval

Harbor Seals: Dill NMLC 15-009 PPv male
euthanasia after prolonged illness followed by rapid deterioration
Athens Pan-Herpes PCR negative 6/10/15 blood, nasal and ocular swabs
Athen Pan-Herpes PCT 6/27/15: pending
DX: open

Harbor Seals: Basil NMLC 15-012 PPv [on gruel]
abandoned pup, hypoglycemia resolving, electrolyte disturbances resolving, reopened umbilicus, exposed to lice
male [admit] wt=8.1 kg, SL= 69 cm; [current] 10.1 kg BS=2/5
stranded 5/24/15 COA Deer Island ME; admit: 5/25/15;
last blood:5/26/15; 5/28/15 EP
last rads: 5/26/15
Visual Inspection [Williams] : WNL; OK for pool
**Harbor Seals** : Rue NMLC 15-013 PPv [on gruel]
abandoned pup, borderline hypoglycemia (resolving), exposed to lice
male [admit] wt=7.1 kg, SL= 7.4 cm; [current] 9.0 kg BS=2/5
stranded 5/26/15 MMoM ME; admit: 5/27/15;
Athens Pan-Herpes PCR negative 6/10/15 blood, nasal and ocular swabs
last rads: 5/28/15
HX: blood on OGT after feeding, OK to monitor
Visual Inspection [Williams] : WNL; OK for pool
P: florienf 0.1 mg 1 PO SID 714 days #14

**Harbor Seals** : Mace NMLC 15-014 PPv male
died after acute illness
stranded 5/24/15 COA, ME; admit: 5/28/15; died 6/22/15
We’re sad to have lost Mace after a 24 hour period of “crashing” that involved low blood sugar,
hyponatremia, fever, an increased WBC and a cloudy eye. Mace died despite IV fluids, Florunef,
antibiotics, and dextrose. An acute viral infection is suspected. A necropsy was preformed at
WHOI.
Athens Pan-Herpes PCR negative 6/30/15 blood, nasal and ocular swabs
Dependent pup from Maine received at NMLC on 5/24/15 from COA Allied Whale. Started to spit
up feedings and show lethargic behavior on 6/20/15. The animal became less and less responsive
over the next 48hrs. Blood work showed a low sodium value on 6/21/15. Died on 6/22/15 at
approximately 0800.

**Harbor Seals** : Juniper NMLC 15-015 PPv [on formula]
abandoned pup, hyponatremia, lice, hypoglycemia [BG=126]
female [admit] wt=7.8 kg, SL= 80 cm; [current] 8.4 kg x cm BS=1/5
last blood: 6/4/15 (BG=116) 
last rads: 6/9/15 failed; 6/24/15 (lateral), 6/30/15 WNL 
PE [admit Williams 6-24-15]: TPR=99.0, 120,12, IOP R=42, L=42, no leisons, oral WNL, no aural d/c, teeth, mm pink and moist, abd soft and normal, other WNL 
P: 0.9% saline / LRS 100-200 ml SQ SID, add 1 g NaCl each feed, 2 cc 50% dextrose 
P: florienf 0.1 mg 1 PO SID 14 days #14

**Harbor Seals**: Sage NMLC 15-016 PPv [on formula]
abandoned pup, fever, oral ulceration, hyponatremia, hypoglycemia (109) exposed to lice
female [admit] wt=7.1 kg, SL= 79 cm; [current] 8.1 kg x cm BS=1/5 
stranded 6/?/25, Scarbough Maine MMOME; admit: 6/7/15; 
last blood: 6/7/15 (BG=159) 
Athens Pan-Herpes PCR negative 6/10/15 blood, nasal and ocular swabs 
last rads: 6/9/15 failed 
PE [Williams 6-24-15]: BAR, TPR= 97.8, 100, 10 no lesions, mm p/m CRT<2 sec no murmur, lungs clear and dry, oral WNL, teeth, no nasal/ aural d/c limbs wnl, no wounds, abd soft, other WNL 
P: 0.9% saline/LRS 100-200 ml SQ SID, add 1 g NaCl each feed, 2 cc 50% dextrose 
P: florienf 0.1 mg 1 PO SID 14 days #14

**Harbor Seals**: Nutmeg NMLC 15-017 PPv [on formula]
abandoned pup, hypoglycemia (49->168), umbilical issue, vomiting liver disease (ALT=236, GGT= 38, T Bil = 6.2) 
female [admit] wt=6.8 kg, SL= 63 cm; [current] 8.4x kg BS=2/5 
stranded 6/?/25 MMoM; admit: 6/23/15; 
last blood: 6/23/15; 7/7/15 
increased: ALT 236, GGT 38, TBil 6.2, BUN 67 
decreased: glob 1.2, Ca 8.3, K 3.2 
last rads: 6/24/15 (lateral abd) WNL; last US: 6/30/15 (liver) 
UA [mid stream] SG=1.015, pH 6, Leu 5, NIT neg, Pro neg, Glu +++ 1000 mg/dl, KET neg, 
UBG normal, BIL ++, Hb + (50). 
PE [Williams 6-30-15]: PE BAR, EENT WNL, no lesions. ABD US, liver has normal echogenisity, no free abdominal fluid, gall bladder normal in size and echogenisity. No masses or abnormalities seen. Both kidneys appear normal.
A: abandoned pup possible resolved umphiulitis and residual hepatitis, appear to be resolving
PE: [7-7-15 Dr. Voorhis] = TPR 100.9, 130, 20; vocal and active, no significant PE findings Oral
WNL, good hydration rings.
dorsal sinus BG= 148, hind flipper BG = 130
P: pup protocol.
RX: Clavamox 250 mg 1/2 PO BID 7 days #7 (ascending bacterial hepatitis 2° umbilical
infection -presumed) Complete course, d/c SQ fluids.-CRW

Harbor Seals: Cinnamon NMLC 15-018 PPv [on gruel] weanling
female [admit] wt=8.6 kg, SL= 80 cm; [current] 8.6 kg 80 cm BS=2/5
fever [105.5°F]-resolved, stomatitis, lacerations/abrasions
stranded 6/7/25 Sea Brook NH; admit: 6/29/15; died 7/1/15, necropsy IFAW 7/2/15
last blood:6/29/15
last rads: 6/30X/15 (chest and abdomen lateral and VD)
PE: [admit Williams 6-30-15] TPR= 101.3, 110, 20, weanling swollen muzzle and gingivitis/
stomatitis, nasal passages allow air no d/c, eyes clear and bright [IOP R=44, L=39, no aural d/c,
laceration to right cheek area clipped and cleaned, flipper with minor abrasions and lacerations,
abdomen soft. MM pink and moist, lungs clear. Behavior normal for breed and age.
A: “weanling mouth” minor trauma, and history of fever which was severe but resolved
P: start abx, continue with fluids and gruel
enrofloxicin 35 mg PO BID 7 days, amoxicillin 250 mg PO BID 7 days

Unfortunately Cinnamon died over night on 7/1/15, PHV1 is strongly suspected along with other problems. The necropsy was performed by IFAW today, we’ll keep you posted.

**Harbor Seals** : Raspberry NMLC 15-019 PPv
female [admit] wt=8 kg, SL= 77 cm; [current] kg 8 cm BS=2x/5
swollen Left Hind flipper
stranded Bidderford ME 6/30/15; admit: 7/1/15;
last blood:7/12/15:
hind flipper BG=73 mg/dl; dorsal sinus BG = 130 mg/dl
last rads: 7/2/15 (full set + flippers)
PE: [admit 7/2/15 Williams]: TPR= 98.9°F, 120, 40 mm pink and moist, lungs clear no murmur, only lower teeth, eyes WNL hydration rings [IOP L=36, R=30], no aural d/c, behavior, skin, and flippers WNL, abd palp WNL. Swollen Left hind, pelvis is not fused, no lesions. U/S of L flipper to check for abscess, no fluid pockets seen.
RX: enrofloxicin 4 mg/kg PO BID 7d, LRS 100-200 SQ TID, meloxicam 0.1 mg/kg PO SID
PE: [Dr. Berridge 7-7-15] TPR=99.1, 140, 40 mm pink moist, oral WNL, abdominal palpation WNL, no lesions, normal hydration rings, normal behavior for pup.

**Harbor Seals** : Fennel NMLC 15-020 PPv
female weanling [admit] wt=6.8 kg, SL= x cm;
lethargic labored breathing
stranded Rye NH; admit: 7/2/15; died 7/2/15, necropsy

Harbor Seals: Catnip NMLC 15-021 PPv
female weanling [admit] wt=7.9 kg, SL= 76 cm;
sick
stranded Plumb island MA; admit: 7/4/15; died 7/5/15, necropsy 7/6/15
Gross Report IFAW: Emaciated, female harbor seal weanling. Suffering from a mild parasite load; centralized in the stomach and upper intestines – 15+ thorny headed worms and 65+ nematodes total. Small circular lesions (similar to a puncture wound) were observed scattered across the surface of the body and focused in the cranial region – sampled for histology. Some small superficial scrapes were observed on the rear flippers, in addition to a small, condensed mass that was – sampled for histology. Reactive nodes and glands included – mesenteric, both sub-scapular, both pre-scapular, a histo-sampled salivary gland, and adrenal glands. Adrenal glands had a bumpy/textured surface and were discolored a dark grey externally. The caudal intestines were dilated and discolored a dark brown/green, in addition they contained black, tar-like ingesta. The heart was discolored a very dark purple and contained numerous thin, possibly atypical tissue attachments and some clotted blood (including a chicken fat clot). The stomach contained 45-55 nematodes and was discolored a dark pink but not ulcers or food were observed. Bladder was dilated/thin and did not contain urine. Thick, white froth was observed in the lungs, bronchioles, and aveoli. The lungs were spongy with some light-pink mottling that penetrated throughout the organs in some areas.

Harbor Seals: Salt NMLC 15-022 PPv weanling
male [admit] wt=13.5 kg, SL= 93 cm; [current] 13.5 kg BS=2/5
oral lesions, fractured left mandible, umbilical ulcer, wounds, swollen hind flippers, melena

stranded MA 7/7/15; admit: 7/6/15;
last blood: 7/7/15:
hind flipper BG = 165 mg/dl; dorsal sinus BG = 152 mg/dl
last rads: 7/7/15 (full set + flippers)
PE: [admit 7/7/15 Williams]: TPR = 100.9, 120, 20, mm pink, ulcerated and fractured left mandible posterior to K9, all K9 and post canines are missing with exposed sockets and necrotic mandibular bone exposed with ulcerated matching cheek lesion, generalized stomatitis and missing large portion of lower lip on left side. Right eye with corneal edema in a focal area, pupils constricted, no fundic exam [IOP R=40, L=40]. Frothy nasal d/c, no aural d/c. Wounds to left axillary area, pin point ulcers. Umbilicus is ulcerated but no purulent discharge. Both hind flippers are swollen R>L no fluctuant areas, palpate normally, hind end stained with melenistic feces, rectal WNL.
P: pain meds, antibitoics, blood work, nasal and oral swabs for herpes PCR, and see how Salt stabilizes over 1 week then assess jaw. Adm 1 cc buprenorphine 0.3 mg, start tramadol 50 mg PO q 8 hrs. Enrofloxcin 5 mg/kg BID, amoxicillin 350 mg BID. Fluids q 8 hrs. 6 x vit B inj. 0.25 cc SQ SID. ISOLATION, suspected PHV-1 [stomatitis]