

SER 10-0649

E-Mail Form

### Oiled Marine Mammal

#### Gross Necropsy Report

Form completed by: Morgan McCallen Date: 10/20/2010

Enforcement Officer:

Strand/Capture location: Panama City Beach, FL

Collectors Name: Gulf Coast Inc.

Intake date: 9/21/10 Euthanasia

Death date: unknown Time: yes

Post mortem date: 9/21/10 Time: no

Carcass Classification: Frozen yes  no

2- fresh 3- fair (organs intact) 4- poor 5- mummified 3

Photographs:

Radiographs:

Spill Name: BP Deepwater Horizon

Animal Log #:

Level A Field #: GW20100011D Tag #:

Species: Tursiops truncatus

Sex: Female Age: Sub-adult

Weight: 97 kg  estimate/actual

SON: emaciated 1 2 3 4 5 6 7 obese 4

Measurements: Blubber depth 15 mm

SL 198.5 cm AG 112.5 cm UG 60 cm XG 11 cm

Clinical signs/diagnosis:

Antibiotics given: none

Pertinent lab results: none

#### GROSS NECROPSY ABNORMALITIES:

Respiratory	FO	Hepatobiliary	NV	Repro	NV	Musculoskeletal	NV
Urinary	NV	Lymphatic	FO	Endocrine	FO	Sensory	NV
Integumentary	NV	Urinary	NV	Nervous	NV		

Subadult female Atlantic Bottlenose dolphin. No obvious signs of human interaction. Animal in good body condition. Teeth were worn and some were missing. Lungs were mottled (purple and pink) in color. Calcified nodules found throughout the lung. Thoracic lymph nodes were also mottled in color but no gross enlargement. The heart was extremely decomposed. Stomach had no gross lesions observed. Stomach was also filled with undigested food (shrimp and squid). The esophagus was also filled with undigested food. There was a large area of hemorrhage in the mesentery. The small intestines had small contusions on the mucosal surface of the small intestines which were diffuse. Urine was light yellow and thick in consistency.

#### SWABS FOR BACTERIOLOGICAL AND VIRAL ANALYSIS

Rectal  Tongue  Other

#### HYDROCARBON ANALYSIS SAMPLES

Bile <input checked="" type="checkbox"/>	Kidney <input checked="" type="checkbox"/>	Blubber/fat <input checked="" type="checkbox"/>	Other <input type="checkbox"/>
Blood <input checked="" type="checkbox"/>	Muscle <input checked="" type="checkbox"/>		
Urine <input checked="" type="checkbox"/>	Lung <input checked="" type="checkbox"/>		
Liver <input checked="" type="checkbox"/>	Intestine <input checked="" type="checkbox"/>		

#### MICROBIOLOGY

Lung <input type="checkbox"/>	Other <input type="checkbox"/>
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#### SWABS - other

Stomach, prostate, and rectal swabs

#### HISTOLOGY SAMPLES

Lung <input checked="" type="checkbox"/>	Thyroid <input type="checkbox"/>	ileum <input type="checkbox"/>	kidney <input checked="" type="checkbox"/>	mammary gland <input checked="" type="checkbox"/>	muscle <input checked="" type="checkbox"/>
trachea <input checked="" type="checkbox"/>	tonsil <input type="checkbox"/>	colon <input checked="" type="checkbox"/>	ureter <input type="checkbox"/>	adrenal <input checked="" type="checkbox"/>	gonad <input type="checkbox"/>
heart <input checked="" type="checkbox"/>	tongue <input checked="" type="checkbox"/>	pancreas <input checked="" type="checkbox"/>	urinary bladder <input checked="" type="checkbox"/>	skin <input checked="" type="checkbox"/>	prostate <input type="checkbox"/>
spleen <input checked="" type="checkbox"/>	esophagus <input checked="" type="checkbox"/>	spleen <input checked="" type="checkbox"/>	urethra <input type="checkbox"/>	eye (L/R) <input type="checkbox"/>	uterus <input checked="" type="checkbox"/>
pulmonary artery <input checked="" type="checkbox"/>	stomach <input checked="" type="checkbox"/>	liver <input checked="" type="checkbox"/>	blubber <input checked="" type="checkbox"/>	fat-sites <input type="checkbox"/>	vagina <input type="checkbox"/>
thymus <input type="checkbox"/>	duodenum <input type="checkbox"/>	gall bladder <input type="checkbox"/>	bone marrow <input type="checkbox"/>	whole repro <input checked="" type="checkbox"/>	canalic <input type="checkbox"/>
salivary gland <input type="checkbox"/>	jejunum <input type="checkbox"/>	brain <input checked="" type="checkbox"/>	spinal cord <input type="checkbox"/>		penis <input type="checkbox"/>

#### LYMPH NODES:

colonic <input checked="" type="checkbox"/>	gastric <input type="checkbox"/>
sublumbar <input type="checkbox"/>	hepatic <input checked="" type="checkbox"/>
inguinal <input type="checkbox"/>	mesenteric <input checked="" type="checkbox"/>
axillary <input type="checkbox"/>	submandibular <input type="checkbox"/>
prepectoral <input checked="" type="checkbox"/>	tracheobronchial <input type="checkbox"/>

Cause of death (preliminary diagnosis): open

Examined: Morgan McCallen Examiner's signature: Date: 9/21/10

Full necropsy  Partial necropsy  Field necropsy