

Medical History Report - Summary for Individual Specimen  
NATIONAL ZOOLOGICAL PARK

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=====
Scientific Name: ELEPHAS MAXIMUS MAXIMUS           Accession #: 101822
Common Name: SRI LANKAN ELEPHANT                 Female
Name: Shanthi                                   Birth: 15.Mar.1975 (Estimated)
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.....2000....

- 19.Jan Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.  
NO PARASITES SEEN
- 28.Apr Clinical note recorded. (LMS)
- 2.May Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.  
NO PARASITES SEEN
- 3.Aug Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.  
NO PARASITES SEEN
- 24.Aug Clinical note recorded. (LAC)
- 26.Aug Clinical note recorded. (LAC)
- 5.Sep Clinical note recorded. (LAC)
- 6.Sep Clinical note recorded. (LAC)
- 7.Sep Clinical note recorded. (LMS)
- 8.Sep Clinical note recorded. (LMS)
- 10.Sep Clinical note recorded. (LMS)
- 11.Sep Clinical note recorded. (LAC)
- 2.Oct Clinical note recorded. (LAC)
- 3.Oct Clinical note recorded. (LAC)
- 4.Oct Clinical note recorded. (LAC)
- 30.Oct Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.  
NO PARASITES SEEN
- 6.Nov Clinical note recorded. (LAC)
- 7.Nov Clinical note recorded. (LAC)
- 8.Nov Clinical note recorded. (LAC)
- 5.Dec Clinical note recorded. (CSD)
- 6.Dec Clinical note recorded. (LAC)
- 27.Dec Clinical note recorded. (RAY)

.....2001....

- 2.Jan Clinical note recorded. (RAY)
- 3.Jan Clinical note recorded. (LAC)
- 7.Feb Clinical note recorded. (SC)
- 6.Mar Clinical note recorded. (CSD)
- 7.Mar Clinical note recorded. (CSD)
- 8.Mar Clinical note recorded. (CSD)

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Scientific Name: ELEPHAS MAXIMUS MAXIMUS                      Accession #: 101822
Common Name: SRI LANKAN ELEPHANT                               Female
Name: Shanthi                                                Birth: 15.Mar.1975 (Estimated)
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.....2001....

- 20.Mar Clinical note recorded. (RAY)
- 21.Mar Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.  
NO PARASITES SEEN
  
- 2.Apr Clinical note recorded. (RAY)
- 3.Apr Clinical note recorded. (RAY)
- 4.Apr Clinical note recorded. (RAY)
  
- 4.Jun Clinical note recorded. (CSD)
- 5.Jun Clinical note recorded. (CSD)
- 6.Jun Clinical note recorded. (CSD)
  
- 2.Jul Clinical note recorded. (LHS)
- 16.Jul Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.  
NO PARASITES SEEN
  
- 2.Aug Clinical note recorded. (SZM)
- 3.Aug Clinical note recorded. (LHS)
  
- 3.Oct Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.  
NO PARASITES SEEN
  
- 20.Nov Clinical note recorded. (CSD)
- 21.Nov Clinical note recorded. (CSD)
- 22.Nov Clinical note recorded. (CSD)
- 23.Nov Clinical note recorded. (CSD)
- 24.Nov Clinical note recorded. (CSD)
- 25.Nov Clinical note recorded. (CSD)
- Clinical note recorded. (LHS)
- 26.Nov Clinical note recorded. (CSD)
- 28.Nov Clinical note recorded. (CSD)
- Clinical note recorded. (SZM)
- 29.Nov Clinical note recorded. (CSD)
- 30.Nov Clinical note recorded. (CSD)
  
- 3.Dec Clinical note recorded. (SZM)
- 4.Dec Clinical note recorded. (CSD)
- 6.Dec Clinical note recorded. (SZM)
- 7.Dec Clinical note recorded. (SZM)
- 11.Dec Clinical note recorded. (CSD)
- Clinical note recorded. (SZM)
- 12.Dec Clinical note recorded. (CSD)
- 13.Dec Clinical note recorded. (CSD)
- 14.Dec Clinical note recorded. (CSD)

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Scientific Name: ELEPHAS MAXIMUS MAXIMUS Accession #: 101822
Common Name: SRI LANKAN ELEPHANT Female
Name: Shanthi Birth: 15.Mar.1975 (Estimated)
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.....2001....

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17.Dec Clinical note recorded. (CSD)
      Clinical note recorded. (SZM)
18.Dec Clinical note recorded. (CSD)
19.Dec Clinical note recorded. (CSD)
20.Dec Clinical note recorded. (CSD)
21.Dec Clinical note recorded. (CSD)
22.Dec Clinical note recorded. (CSD)
26.Dec Clinical note recorded. (SZM)
28.Dec Clinical note recorded. (CSD)
29.Dec Clinical note recorded. (CSD)
30.Dec Clinical note recorded. (CSD)
31.Dec Clinical note recorded. (CSD)

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.....2002....

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 3.Jan Clinical note recorded. (SZM)
 4.Jan Clinical note recorded. (SZM)
 6.Jan Clinical note recorded. (SZM)
11.Jan Clinical note recorded. (SZM)
16.Jan Clinical note recorded. (SZM)
19.Jan Clinical note recorded. (CSD)
25.Jan Clinical note recorded. (SZM)
28.Jan Clinical note recorded. (SZM)
31.Jan Clinical note recorded. (SZM)

 4.Feb Clinical note recorded. (KMS)
 5.Feb Clinical note recorded. (CSD)
 6.Feb Clinical note recorded. (CSD)
20.Feb Clinical note recorded. (CSD)
21.Feb Clinical note recorded. (CSD)
25.Feb Clinical note recorded. (CSD)

22.Mar Clinical note recorded. (CSD)

 4.Apr Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
      NO PARASITES SEEN

 1.May Clinical note recorded. (CSD)
 6.May Clinical note recorded. (CSD)

28.Jun Clinical note recorded. (LG)
      Clinical note recorded. (SZM)

22.Jul Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.

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Medical History Report - Summary for Individual Specimen  
NATIONAL ZOOLOGICAL PARK

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Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
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.....2002...

22.Jul NO PARASITES SEEN  
21.Aug Clinical note recorded. (CSD)

.....2003...

29.Jan Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.  
NO PARASITES SEEN  
4.Feb Clinical note recorded. (CSD)  
3.Apr Clinical note recorded. (CSD)  
7.Apr Clinical note recorded. (SZM)  
8.Apr Clinical note recorded. (SZM)  
10.Apr Clinical note recorded. (SZM)  
14.Apr Clinical note recorded. (SZM)  
16.Apr Rx: IBUPROFEN 2400mg PO SID for 5 days. (.561 mg/kg)  
Clinical note recorded. (SZM)  
19.Apr Clinical note recorded. (SLD)  
20.Apr Clinical note recorded. (CSD)  
21.Apr Rx: IBUPROFEN 4800mg PO SID for 8 days. (1.12 mg/kg)  
Clinical note recorded. (SZM)  
24.Apr Clinical note recorded. (CSD)  
28.Apr Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.  
NO PARASITES SEEN  
Clinical note recorded. (CSD)  
30.Apr Clinical note recorded. (SLD)  
8.May Clinical note recorded. (SLD)  
11.May Clinical note recorded. (CSD)  
22.May Clinical note recorded. (CSD)  
30.Jul Clinical note recorded. (CSD)  
31.Jul Clinical note recorded. (CSD)  
10.Sep Clinical note recorded. (CSD)  
14.Oct Clinical note recorded. (EB)  
15.Oct Clinical note recorded. (EB)  
16.Oct Clinical note recorded. (EB)  
23.Oct Clinical note recorded. (HSZ)  
31.Oct Clinical note recorded. (HSZ)  
28.Nov Clinical note recorded. (HSZ)

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Scientific Name: ELEPHAS MAXIMUS MAXIMUS                      Accession #: 101822
Common Name: SRI LANKAN ELEPHANT                               Female
Name: Shanthi                                                  Birth: 15.Mar.1975 (Estimated)
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.....2003...

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16.Dec Clinical note recorded. (EB)
18.Dec Clinical note recorded. (EB)
30.Dec Clinical note recorded. (EB)

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.....2004...

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2.Jan  PROBLEM: localized swelling - right rear limb (onset)
      Rx: IBUPROFEN mg PO SID for 3 days.
      Clinical note recorded. (EB)
3.Jan  PROBLEM: localized swelling - right rear limb (resolved)
      Clinical note recorded. (EB)
4.Jan  Clinical note recorded. (CSD)
13.Jan Clinical note recorded. (CSD)
20.Feb Clinical note recorded. (SZM)
24.Mar Clinical note recorded. (EB)
5.Apr  Clinical note recorded. (CSD)
6.Apr  Clinical note recorded. (EB)
7.Apr  Clinical note recorded. (EB)
15.Apr Clinical note recorded. (EB)
12.Jun Clinical note recorded. (CSD)
13.Jun  Rx: FLUNIXIN MEGLUMINE 4.5gm PO SID for 3 days.
      Clinical note recorded. (CS)
      Clinical note recorded. (CSD)
14.Jun Clinical note recorded. (SLD)
15.Jun Clinical note recorded. (CSD)
17.Jun Clinical note recorded. (CSD)
27.Aug Clinical note recorded. (SZM)
14.Sep                                     Weight: 4242 Kg ( 9349 Lb)
7.Oct  Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
      NO PARASITES SEEN
18.Oct                                     Weight: 4226 Kg ( 9314 Lb)
1.Nov                                       Weight: 4197 Kg ( 9250 Lb)
21.Nov                                       Weight: 4238 Kg ( 9341 Lb)
6.Dec  Clinical note recorded. (EB)
7.Dec  Clinical note recorded. (EB)

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Common Name: SRI LANKAN ELEPHANT  
Name: Shanthi

Accession #: 101822  
Female  
Birth: 15.Mar.1975 (Estimated)  
=====

.....2004....

8.Dec Clinical note recorded. (EB)  
15.Dec PROBLEM: routine examination  
Clinical note recorded. (EB)

Weight: 4183 Kg ( 9219 Lb)

17.Dec Clinical note recorded. (EB)

.....2005....

3.Jan  
4.Jan Clinical note recorded. (EB)

Weight: 4174 Kg ( 9199 Lb)

14.Feb Clinical note recorded. (EB)

7.Mar  
14.Mar

Weight: 4265 Kg ( 9400 Lb)  
Weight: 4260 Kg ( 9389 Lb)

7.Jun Clinical note recorded. (SZM)  
8.Jun Clinical note recorded. (SZM)  
13.Jun Clinical note recorded. (EB)  
14.Jun Clinical note recorded. (CSD)  
15.Jun Clinical note recorded. (EB)

5.Jul Clinical note recorded. (CSD)

29.Aug Clinical note recorded. (EB)

4.Oct Clinical note recorded. (CSD)  
14.Oct Clinical note recorded. (NCB)  
25.Oct Clinical note recorded. (109)

=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
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**Parasitology Examination:**

**Submission Data >>**

Type: Fecal sample  
Purpose: ROUTINE EXAMINATION

Sample id.: 2000-0213  
Date collected: 19.Jan.2000

**Collected from:**

From an individual specimen.

Enclosure: PB 7-8

**Examination Data >>**

Storage: room temperature  
Consistency: formed  
Gross appearance: Typical

Date examined: 19.Jan.2000

**Tests & Results >>**

FLOATATION - SUGAR

NO PARASITES SEEN

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**Clinical Note:**

28.Apr.200

Hx: radiographs to day to obtain normal baseline R and L front foot digits

Proc: 1. Radiographs: AP digits using 90/15, 0.9 sec, detail with standard film and 30"FFD: Slightly dark for P3 and distal P2. Consider repeat at 0.7 sec next time for smaller bones (LHS)

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**Submission Data >>**

Type: Fecal sample  
Purpose: ROUTINE EXAMINATION

Sample id.: 2000-1269  
Date collected: 2.May.2000

**Collected from:**

From an individual specimen.

Enclosure: PB 7-8

**Examination Data >>**

Storage: room temperature  
Consistency: formed  
Gross appearance: Typical

Date examined: 2.May.2000

**Tests & Results >>**

FLOATATION - SUGAR

NO PARASITES SEEN

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Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
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Parasitology Examination:

Submission Data >>

Type: Fecal sample  
Purpose: ROUTINE EXAMINATION

Sample id.: 2000-2347  
Date collected: 3.Aug.2000

Collected from:

From an individual specimen.

Enclosure: PB 7-8

Examination Data >>

Storage: room temperature  
Consistency: formed  
Gross appearance: Typical

Date examined: 3.Aug.2000

Tests & Results >>

FLOATATION - SUGAR

NO PARASITES SEEN

Clinical Note:

24.Aug.2000

Hx: Examined for oral lesions. There has been increased aggression between elephants secondary to death of matriarch Nancy 2 days ago. Keepers noted oral lesions today. Was hit in head by Toni elephant recently.

Proc: Visual exam

There are multiple areas of flat red marks along R inner lip (aprox 4 cm foward of commissure) and on R lateral aspect of tongue at same level. They vary in size from 3mm-1cm in diameter and vary in shape from round to elliptical. They are not raised and appear similar to bruises. There is also an area of redness aprox 2 cm in diamter on the hard palpate at the level of the 4th tooth back that is right against it, the gum itself looks fine. This is also not raised (or indented).

A: R/O oral trauma, infection (herpes lesions), other infection, coagulation problem.

P: Recheck tomorrow.

LAC for RAY (LAC)

=====  
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Common Name: SRI LANKAN ELEPHANT  
Name: Shanthi  
=====

Accession #: 101822  
Female  
Birth: 15.Mar.1975 (Estimated)  
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Clinical Note:

26.Aug.2000

Verbal update: spoke with Keeper Debbie, reports no progression of oral lesions, Shanthi is doing well, feel likely was secondary to trauma from Toni. LAC (LAC)

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Clinical Note:

5.Sep.2000

Hx: Trunk wash for TB testing, day 1 of 3.  
Nancy elephant was found to have pulmonary lesions, suspect for TB/TB complex. Testing remaining elephants.

Proc:

Trunk wash -- 50 ml of sterile 0.9% NaCl squirted into trunk, elephant held trunk up over head briefly and expelled fluid into a clean plastic bag. Fluid poured off into sterile 50 ml screw on top plastic container. Double bagged. Submitted to pathology for culture.

A: successful collection

P: Repeat 2 more times within one week. Also plan to collect blood for ELISA and other experimental testing and run skin bovine TB test after blood collection. (LAC)

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Clinical Note:

6.Sep.2000

Hx: Trunk wash for TB testing, day 2 of 3.

Proc:

Trunk wash -- 50 ml of sterile 0.9% NaCl squirted into trunk, elephant held trunk up over head briefly and expelled fluid into a clean plastic bag. Fluid poured off into sterile 50 ml screw on top plastic container. Double bagged. Submitted to pathology for culture.

A: successful collection

P: Repeat 1 more time within one week. Also plan to collect blood for ELISA and other experimental testing and run skin bovine TB test after blood collection. (LAC)

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=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*  
Common Name: SRI LANKAN ELEPHANT  
Name: Shanthi  
=====

Accession #: 101822  
Female  
Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note:

7.Sep.2000

Hx: Trunk wash for TB testing, day 3 of 3. Bovine TB test. Blood collection.

Proc:

1. Trunk wash: 50 ml of sterile 0.9% NaCl squirted into trunk, elephant held trunk up over head briefly and expelled fluid into a clean plastic bag. Fluid poured off into sterile 50 ml screw on top plastic container. Double bagged. Submitted to pathology for culture.
2. EDTA and clot tubes (5): Keepers collected blood for ELISA and other experimental tests
3. Bovine TB test: Test site was in thin skin immediately caudal to left ear (pinna pulled forward to expose "back" of ear - injected in area where pinna joins body mid-dorsal area). Premeasure skin: 6.0mm, 6.0mm, 6.2mm. Skin prep with nolvasan scrub and alcohol wipes. Tuberculin PPD Bovis 0.1 ml ID. Colorado Serum Comp, #10023B, exp e-17-02.

A: Successful trunk wash collection. Bovine TB test.

P: Read TB tests at 24, 48, 72 hours. (LHS)

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Clinical Note:

8.Sep.2000

Hx: 24 hour Bovine TB site reading.

Measures: 9.0mm, 9.5mm, 9.5mm. Average 9.3 mm.

Skin thickness palpably sl. increased. (LHS)

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Clinical Note:

10.Sep.2000

Hx: 72 hr Bovine TB site reading.

Measures: 6.0mm, 6.5mm, 6.5mm. Average: 6.3 mm.

Skin palpates normally.

Negative. (LHS)

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Clinical Note:

11.Sep.2000

Update: On 11/22/00 all 3 washes reported negative (LAC)

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=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*

Accession #: 101822

Common Name: SRI LANKAN ELEPHANT

Female

Name: Shanthi

Birth: 15.Mar.1975 (Estimated)  
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**Clinical Note:**

2.Oct.2000

Hx: Trunk wash for TB testing, day 1 of 3. 2nd month

Proc:

Trunk wash -- 50 ml of sterile 0.9% NaCl squirted into trunk, elephant held trunk up over head briefly and expelled fluid into a clean plastic bag. Fluid poured off into sterile 50 ml screw on plastic container. Double bagged. Submitted to pathology for culture.

A: successful collection

P: Repeat 2 more times within one week. (LAC)

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**Clinical Note:**

3.Oct.2000

Hx: Trunk wash for TB testing, day 2 of 3. 2nd month

Proc:

Trunk wash -- 50 ml of sterile 0.9% NaCl squirted into trunk, elephant held trunk up over head briefly and expelled fluid into a clean plastic bag. Fluid poured off into sterile 50 ml screw on plastic container. Double bagged. Submitted to pathology for culture.

A: successful collection

P: Repeat 2 more times within one week. (LAC)

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**Clinical Note:**

4.Oct.2000

Hx: Trunk wash for TB testing, day 3 of 3. 2nd month

Proc:

Trunk wash -- 50 ml of sterile 0.9% NaCl squirted into trunk, elephant held trunk up over head briefly and expelled fluid into a clean plastic bag. Fluid poured off into sterile 50 ml screw on plastic container. Double bagged. Submitted to pathology for culture.

A: successful collection

P: Repeat 2 more times within one week. (LAC)

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=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
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Parasitology Examination:

Submission Data >>  
Type: Fecal sample  
Purpose: ROUTINE EXAMINATION

Sample id.: 2000-3434  
Date collected: 30.Oct.2000

Collected from:  
From an individual specimen.

Enclosure: EH 11-13

Examination Data >>  
Storage: room temperature  
Consistency: Not specified  
Gross appearance: Typical

Date examined: 30.Oct.2000

Tests & Results >>

DIRECT MICROSCOPIC EXAMINATION NO PARASITES SEEN  
FLOATATION - SUGAR NO PARASITES SEEN

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Clinical Note:

6.Nov.2000

Hx: Trunk wash for TB testing, day 1 of 3. 3rd month

Proc:

Trunk wash -- 50 ml of sterile 0.9% NaCl squirted into trunk, elephant held trunk up over head briefly and expelled fluid into a clean plastic bag. Fluid poured off into sterile 50 ml screw on plastic container. Double bagged. Submitted to pathology for culture.

A: successful collection

P: Repeat 2 more times within one week. (LAC)

Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*

Accession #: 101822

Common Name: SRI LANKAN ELEPHANT

Female

Name: Shanthi

Birth: 15.Mar.1975 (Estimated)

**Clinical Note:**

7.Nov.2000

Hx: Trunk wash for TB testing, day 2 of 3. 3rd month

**Proc:**

Trunk wash -- 50 ml of sterile 0.9% NaCl squirted into trunk, elephant held trunk up over head briefly and expelled fluid into a clean plastic bag. Fluid poured off into sterile 50 ml screw on plastic container. Double bagged. Submitted to pathology for culture.

A: successful collection

P: Repeat total of 3 times within one week, plan for first mon-tues-wed of each month. (LAC)

**Clinical Note:**

8.Nov.2000

Hx: Trunk wash for TB testing, day 3 of 3. 3rd month

**Proc:**

Trunk wash -- 50 ml of sterile 0.9% NaCl squirted into trunk, elephant held trunk up over head briefly and expelled fluid into a clean plastic bag. Fluid poured off into sterile 50 ml screw on plastic container. Double bagged. Submitted to pathology for culture.

A: successful collection

P: Repeat total of 3 times within one week, plan for first mon-tues-wed of each month. (LAC)

**Clinical Note:**

5.Dec.2000

Hx: Trunk wash for TB testing, day 1 of 3. 4th month

**Proc:**

Trunk wash -- 50 ml of sterile 0.9% NaCl squirted into trunk, elephant held trunk up over head briefly and expelled fluid into a clean plastic bag. Fluid poured off into sterile 50 ml screw on plastic container. Double bagged. Submitted to pathology for culture.

A: trunk wash collected

P: Repeat total of 3 times within one week, plan for first mon-tues-wed of each month. (CSD)

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Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
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Clinical Note: 6.Dec.2000  
Hx: Trunk wash for TB testing, day 2 of 3. 4th month  
Proc:  
Trunk wash -- 60 ml of sterile 0.9% NaCl squirted into trunk, elephant held trunk up over head briefly and expelled fluid into a clean plastic bag. Fluid poured off into sterile 50 ml screw on plastic container. Double bagged. Submitted to pathology for culture.  
A: Trunk wash collected  
P: Repeat total of 3 times within one week, plan for first mon-tues-wed of each month, this month was tues-wed-thur. (LAC)

Clinical Note: 27.Dec.2000  
Obs: October trunk washes negative (RAY)

Clinical Note: 2.Jan.2001  
Hx: Routine monthly trunk wash.  
Proc  
1. Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.  
A: Routine 3 day trunk wash, day 1/3  
R/O tuberculosis  
P: Repeat monthly (RAY)

Clinical Note: 3.Jan.2001  
Hx: Routine monthly trunk wash.  
Proc  
1. Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.  
A: Routine 3 day trunk wash, day 2/3  
R/O tuberculosis  
P: Repeat monthly (LAC)

Clinical Note: 7.Feb.2001  
Hx: Routine monthly trunk wash - third day. (SC)

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Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*  
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Name: Shanthi

=====  
Accession #: 101822  
Female  
Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note:

6.Mar.2001

Hx: Routine monthly trunk wash.

Proc

1. Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, day 1/3

R/O tuberculosis

P: Repeat monthly (CSD)

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Clinical Note:

7.Mar.2001

Hx: Routine monthly trunk wash.

Proc

1. Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, day 2/3

R/O tuberculosis

P: Repeat monthly (CSD)

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Clinical Note:

8.Mar.2001

Hx: Routine monthly trunk wash.

Proc

1. Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, day 3/3

R/O tuberculosis

P: Repeat monthly (CSD)

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Clinical Note:

20.Mar.2001

Obs: January trunk washes NEGATIVE (RAY)

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Scientific Name; <i>ELEPHAS MAXIMUS MAXIMUS</i>	Accession #: 101822
Common Name; SRI LANKAN ELEPHANT	Female
Name: Shanthi	Birth: 15.Mar.1975 (Estimated)

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**Parasitology Examination:**

**Submission Data >>**

Type: Fecal sample  
Purpose: ROUTINE EXAMINATION

Sample id.: 2001-0944  
Date collected: 21.Mar.2001

**Collected from:**

From an individual specimen.

Enclosure: EH 11-13

**Examination Data >>**

Storage: room temperature  
Consistency: Not specified  
Gross appearance: Typical

Date examined: 21.Mar.2001

**Tests & Results >>**

DIRECT MICROSCOPIC EXAMINATION NO PARASITES SEEN  
FLOATATION - SUGAR NO PARASITES SEEN

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**Clinical Note:**

2.Apr.2001

Hx: Routine monthly trunk wash

**Proc**

1. Trunk wash: 60 ml warm saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk wash into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, Day 1/3

R/O mycobacteriosis

P: Repeat monthly through Aug 2001 (RAY)

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=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*  
Common Name: SRI LANKAN ELEPHANT  
Name: Shanthi

Accession #: 101822  
Female  
Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note:

3.Apr.2001

Hx: Routine monthly trunk wash  
Proc

1. Trunk wash: 60 ml warm saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk wash into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, Day 2/3  
R/O mycobacteriosis

P: Repeat monthly through Aug 2001 (RAY)

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Clinical Note:

4.Apr.2001

Hx: Routine monthly trunk wash  
Proc

1. Trunk wash: 60 ml warm saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk wash into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, Day 3/3  
R/O mycobacteriosis

P: Repeat monthly through Aug 2001 (RAY)

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Clinical Note:

4.Jun.2001

Hx: Routine monthly trunk wash  
Proc

1. Trunk wash: 60 ml warm saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk wash into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, Day 1/3  
R/O mycobacteriosis

P: Repeat monthly through Aug 2001 (CSD)

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=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*  
Common Name: SRI LANKAN ELEPHANT  
Name: Shanthi  
=====

Accession #: 101822  
Female  
Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note:

5.Jun.2001

Hx: Routine monthly trunk wash  
Proc

1. Trunk wash: 60 ml warm saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk wash into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, Day 2/3  
R/O mycobacteriosis

P: Repeat monthly through Aug 2001 (CSD)

---

Clinical Note:

6.Jun.2001

Hx: Routine monthly trunk wash  
Proc

1. Trunk wash: 60 ml warm saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk wash into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, Day 3/3  
R/O mycobacteriosis

P: Repeat monthly through Aug 2001 (CSD)

---

Clinical Note:

2.Jul.2001

Hx: Transabdominal US with Dr. Dennis Schmidt for monitoring pregnancy.

1. Transabdominal US.- Performed to monitor pregnancy. Uterine wall and placenta visualized on L side of body on the triangular "inguinal" space located between abdominal muscles and leg muscles. A "kick" from the baby was felt several times during ultrasound.

A: Pregnancy, advanced

P: Monitor with US once a week

Start collecting blood for serum banking once the transfusion bags arrive. (LHS)

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=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101022  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
=====

Parasitology Examination:

Submission Data >>  
Type: Fecal sample  
Purpose: ROUTINE EXAMINATION

Sample id.: 2001-2334  
Date collected: 16.Jul.2001

Collected from:  
From an individual specimen.

Enclosure: EH 11-13

Examination Data >>  
Storage: room temperature  
Consistency: formed  
Gross appearance: Typical

Date examined: 16.Jul.2001

Tests & Results >>  
FLOATATION - SUGAR

NO PARASITES SEEN

-----  
**Clinical Note:**

2.Aug.2001

Hx: Keepers had reported that Shanthi was eating a lot of dirt in the yard. Although she has done this from time to time, the fact that she was doing this during pregnancy raised some concerns about her serum iron levels. Shanthi's iron levels were checked as well as the TIBC and % saturation. All were WNL.  
Results - Serum iron = 79, TIBC = 210 ug/dl and % saturation is 38 %.  
(SZM)

-----  
**Clinical Note:**

3.Aug.2001

Hx: Blood taken for serum banking.  
Proc:  
1. Immobilization. Shanti was in L lateral recumbency close to the bars.  
2. Blood sample. A 500 IU transfusion bag was filled from ear vein uneventfully.  
A: Pregnant.  
P: Cont taking blood for serum banking once a week. (LHS)

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Scientific Name: <b>ELEPHAS MAXIMUS MAXIMUS</b>	Accession #: <b>101822</b>
Common Name: <b>SRI LANKAN ELEPHANT</b>	<b>Female</b>
Name: <b>Shanthi</b>	Birth: <b>15.Mar.1975 (Estimated)</b>

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**Parasitology Examination:**

**Submission Data >>**

Type: **Fecal sample**  
Purpose: **ROUTINE EXAMINATION**

Sample id.: **2001-3371**  
Date collected: **3.Oct.2001**

**Collected from:**

From an individual specimen.

Enclosure: **EH 11-13**

**Examination Data >>**

Storage: **room temperature**  
Consistency: **formed**  
Gross appearance: **Typical.**

Date examined: **3.Oct.2001**

**Tests & Results >>**

**FLOATATION - SUGAR**

**NO PARASITES SEEN**

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**Clinical Note:**

Update: **Blood progesterone concentration = 0.6 ng/ml (CSD)**

**20.Nov.200**

**Clinical Note:**

Update: **Blood progesterone concentration= 0.27 ng/ml (CSD)**

**21.Nov.200**

**Clinical Note:**

Update: **Blood progesterone concentration= 0.07 ng/ml. Note: Most of the calves are born within 2-5 days after progesterone drops to baseline levels (<0.1 ng/ml).**

**A: Dropping of progesterone levels, close to parturition.**

**F: Mobilize all the equipment from DAH to EH. (CSD)**

**22.Nov.200**

=====  
Scientific Name: **ELEPHAS MAXIMUS MAXIMUS**  
Common Name: **SRI LANKAN ELEPHANT**  
Name: **Shanthi**  
=====

Accession #: **101822**  
Female  
Birth: **15.Mar.1975 (Estimated)**  
=====

**Clinical Note:**

**23.Nov.2001**

Hx: Blood progesterone concentrations are undetectable. Ultrasound of mammary gland and abdomen.

**Proc:**

1. Transabdominal ultrasound (3.5 Mhz probe, Aloka US). Thick abdominal wall, large extension of anechoic areas suggestive of fetal membranes. A pulse (60/min) was detectable in several views within the anechoic areas (suggestive of fetal pulse).

2. Breast US (7.5 Mhz probe, Aloka US): Large anechoic longitudinal showing increase in size of milk canal. Cross section view show several "ducts" larger than in previous breast US. The main milk canal is 0.78 cm

3. Immobilization. Shanti was in L lateral recumbency close to the bars.

4. Blood sample. A 500 IU transfusion bag was filled from ear vein uneventfully.

A: Pregnancy, close to parturition

P: Schedule US/palpation with Dr Dennis Schmitt tomorrow.

Note: Keepers are already doing around the clock duties. (CSD)

**Clinical Note:**

**24.Nov.2001**

Hx: 8:00 am Transrectal US/palpation with Dr. Schmitt. Loss of mucous plug.

Today at around 9:00 pm EH reports loss of mucous plug. At pm she has been showing signs of discomfort; also opening mouth, laying down (both sides), restling trunk on bars and vocalizing.

**Proc:**

1. Transrectal US (3.5 Mhz, Aloka) reveals calf foot and fetal membranes intact.

2. Transrectal palpation (a.m). A hard structure palpated (almost all of arm inside rectum 60-70 cm), this is probably the structure seen on the US (Foot). The cervix is open.

3. Mammary gland US: The ducts are bigger and much more defined than yesterday. Clear definition of mammary gland tissue.

A: Pregnant

P: Wait, repeat US tomorrow early a.m (CSD)

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Accession #: 101822  
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Clinical Note:

25.Nov.200

Hx: No progress seen overnight. Transrectal US/palpation this morning (Dr Schmitt). Reported by keepers that overnight she vocalized, straining, lift tail several times but not rupture of fetal membranes reported.

Proc:

1. Transrectal US/palpation: Fetal membranes (anechoic area) surrounding the foot are present. Dorsal and lateral view of foot.
2. Transrectal palpation: Both feet are within arm distance on pelvic canal.
3. Mammary gland US: The canals are slightly bigger than yesterday but with similar configuration.

A: Pregnant

P: Re-check at 11:00 and 13:00 consider give Oxytocin at 13 hrs if contractions are not present. (CSD)

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=====  
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Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
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**Clinical Note:** 25.Nov.200

Baby was born today at 14:30 hrs. 40 IU of oxytocin injected 40 min before.

Proc: 11:00

1. Transrectal US shows baby's feet (prob posterior) on birth canal and fetal pulse (approx 60/min).

During examination a kick was felt by Dr Schmitt re-assuring calf is alive

Proc: 13:00

2. Blood sample collected - serum and heparin. For chemistry, specifically focused on Ca levels. Result: WNL (Ca=10.3).

3. Oxytocin injection. Was decided to inject oxytocin due to the fact that shanthi has several strong contractions 12 hours ago but not after this time. The strenght of contractions was declining and today at 11:00 the contractions were almost zero. Oxytocine 40 IU IV (Given by keepers). Half given via #21 butterfly and half via syringe (necessary to change ear vein due to diff access). After oxytocin stronger contractions noted at 10-15 min from oxytocin. Bulge was present below tail area. Baby delivered approx 40 min after oxytocin. Fetal membranes removed and baby placed to record weight (324 lbs). Baby is male and stands up easily after being dry out (20 min after birth). He is very active and want to move close to female. Blood sample from baby's ear attempted unsuccessfully.

A: Birth

P: Monitor for calostrum/milk intake

Note: First suckling reported at 2 hours and 10 min old.

At 9:00 the baby has suckled more than 25 times, keepers stop counting them.

CSD per SM (LHS)

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**Clinical Note:** 26.Nov.200

Hx: Placenta expulsed today at 3:30 a.m

Placenta put on a plastic bag and placed in the fridge for further pathologic examination and PCR herpesvirus tests. (CSD)

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**Clinical Note:** 28.Nov.200

Results: PCR for herpesvirus (placenta, blood umbilicus cord) Negative (Dr. Laura Ritchman). (CSD)

=====  
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Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note:

28.Nov.200

Hx: Baby born 3 days ago. This afternoon keepers noted a unilateral swelling on the left vulvar fold. Shanthi remains alert, but hasn't slept much since the baby was born.

Exam: The most distal aspect of the left vulvar fold is slightly swollen and edematous. The area is not warm and does not appear to be painful to Shanthi.

Assessment: Mild unilateral ventral vulvar swelling. This is most likely a dependent collection of fluid following trauma to the birth canal.

Plan: Keepers to monitor daily. This swelling is likely to increase slightly over the next few days and then gradually resorb. If at any point this is painful or irritating to Shanthi, hot packs or warm water washes can be instituted. No treatment at this time.

Shanthi is still passing a little blood from her vulva. (SZM)

Clinical Note:

29.Nov.200

Hx: Peri-vulvar swelling is more marked today. Local warm water washes this morning. She had a mucous discharge from her vulva a couple of times, one of it was a little bloody.

Proc:

1. The unilateral ventral vulval swelling has increased over the last 24 hours (as expected).

2 TPR. Temperature (fecal bolus) 97.9, Pulse: 60/min (slightly incr for shanthi).

3. Quick exam: Her oral mucosa looks a little pale.

A: Perivulvar swelling, ventral edema (organized) moderate  
r/o result of birth canal trauma, local trauma, metabolic disorder.

P: Cont with daily TPR and warm washes until swelling decreases.

Comment: CRC shows moderate anemia (PCV = 27.5, Hb = 10.1) considered WNL for post parturient cow. (CSD)

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=====

Clinical Note:

30.Nov.2001

Hx: Lab result show regenerative anemia.  
Hct is going down (from 39 before birth to 26 today) as expected. Rest  
of CBC is normal.  
A: Anemia  
r/o physiological (post-birth), erythrolysis  
P: Monitor Hct, Hgb (CSD)

Clinical Note:

3.Dec.2001

Hx: Vulvar swelling is the same as yest. Mild anemia still present.  
Negative for elephant herpesvirus (Richman).

Comment: Shanthi's HCT remains low = 24.0, but Hb is slightly higher =  
9.9. Keepers report Shanthi is bright and alert. Also, she is eating  
and acting normally.

Assessment: Post-natal vulvar swelling and ventral edema, likely  
secondary to cellular trauma in the birth canal. Tissue is not warm  
or painful. Anemia is still within the range of normal for post  
parturent elephant cows.

Plan: No treatment now, just daily observations by keepers. The  
vulvar swelling is expected to begin to resolve in the next few days.  
The anemia should begin to resolve soon. If not further diagnostics  
are warranted. (SZM)

Clinical Note:

4.Dec.2001

Result: Negative for elephant herpes virus by PCR (Richman). (CSD)

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Accession #: 101822  
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=====

Clinical Note:

6.Dec.2001

Hx: Shanthi has had 1 week of ventral and vulvar edema and mild anemia.

Obs: Shanthi's ventral edema is more pronounced today. Although it appears to span a shorter section of her abdomen, the extent that the edema protrudes ventrally appears increased. In contrast, the vulvar edema has greatly improved.

Proc: Blood/ EDTA - HCT = 26.0 with Hb = 9.2

Assessment: Slowly resolving ventral and vulvar edema. Slight improvement in anemia.

Plan: No treatment at this point, keepers and vets to monitor. (SZM)

Clinical Note:

7.Dec.2001

Hx: Ventral and vulvar edema.

Obs: Ventral edema appears more localized and perhaps slightly improved. Vulvar edema has definite improvement.

A: Resolving edema

P: No treatment at this time. Keepers to monitor - attitude and appetite remain normal. (SZM)

Clinical Note:

11.Dec.200

Hx: Routine monthly trunk wash, Day 1/3. Negative for eleph herpesvirus (Richman).

Proc

1. Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, day 1/3  
R/O tuberculosis

P: Repeat monthly (CSD)

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Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*  
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Clinical Note:

11.Dec.200

Hx: Shanthi's vulvar edema continues to slowly abate, however the ventral edema is more persistent. The edema is not any worse, but has moved to a more caudal location.

Bloodwork: CBC: Hct 29, T.S 8.7, Fibr 400.

Chem panel: wnl

P: Keepers are using hydrotherapy daily. This is not making the edema worse, and might even be helping it. (SZM)

Clinical Note:

12.Dec.200

Hx: Routine monthly trunk wash. Day 2/3. Ventral edema has not changed in the last days. Ventral edema is not getting worse but hasn't improved. The lack of normal exercise (she spends most of the time indoor) may be also contributory to the persistence of the edema.

1. Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, day 2/3

R/O tuberculosis

P: Repeat monthly (CSD)

Clinical Note:

13.Dec.200

Hx: Routine monthly trunk wash. Day 3/3

Proc

1. Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, day 3/3

R/O tuberculosis

P: Repeat monthly (CSD)

Clinical Note:

14.Dec.200

Result: Negative for mycobacterium isolation. (CSD)

=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
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Clinical Note: 17.Dec.200  
Hx: Vulvar edema has worsen. Start Ibuprofen and Amoxicillin today.

Proc:

Examn: Very significant vulvar edema. The size of the edema is like a large watermelon. Semi-firm and cold on palpation. It has several clusters of small vesicles (3-5 cm). The tissue close to the vulvar opening is pinker and some whitish creamy material is present. HR (42/min). Ventral edema is more localized on midline. Shanti is reported as eating normally and its feces look normal (amount and appearance).

Rx: Amoxicillin (15 mg/kg) = 55.5 gr PO BID x 5 D

Rx: Ibuprofen 5.4 (1.45 mg/kg) gr PO SID x 5 D

A: Vulvar edema, severe, non responsive to hydrotherapy  
Ventral edema, localized, responding to Tx

P: Cont with hydrotherapy and start today with amoxi and ibuprofen at the above dosages.

Evaluate everyday.

Note: Ibuprofen was used successfully on African Elephant Nancy (#26223) to successfully treat ventral edema (06/97). The dose used on her was 1.3 kg x 2 weeks with no side effects. (CSD)

Clinical Note: 17.Dec.200

Hx: Shanthi's ventral edema has continued to move caudally. Her vulva is now extremely swollen and the skin is beginning to crack and ooze. The skin is still cool to the touch, but is very moist.

Assessment: Worsening vulvar edema.

P: Initiate low dose ibuprofen 1.2 mg/kg = 5400 mg PO SID, and Amoxi at 11 mg/kg = 55,500 mg PO BID.

Comment: In addition, a vulvar-sling - in which the dependent area would be held closer to the body and hopefully reduce the edema - may be fashioned. Shops to work on this. Consult with Dr. Paul Anikis - he suggested an oral diuretic and steroid combination ("Naquasone" by Shering Plough) may be useful. He is not aware of any contraindications in nursing animals. Will research this later. (SZM)

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Clinical Note:

18.Dec.200

Hx: Shanthi is refusing her meds. Keepers able to get ibuprofen but not amoxi.  
A: Ventral edema  
P: Ibuprofen only for a couple of days then to try ABx when less suspicious. (CSD)

---

Clinical Note:

19.Dec.200

Hx: Keepers are soaking the inflamed vulvar area on saline solution or water with a tablespoon of salt. Also keepers are propping the vulvar area up with hay in order to make some pressure against the ventral body.  
Over the hay a tire and plastic tub with water is placed and the inflamed tissue soaked on it. Shanthi is being rewarded with treats and food for a 20 min.  
This procedure is being repeated 3 times a day.  
A: Vulvar edema, severe  
P: Cont with ibuprofen PO and the soaking/lifting procedure UFN.

Note: THIS afternoon the vulva looks slightly less inflamed. Ibuprofen and soaking may be working together. (CSD)

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Common Name: SRI LANKAN ELEPHANT

Name: Shanthi

Accession #: 101822

Female

Birth: 15.Mar.1975 (Estimated)

Clinical Note:

Hx: Vulvar edema slowly improving.

20.Dec.200

Proc:

1. Exam.

The size of the vulvar edema has decreased over the last 2 days. Although still large the tissue has "more wrinkles" and feels with less tension all of this indicative of reduction in inflammation. The tissue on vulvar area is covered with small to medium size (3-6 cm) blister that ooze white fluid. No signs of infection noted. A small circular excoriation (superficial) is present on anterior aspect of inflammation close to body. The ventral edema has also improved, an area of approx 25 cm (horizontal) is hanging on the ventral area of the body (close to umbilicus). Keepers have been repeating the "compression" procedure 3 times a day and they believe has helped. The theory behind the compression is that fluid from the vulvar edema might be absorbed by surrounding cells and moved to the ventral area. Ventral edema will be easier to treat. The problem with the vulvar edema so far is that it's like a balloon full of liquid and gravity is acting against Tx.

A: Vulvar/ventral edema, stable

P: Cont with compression procedure UFN and ibuprofen PO (CSD)

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Clinical Note:

21.Dec.200

Hx: Vulvar edema less inflamed but with some ulcerated areas.  
Shanthi's diet has been increased today (3 lbs of Lopro, herbivore pellet a day).

Proc:

1. Exam. The vulvar edema has slowly but continuously decreased on size since ibuprofen and "compression Tx" started. The vulvar tissue has several blister on its more distal area (ventral aspect) and pink tissue with whitish material is present on the caudal aspect of inflamed tissue. On palpation the tissue is cold and wet, the blisters ooze clear, viscous tissue. Sloughing of the skin is now more obvious, and some ulcers with subcutaneous tissue exposed are present. Shanthi has been eating normally and acting normally but keepers mention she seems to be hungry, and is eating dirt. Shanthi has been producing abnormal smell gas and feces since monday (r/o Abx effect on GIT vs lactation effect)

A: Vulvar edema, stable

P: Start spraying gentocin solution on affected area BID.

Cont with ibuprofen PO

Incr diet (3 lbs herb pellet more)

Note: The gentocin solution consist of a mix of injectable gentamicin (100 ml of 100 mg/ml) + dexametasone (250 ml of 4mg/ml) + buffer solution ( ). This spray will provide local protection on the exposed ulcers/blisters and additional antiinflammatory effect. (CSD)

Clinical Note:

22.Dec.2001

Hx: Vulvar edema continues to decrease in size. Still skin is sloughing. (CSD)

Clinical Note:

26.Dec.2001

Hx: Vulvar and ventral edema greatly reduced over the last few days. Elephant still receives ibuprofen orally and desitin topically. Although the vulva is still enlarged (approximately two times normal size) the swelling is greatly reduced and the skin is not as red (SZM)

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Accession #: 101822  
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Birth: 15.Mar.1975 (Estimated)

Clinical Note:

28.Dec.2001

Update: Shanthi's vulvar edema is much smaller, ventral edema (lateral) are little larger, these 2 lateral edema are connected to central abdominal edema. (CSD)

Clinical Note:

29.Dec.2001

Hx: Vulvar and central ventral edema reduced. Lateral ventral edema (R side) is slightly larger. Vulvar edema continues reducing on size over the past 3 days. The tissue is not red and only 1 round laceration (superficial) is noted on cranial aspect of edema. The lateral ventral edema is firm on palpation but is not hot.

A: Ventral and vulvar edema, resolving

P: Cont ibuprofen (5.4 g) PO and desitin (ointment) topically. (CSD)

Clinical Note:

30.Dec.2001

Update: Keepers report the vulvar edema has reduced to half the size it was yesterday. The ventral edema is still the same with R side being larger.

Note: Shanthi was reported as agitated yesterday but today her attitude is more normal.

A: Vulvar/ventral edema, resolving (CSD)

Clinical Note:

31.Dec.2001

Update: Vulvar swelling has steadily getting smaller over the past days. Keepers reported that mucosa on vulvar area (close to opening) was irritated.

Proc:

1. Visual exam: The mucosa of vulva (close to vulvar opening) is pink with no signs of irritation. In general the vulvar edema has improved considerably. The ventral medial edema is about the same size than befoer, on palpation is full of liquid. Lateral ventral edema are firmer and close to body wall.

A: Vulvar edema: resolving

Ventral edema: Stable

P: Monitor every day, cont with topical ointment treatment and ibup PO.

No propping up therapy by now. (CSD)

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Clinical Note:

3.Jan.2002

Hx: Keepers report Shanthi appears uncomfortable and has been doing a lot of swaying and swatting at her vulva with her tail.

Obs: The size of the vulva is much smaller than on previous days, but the exterior vulvar tissue is thickened, hard, and odorous.

Assessment: Although the vulvar edema has largely resolved, the skin is thick and oozing. In addition, there is plant material and dirt clumps adhered. R/O localized dermatitis secondary to trauma (being stretched and then deflating)

Plan: Clean with dilute nolvasan solution. Take sample for culture and cytology. Keepers to clean daily with dilute nolvasan and then apply gentocin/dexamethasone spray.

Note: The culture grew too many organisms.

Cytology: r/o gram (-) overgrowth (SZM)

Clinical Note:

4.Jan.2002

Hx: The cytology and culture from yesterday were contaminated with dirt and plant debris. Plan to clean again, pat dry and repeat samples.

Obs: The vulvar tissue is slightly improved from yesterday. Although the skin is still thickened and irritated, the area is not as malodorous.

Proc: Clean with dilute nolvasan.

Proc: Culture and cytology of exterior vulva. Results = predominantly gram negative organisms.

Assessment: Slightly improved perivulvar dermatitis.

Plan: Continue with nolvasan baths and gentocin/dexamethasone spray. (SZM)

Clinical Note:

6.Jan.2002

Hx: Keepers report that Shanthi still appears irritated by the perivulvar dermatitis.

Obs: Although the swelling continues to go down, some of the tissue is still red, raw and cracked - most likely from the great expansion and then subsequent deflation.

A: Healing perivulvar dermatitis.

P: continue with nolvasan washes and gentocin spray. Follow up with A and D ointment afterwards. Recheck tomorrow. (SZM)

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Clinical Note:

11.Jan.200

Hx: The vulva is back to normal size, but the external, dead skin is cracking and starting to fall off. Underneath there is a healthy layer of pink tissue.

A: Healing tissue

P: Discontinue A and D ointment. Continue cleansing and rinsing with dilute nolvasan. (SZM)

Clinical Note:

15.Jan.200

Obs: Shanthi's peri-vulvar tissue is much improved. The size of the tissue has returned to normal and the dead skin continues to slough. The odor is not nearly as bad as it was last week.

A: healing tissue

P: no change in treatment plan. (SZM)

Clinical Note:

19.Jan.200

Hx: Peri-vulvar tissue is almost normal size but skin is over-dry. Triple ABx topical.

A: Healing tissue

P: Start topical triple antibiotic UFN. (CSD)

Clinical Note:

25.Jan.200

Hx: Keepers report Shanthi is reluctant to lay down, lower her head or salute. She had a history of being stiff and reluctant to lower her head years ago and this appears somewhat similar to that. Her attitude and appetite are normal, and her fecal boluses remain normal and plentiful.

Assessment: r/O possible arthritic pain vs possible abdominal pain

Plan: Continue on ibuprofen, submit urine sample, continue topical meds for vulvar area. (SZM)

Clinical Note:

28.Jan.2002

Hx: urine sample submitted. (SZM)

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=====

**Clinical Note:**

Comment: Urine sample submitted 1/28 is WNL. No evidence of rbc's or  
wbc - renal problem unlikely. Also, keepers report today that Shanthi  
is almost back to normal. She lies down on both sides, but is still  
somewhat stiff on her right front leg. (SZM) 31.Jan.200

**Clinical Note:**

Hx: Routine monthly trunk wash. Day 1/3

4.Feb.2002

**Proc**

1. Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk  
raised then lowered as animal blows contents of trunk into plastic  
bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, day 1/3

R/O tuberculosis

P: Repeat monthly

Results: No Mycobacterium isolated 4/23/02 (KMS)

**Clinical Note:**

Hx: Routine monthly trunk wash. Day 2/3

5.Feb.2002

**Proc**

1. Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk  
raised then lowered as animal blows contents of trunk into plastic  
bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, day 2/3

R/O tuberculosis

P: Repeat monthly

Results: No Mycobacterium isolated 4/23/02 (CSD)

=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note:

6.Feb.2002

Hx: Routine monthly trunk wash. Day 3/3

Proc

1. Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.

A: Routine 3 day trunk wash, day 3/3  
R/O tuberculosis

P: Repeat monthly

Results: No Mycobacterium isolated 4/23/02 (CSD)

Clinical Note:

20.Feb.2002

Hx: Perivulvar inflammation is almost resolved. Stop local meds today.

Proc:

1. Visual exam: Only moderate amount of pinker tissue is present around the vulva with minor presence of whitish material. No ventral edema is present at this time. Her attitude and appetite are regarded as excellent.

A: Perivulvar edema, chronic, resolving

P: Stop topical medication, cont only hosing with water the affected area to clean debris. (CSD)

Clinical Note:

21.Feb.2002

Result: Negative for mycobacterium isolation (NVSL). (CSD)

Clinical Note:

25.Feb.2002

Hx: Blood sample collected for research study (Dr. Richman, Dr Montali)

Proc:

1. Blood sample collected - 100 ml of blood were placed on a transfusion bag (49 ml of citrate removed before collection). Animal on lateral recumbency and L ear vein used to collect blood. (CSD)

Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*  
Common Name: SRI LANKAN ELEPHANT  
Name: Shanthi

Accession #: 101822  
Female  
Birth: 15.Mar.1975 (Estimated)

Clinical Note:

Hx; Her baby (Kandula #113711) was seen straining yest. She is eating sand in outside exhibit. 22.Mar.2002  
She has been routinely eating sand whe outside. Baby was seen following her in this behaviour. She is not eating more sand than normal but the fact that bay is doing it and he got partially constipated is worrysome.  
A: Eating sand  
r/o mineral deficiency, stereotypical behaviour.  
P: Consider increasing her supplement (consult with nutritionist) (CSD)

Submission Data >>  
Type: Fecal sample  
Purpose: ROUTINE EXAMINATION

Sample id.: 2002-0976  
Date collected: 4.Apr.2002

Collected from:  
From an individual specimen.

Enclosure: EH 11-13

Examination Data >>  
Storage: room temperature  
Consistency: Not specified  
Gross appearance: Not specified

Date examined: 4.Apr.2002

Tests & Results >>  
FLOATATION - SUGAR

NO PARASITES SEEN

Clinical Note:  
Trunk wash result from april: Negative (CSD)

1.May.2002

Clinical Note:  
Results; CBC and CP are WNL. (CSD)

6.May.2002

Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*

Accession #: 101822

Common Name: SRI LANKAN ELEPHANT

Female

Name: Shanthi

Birth: 15.Mar.1975 (Estimated)

Clinical Note:

28.Jun.2001

Hx: keepers reports swelling in perianal region on the right side, however not observed today. She is swatting her tail at her abdomen while urinating. They have noticed a foul odor from her vaginal area, although not a consistent observation. They report she will not lie on her left side and that she rocks like she is struggling to get up. They think she has had some behavioral issues but are not sure why or if related.

PE/Obs: no swelling observed or palpated in perianal region. She was BAR and was eating well. No odors detected today either.

P: monitor for any changes. Get blood sample for CBC and urine for a UA. (LG)

Clinical Note:

28.Jun.2000

Comment: UA is WNL. No wbc or rbc noted.

On CBC the PCV is slightly low (29) but this value has been known to fluctuate throughout the day.

P: Recheck tomorrow (SZM)

Submission Data >>

Type: Fecal sample  
Purpose: ROUTINE EXAMINATION

Sample id.: 2002-2301  
Date collected: 22.Jul.2002

Collected from:

From an individual specimen.

Enclosure: EH 11-13

Examination Data >>

Storage: room temperature  
Consistency: formed  
Gross appearance: Typical

Date examined: 22.Jul.2002

Tests & Results >>

FLOATATION - SUGAR

NO PARASITES SEEN

=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note: 21.Aug.2003  
Result: Trunk wash from June: Negative for Mycobacterium (CSD)

Submission Data >>  
Type: Fecal sample  
Purpose: ROUTINE EXAMINATION

Sample id.: 2003-0339  
Date collected: 29.Jan.2003

Collected from:  
From an individual specimen.

Enclosure: EH 11-13

Examination Data >>  
Storage: room temperature  
Consistency: formed  
Gross appearance: Typical

Date examined: 29.Jan.2003

Tests & Results >>  
FLOATATION - SUGAR

NO PARASITES SEEN

-----  
Clinical Note:  
Proc: Routine montly bleeding today. (CSD)

4.Feb.2003

Clinical Note:  
Daily report from today (faxed on 04/07) mention this elephant has ventral edema that appears to be centralizing. (CSD)

3.Apr.2003

Clinical Note:  
Comt: Daily report says that Shanthi has ventral edema today? Will check tomorrow. (SZM)

7.Apr.2003

=====  
 Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
 Common Name: SRI LANKAN ELEPHANT Female  
 Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
 =====

Clinical Note: 8.Apr.2003  
 Obs: Mild bilateral ventral edema noted. Otherwise shanthi is bright  
 and alert. Kandula is also doing well. Keepers and curator are not  
 concerned at this point.  
 P: monitor for now. (SZM)

Clinical Note: 10.Apr.2003  
 Comt: Keepers report that edema is beginning to resolve.  
 P: No treatment now, monitor for resolution. (SZM)

Clinical Note: 14.Apr.2003  
 Hx: Although edema had started to resolve, it now appears static.  
 A: Ventral edema - no obvious stressors identified.  
 P: Discussed with curator and keepers - elected to start trial regime  
 of ibuprofen. Consider lower dose of ibuprofen 2400 mg PO SID x 7  
 days? Need to decide to what extent this will be passed in the milk  
 and have adverse effects on Kandula. (SZM)

Clinical Note: 16.Apr.2003  
 Rx: IBUPROFEN 2400 mg PO SID for 5 days. (SZM)

Prescription Data >> Starting date: 16.Apr.2003  
 Drug: IBUPROFEN 2400 mg PO SID for 5 days  
 Formulation: 600.00 mg tablet  
 Prescribed by: SZM (16.Apr.2003) Filled by: TEZ (16.Apr.2003)  
 Drug dosage: .561 mg/kg Treatment weight: 4277 kg

Comments >>

-----  
 Dispensing Note: Dispense 5 doses. Each dose: 4 tablets. Total to  
 dispense: 20 tablets. Use 600.00 mg tablets.

=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note: 19.Apr.200  
S/O: Ventral edema still significant. Left >> right. BAR and eating  
and defecating/urinating well. Per keepers right side has decreased  
but left side has not changed.  
A/P: CWPT but consider increasing ibuprofen to double the dose. (SLD)

---

Clinical Note: 20.Apr.200  
Visual exam: Shanti's edema hasn't changed on low dose of ibuprofen.  
The ventral edema although not severe is still pronounced in L side of  
abdomen.  
A/P: Consider increase of ibuprofen to full dose (4.8 g SID) (CSD)

---

Clinical Note: 21.Apr.200  
Cont: No change in ventral edema. Keepers request increasing to full  
dose 4800 mg PO SID. Discussed with Curator Barthel and will increase  
to 4800 mg po SID x 8 days  
Rx: IBUPROFEN 4800 mg PO SID for 8 days. (SZM)

---

Prescription Data >> Starting date: 21.Apr.2003  
Drug: IBUPROFEN 4800 mg PO SID for 8 days  
Formulation: 600.00 mg tablet  
Prescribed by: SZM (21.Apr.2003) Filled by: TEZ (21.Apr.2003)  
Drug dosage: 1.12 mg/kg Treatment weight: 4277 kg

Comments >>

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Dispensing Note: Dispense 8 doses. Each dose: 8 tablets. Total to  
dispense: 64 tablets. Use 600.00 mg tablets.

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=====
Scientific Name: ELEPHAS MAXIMUS MAXIMUS
Common Name: SRI LANKAN ELEPHANT
Name: Shanthi
Accession #: 101822
Female
Birth: 15.Mar.1975 (Estimated)
=====

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**Clinical Note:** 24.Apr.2003  
Proc: Final day (3/3) of trunk washes. Her baby was reported off today.  
Edema is slightly better but hasn't resolved in new (high) dose of ibuprofen.  
Proc  
1. Trunk wash; 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.  
2. Blood sample collected - EDTA and serum. For CP and herpesvirus PCR (L. Ritchman).  
CP is WNL.  
A: Routine 3 day trunk wash, day 3/3  
R/O tuberculosis  
Ventral edema, stable  
P: Repeat trunk wash in 6 months (Oct/03)  
Cont with ibup 4.8 g PO SID  
Note: Kandula was reported off today around 12:00 pm. Due to high concern of herpesvirus all elephants (incl baby) were bleed. (CSD)

---

**Clinical Note:** 28.Apr.2003  
O/S: Edema is less noticeable today. Still warm on touch but less "defined" than previously.  
A?P: Cont with "high" dose of ibuprofen. (CSD)

---

**Submission Data >>**  
Type: Fecal sample  
Purpose: ROUTINE EXAMINATION

Sample id.: 2003-1446  
Date collected: 28.Apr.2003

**Collected from:**  
From an individual specimen.

Enclosure: EH 11-13

**Examination Data >>**  
Storage: room temperature  
Consistency: formed  
Gross appearance: Typical

Date examined: 28.Apr.2003

**Tests & Results >>**  
FLOATATION - SUGAR

NO PARASITES SEEN

=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*  
Common Name: SRI LANKAN ELEPHANT  
Name: Shanthi  
=====

Accession #: 101822  
Female  
Birth: 15.Mar.1975 (Estimated)  
=====

**Clinical Note:**

30.Apr.2003

Comment: EH keepers had D/Ced ibuprofen on 4/28.  
S/O: Site may be slightly edematous with left > right. Not warm to touch (Shanthi had just been bathed).  
A/P: Keepers to continue with NO meds at this time and give us an update if concern of recurrence. One final vet check in a week if no recurrence. (SLD)

**Clinical Note:**

8.May.2003

Comment: Shanthi has been off ibuprofen since 4/28. No significant change in ventral edema with left side more pronounced than right side. (SLD)

**Clinical Note:**

11.May.2003

O/S: Ventral edema is resolved today.  
This elephant is reported as eating/acting and defecating normally. Interactions with Kandula are also rated as normal.  
Proc:  
1. Visual: The ventral edema on this individual is almost resolved as only a small "pocket" is present. Keepers agree that edema is resolved.  
A/P: Ventral edema resolved. (CSD)

**Clinical Note:**

22.May.2003

Note: Around 12:00 EH staff noted that the sand in the elephant yard appeared to have something leeching out of it, which has an iridescence like oil. CURator (TB) made clear that there was no reason for there to be oil or hydraulic fluid out in the yards. If its unknown in this elephant or other elephant consumed this but all elephants eat some sand regularly.  
Dr Montali will be checking the yard tomorrow in a.m with EH staff. (CSD)

=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note: 30.Jul.2001  
Proc: Oral administration of enro and blood sample for pharmacokinetic study. Blood sample submitted for CBC and CP.  
Comment: Today 2.5mg/kg enrofloxacin will be administered to each elephant as part of CSD's pharmacokinetic project.  
Proc: BW- 4,386 kg  
Proc: Enro total dose (2.5mg/kg) 10,965 mg = 161 tablets (68 mg coated [purple] tablets)  
Proc: Blood sample taken at following times:  
Initially a "Zero sample": For baseline, CBC/CP collected.  
Sample for CBC placed in EDTA tube and red-top (clot) tube for CP.  
Enro given orally right after 1st sample (Enro taken in elephant gruel uneventfully). Pills buried in balls of gruel and given individually by keepers.  
Samples after enro at: 30 min, 45 min, 1 hour, 1.5 hour, 2 hours, 2.5, 3, 4, 8, 12, 24 and 36 hours.  
Proc: Blood samples taken by keeper and CSD with vacutainer and 20" needle from diferent ear veins.  
Each sample consisted of 2.5 ml of blood.  
Note: Initially a 20" catheter was placed in R ear vein. Secured with glue but elephant pulled right away and decided to do individual sticks.  
All samples were placed in a glass 2.5ml green (heparin) top tube. Centrifuged withing 20 min at 10,000 RPM and the plasma separated in cryo tubes properly ID.  
Samples were frozen until samples at CEC (Fla) are collected. (CSD)

---

Clinical Note: 31.Jul.2001  
Results: CBC and CP from 07/31/03: WNL. (CSD)

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Clinical Note: 10.Sep.2001  
Proc: Blood sample for control plasma for enrofloxacin study.  
Blood sample drawn to have plamsa to calibrate test for the enrofloxacine pharmacokinetic study done in conjunction with NCSU/UF.  
Sample taken with 21" butterfly w/vacutainer. (CSD)

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=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note: 14.Oct.200

Proc: trunk wash for mycobacterium testing. Day 1/3.  
S/O: Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.  
A/P: Routine 3 day trunk wash, day 1/3  
R/O tuberculosis  
Results: negative for mycobacterium (EB)

---

Clinical Note: 15.Oct.200

Proc: trunk wash for mycobacterium testing. Day 2/3.  
S/O: Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube.  
A/P: Routine 3-day trunk wash, day 2/3  
R/O tuberculosis  
Results: (EB)

---

Clinical Note: 16.Oct.200

Proc: trunk wash for mycobacterium testing. Day 3/3.  
S/O: Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile 50 ml centrifuge tube. Blood also collected for mycobacterium serology study and opportunistic CBC/Chem. CBC/CP WNL.  
A/P: Routine 3 day trunk wash, day 3/3  
R/O tuberculosis  
Results: no mycobacterium isolated (EB)

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=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note: 23.Oct.200

Proc: Evaluate bumps on back

S/O: Several bumps or epidermal/dermal masses located multifocally on dorsum. Keeper (Marie) able to express purulent-type material from several of them yesterday and today. Elephant 109171 has skin lesions along dorsum, as well, which started out as bumps, but are now depressions.

A: Rule out pustules, papules, infection, inflammation, trauma, allergy, growths (i.e. papilloma vs. neoplasia.)

P: Scrub back with lanolin-based shampoo, "Biogroom," normally used for bathing. Bathe SID for 3 days followed with dilute Nolvasan spray on affected areas. Recheck after 3 days of treatment. Perform cytology and culture if new pustules develop. (HSZ)

Clinical Note: 31.Oct.200

Cytology results of pustule (hair follicle) on back - Low cellularity. Moderate numbers of keratinocytes, few PMN's, moderate numbers of RBC's and debris.

Dx: Rule out mild acute inflammation.

Culture results - mixed non-hemolytic Staph, normal skin flora

Plan: Continue with daily scrubbing of back with shampoo, followed by spraying with diluted nolvasan. Antibiotic therapy not indicated at this time. (HSZ)

Clinical Note: 28.Nov.200

Verbal check with keeper (Marie): No change in bumps on skin on back - some bumps still present, but not very pronounced. No new lesions or pustules detected by keepers. Keepers to notify vets if condition recurs. (HSZ)

Clinical Note: 16.Dec.200

Addendum: TB trunk wash results from 4/22-24/03 negative. (EB)

=====  
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Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note: 18.Dec.200

Proc: veral recheck with keepers re: dorsal lesions  
S/O: keeper (marie) report that bumps on dorsal midline barely visible, have not changed dramatically and have had no discharge. Keepers are not treating at this time.  
A/P: resolved. Keepers will let us know if it becomes a problem. (EB)

Clinical Note: 30.Dec.200

Proc: annual exam and tetanus vaccination  
S/O: animal is BAR, eating well, no abnormalities reported.

1. PE:

EENT: Eyes clear, WNL. Good view of entire mouth, MM pink, no ulcerations or other abnormalities. Teeth WNL.  
Skin: 3cm, supf. swelling on right lateral face with central opening. Small amount of white thick fluid can be expressed with pressure. No tract seen or felt (keeper Sean palpated cheek from inside mouth) in oral cavity.  
Cytology: debris with rare macrophages and degenerate neutrophils. Scattered gram pos. cocci. Dx: subacute inflammation  
Cx: (added 01/05/04 CSD): B-hemolytic Strep. Susc to ceftiofur, cephalotin and amox/clav only.  
CV: heart could not be auscultated  
GI/UG: no abn. Urine collected free-catch  
UA: WNL (SG 1.007, amorphous crystals)  
MS/NS: feet WNL.

2. Blood: animal was in lat. recumbancy. Blood collected from left ear vein with butterfly 23 ga and vacutainer into 2 EDTA, 1 citrate, and several clot tubes.  
CBC: WNL. Chem: WNL

3. vaccination: 1ml tetanus given im deep in right caudal thigh muscle with 18 ga 2 " needle. Lot # 277329A, Exp. Dec 3, 2004.

A/P: healthy animal (EB)

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Scientific Name: ELEPHAS MAXIMUS MAXIMUS           Accession #: 101822
Common Name: SRI LANKAN ELEPHANT                 Female
Name: Shanthi                                   Birth: 15.Mar.1975 (Estimated)
=====

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Clinical Note: 2.Jan.2004

Problem: localized swelling - right rear limb (Confirmed)  
Proc: exam for swelling on right rear leg  
Hx: tetanus injection given im on right lat. thigh 12/30. Today sensitive on leg, unwilling to lay down.  
S/O: 3cm central area of swelling on lat right lower thigh were tetanus injection given. 20cm radial area of warmth surrounding this smaller central area. No discharge or reaction when palpated.  
A: muscle tenderness due to vaccination vs. developing sterile abscess  
P: monitor and give Ibuprofen as needed  
Rx: IBUPROFEN 4800 mg PO SID for 3 days. (EB)

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Prescription Data >>                               Starting date: 2.Jan.2004
Drug: IBUPROFEN mg PO SID for 3 days
Formulation: 600.00 mg tablet
Prescribed by: EB (2.Jan.2004)                     Filled by: LE (2.Jan.2004)
                                                    Treatment weight: 4332 kg

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Comments >>

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Dispensing Note: Dispense 3 doses. Use 600.00 mg tablets.

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Clinical Note: 3.Jan.2004

Problem: localized swelling - right rear limb (Confirmed)  
Proc: recheck visual exam of right rear soreness  
S/O: animal in right lat. recumbancy taking bath when visited. Keeper (Debi) reported no problems going down on either side today. She felt area while vet visiting and reported barely warm, much less than yesterday, and central area hardly evident. Elephant does not seem tender on leg anymore and is moving well.  
A/P: do not continue to give Ibuprofen unless she again becomes sore. d/c present rx. (EB)

Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*  
Common Name: SRI LANKAN ELEPHANT  
Name: Shanthi

Accession #: 101822  
Female  
Birth: 15.Mar.1975 (Estimated)

Clinical Note:

4.Jan.2004

Obs: Right rear soreness resolved.  
This elephant is back to normal. No problem going down on either side.  
Appetite, fecal output rated as normal. (CSD)

Clinical Note:

13.Jan.200

Proc: Radiograph of L foot (digits) as part of annual exam/routine foot Xrays.

Hx: No health concerns at this time.

Proc:

1. Radiographs: Portable machine. Tried with Xray plate on inclined position using the "positioner" but elephant was reluctant to keep foot in position. Keeper (MM) mentioned elephants are not trained for this position. Asked elephant to place L foot on top of plate, while the plate was put on top of paper box. Worked fine.

The following techniques and results were obtained today (all views were AP and 2 Xrays were taken of each technique. 1st included DI and DII and 2nd DII and DIII).

1) 90 kvp, 25 MAS, 0.75 sec: Fair>good technique, decrease MAS, increase slightly Kvp. Digits visualized: NSF.

2) 90 Kvp, 18 MAS, 0.9 sec: Overexposed

3)90 Kvp, 13 MAS, 0.65 ec with extremity cassette (fine detail). Good technique. Digits observed: NSF.

Note: Decrease exposure all at 30" FFD.

A: Good initial attempt of Xrays. In general technique needs to be decreased. Some movement is aparent on films (R/O elephant vs person holding machine).

P: Repeat Xrays on this individual (the best trained) with decreased technique and use crane stand. (CSD)

Clinical Note:

20.Feb.200

Comt: Keepers and curator report chronic draining wound right cheek. Keepers report it has been draining on and off for over 1 year and that during the last few days they have expressed pus. There is a relatively small (2.5 cm in diameter) warm round raised area on her right cheek. No drainage observed.

A: R/O chronic abscess, draining tract

P: hot pack 5 min BID x 7 days and recheck in 7 days. (SZM)

=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note: 24.Mar.2004

Proc: Radiograph of all four feet.

\*\*Medarks crash 3/23-25; all records lost; this record reconstructed to best of knowledge\*\*

Hx: Performed as recommended by AZA to have baseline radiographs.

Hx: No health concerns at this time. Shanthi was very cooperative and procedure went smoothly.

Proc:

1. Radiographs: Portable machine used. Asked elephant to place each foot on top of plate while the plate was put on top of training device (small metal stool). Worked fine.

The following technique and results were obtained today (all views were AP. FFD 26 inches for all films today).

1) 82 kvp, 6.0 mAs, 0.3 sec for front feet, Rear feet 82 KVP, 6.8 mAs, 0.34 sec Excellent results. Extremity cassette: Excellent with mild movement on 3 of 4. Digits observed: NSF.

A: Toe radiographs, NSF (EB)

Clinical Note: 5.Apr.2004

Hx: Routine trunk wash. Day 1/3.

Note: Last TW was done 6 months ago. Frequency of routine TW will be discussed during next Vet meeting. USDA recommends once a year and for the past 3 years all the elephants have been negative on all trunk washes.

Proc

1. Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blows contents of trunk into plastic bag. Wash fluid transferred to sterile centrifuge tube.

A: Routine 3 day trunk wash, day 1/3  
R/O tuberculosis

P: Next trunk wash 4/6/04

Repeat annual? Bi-annual? (CSD)

=====

Scientific Name: <i>ELEPHAS MAXIMUS MAXIMUS</i>	Accession #: 101822
Common Name: SRI LANKAN ELEPHANT	Female
Name: Shanthy	Birth: 15.Mar.1975 (Estimated)

=====

Clinical Note: 6.Apr.2004

Hx: Routine trunk wash. Day 2/3.  
S/O: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blew contents of trunk into plastic bag. Wash fluid transferred to sterile centrifuge tube.  
A: Routine 3 day trunk wash, day 2/3  
R/O tuberculosis  
P: Next trunk wash 4/7/04 (EB)

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Clinical Note: 7.Apr.2004

Hx: Routine trunk wash. Day 3/3.  
S/O: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blew contents of trunk into plastic bag. Wash fluid transferred to sterile centrifuge tube.  
A: Routine 3 day trunk wash, completed  
R/O tuberculosis  
P: await results (EB)

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Clinical Note: 15.Apr.2004

Results: trunk wash for TB testing negative from 10/14-16/03 (EB)

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Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*

Accession #: 101822

Common Name: SRI LANKAN ELEPHANT

Female

Name: Shanthi

Birth: 15.Mar.1975 (Estimated)

Clinical Note:

12.Jun.200

Prob: Stiffnes on L leg reported today. Proc; Visual today  
Hx: This morning this elephant was markedly stiff on L limb, curator and DAH reported. Long history of lameness and stiffness of both front limbs ocassionally resolving with NSAid (incl ibup and banamine).

Proc:

Visual:

S/O: Elephant is BAR, good appetite reported (ate hay during visual), normal feces found this morning. Elephant is walking bearing weight equally on both front limbs. On motion the elephant is very stiff on the whole L limb. It doesn't seem particularly bothered by leg as it continues moving around indoor stall.

Palpation: Both forelegs were "palpated" The following articulations were "palpated" pushing with both hands on the the joints and monitoring for any sign of discomfort. Scapulohumeral joint, humero-radial joint and radio-carpal joint. The elephant only reacted when the L carpal regions was pushed or palpated. Same type of pressure placed on opposite side w/o same reaction. None of the articulations or areas palpated were warm to the touch.

Asked keeper to order the elphant to lift and bend backward each front leg at the time.

Elephant lifted and flexed the R limb w/o any abnormality noticed. Elephant lifted but didn't flex the carpal radial-carpal joint. On 2nd time the elephant bent RC joint but not more than 20degrees.

A: Stiffness LF leg, acute

R/O Osteoarthritis, rheumatoid arthritits, soft tissue inflammation

P: No Rx for now

Consider banamine (1.1mg/kg) for 3 days if stiffness persists for 24hrs, dose can be decr to 0.5mg/kg and be extended FEW more days (CSD)

Clinical Note:

13.Jun.200

Rx: FLUNIXIN MEGLUMINE 4.5 gm PO SID for 3 days. (CS)

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Scientific Name: ELEPHAS MAXIMUS MAXIMUS           Accession #: 101822
Common Name: SRI LANKAN ELEPHANT                 Female
Name: Shanthi                                     Birth: 15.Mar.1975 (Estimated)
=====

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Clinical Note: 13.Jun.2004

Prob: Stiffness has worse. Tx with Banamine started today.  
Hx: Elephant is reported as eating, defecating and acting normally.  
Keeper (MG) mentioned that she had hard time going down the ramp this a.m.

Visual:

S/O: Elephant is BAR, on motion this elephant is very stiff on L leg; difficult to tell if it's any joint on particular. This elephant is walking without moving or flexing any joint (shoulder, elbow or carpal joint).

Exam: Both front limbs palpated, R is normal. L: The area on top of middle nail is warmer than the opposite foot (R/O edema vs local inflammation). No other abnormalities noted. When shanti was ordered to lift and place the leg backwards, she hesitated and when finally she did it she show signs of discomfort (eyes closed, hunched body).

A: Stiffness, severe, acute

R/O Remuathoid arthritis, osteoarthritis, trauma

P: Start short course of banamine 1.1mg/kg x 3D

Consider switching to ibuprofen afterwards

Visual 6/14 (CSD)

Prescription Data >>

Starting date: 13.Jun.2004

Drug: FLUNIXIN MEGLUMINE 4.5 gm PO SID for 3 days

Formulation: 50.00 mg/ml injectable

Prescribed by: CS (13.Jun.2004)

Filled by: LE (13.Jun.2004)

Treatment weight: 4291 kg

Comments >>

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Dispensing Note: Dispense 3 doses. Each dose 3 tubes of paste

=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note: 14.Jun.200

HX: Shanti continues to eat and defecate WNL. Took banamine well yesterday.

S/O: Left foreleg still severe stiffness. All joints held in rigid and Shanti tries to not bend when moving. Slight flexion noted to carpus when walking from outdoor enclosure. Leg palpation WNL. Nail 4 has vertical crack (keeper SH states same as always is) and slight edema dorsal to nail 3. No warmth palpated. On command to bring leg back enough for SLD to visualize pad = NR.

A/P: Reluctance or inability to flex joints of left foreleg. Based on CDS information and keeper (SH) appears to have improved some on banamine. CWPT of 2 more days of banamine. No systemic signs noted at this time. (SLD)

Clinical Note: 15.Jun.200

Proc: Visual exam. A: Shanthi has improved on the past 48hrs remarkably.

Visual:

S/O: Elephant is BAR, on motion the stiffness of the foreleg has improved since last CSD exam 48 hrs ago. Elephant is bending carpal and elbow joint.

Shanthi is bearing full weight on both legs. No other abnormalities noted during motion.

Both feet palpated, the area on top of central nail is slightly warmer than the opposite side but not much (Dr D was present and didn't feel it was warmer).

A: Stiffness, responsive to banamine

P: Extend banamine 2 more days and monitor only (CSD)

=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
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Clinical Note: 17.Jun.200

Proc: Visual exam. Stiffness is resolved.  
S/O: Shanthi is walking with no evident stiffness today. Keeper (MG) agrees that she is walking normally today.  
Exam: Elephant didn't react to palpation on any area/joint today. Subjectively the area on top of middle nail doesn't seem as warm as in previous days.  
A: Stiffness, resolved  
P: Today last banamine administration  
Keepers to monitor for stiffness when banamine is d/c

Addendum: Result: Trunk washes from 4/5/04-4/7/04: Neg for Mycobacterium (NVSL) (CSD)

Clinical Note: 27.Aug.200

Comt: Thomas Hildebrant and Robert Hermes (german ultrasonographers) are here today for a reproductive evaluation of Shanthi today.

Proc: Repro/ultrasound per rectum. Shanthi was calm and easily handled for this procedure. Results: Small cysts seen in uterus (improvement over previous ultrasound where larger cysts were noted). Placental scar noted (normal finding from last pregnancy). Right ovary quiet - no evidence of follicles. Left ovary - likely cl present.

A: Reproductively sound - Shanthi is considered a good candidate for AI procedure.

P: Consider scheduling AI if funding can be obtained. (SZM)

Submission Data >>  
Type: Fecal sample  
Purpose: ROUTINE EXAMINATION

Sample id.: 2004-3592  
Date collected: 7.Oct.2004

Collected from:  
From an individual specimen.

Enclosure: EH 11-13

Examination Data >>  
Storage: room temperature  
Consistency: formed  
Gross appearance: Typical

Date examined: 7.Oct.2004

Tests & Results >>  
FLOATATION - SUGAR

NO PARASITES SEEN

=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*  
Common Name: SRI LANKAN ELEPHANT  
Name: Shanthi  
=====

Accession #: 101822  
Female  
Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note:

6.Dec.2004

Hx: Routine trunk wash, Day 1/3.

Note: Last TW was done 7 months ago. USDA recommends once a year and for the past 3 years all the elephants have been negative on all trunk washes. Vets recently decided to continue twice yearly trunk washes in NZP elephants for now.

Proc

1. Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blew contents of trunk into plastic bag. Wash fluid transferred to sterile centrifuge tube.

A: Routine 3 day trunk wash, day 1/3  
R/O tuberculosis

P: Next trunk 12/7/04 (EB)

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Clinical Note:

7.Dec.2004

Proc: Routine trunk wash, Day 2/3.

S/O: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blew contents of trunk into plastic bag. Wash fluid transferred to sterile centrifuge tube.

A: Routine 3 day trunk wash, day 2/3  
R/O tuberculosis

P: Next trunk wash 12/8/04 (EB)

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Clinical Note:

8.Dec.2004

Proc: Routine trunk wash, Day 3/3.

S/O: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blew contents of trunk into plastic bag. Wash fluid transferred to sterile centrifuge tube.

A: Routine 3 day trunk wash, day 3/3  
R/O tuberculosis

Blood taken by keepers today. CBC/Chem WNL. (EB)

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Scientific Name: <i>ELEPHAS MAXIMUS MAXIMUS</i>	Accession #: 101822
Common Name: SRI LANKAN ELEPHANT	Female
Name: Shanthi	Birth: 15.Mar.1975 (Estimated)

=====

Clinical Note: 15.Dec.200

Problem: routine examination  
Proc: Physical exam and rabies vaccination today.  
Hx: No abnormalities reported. Blood sample was taken last week for CBC/CP and TB test. Trunk washes were also performed last week.

Proc: BW reported as 4191 kg.

1. PEX: (PEX and vaccination performed under training command)  
S/O: This elephant is in good body condition  
Integ: NSF;  
EENT: OU: NSF. Oral cavity (flashlight): MM are bright pink, saliva is of normal consistency. 4th upper molar remnants present just rostral to 5th molars and not causing any problems.  
Feet and nails: All NSF.  
H/L: Diff to auscultate with stethoscope. RR: 16/ min, clear sound.  
Temp: 96.9 rectally.  
GI/UG: NSF. Both lactating mammary glands palpate normally.

Results from last week bloodwork: CBC and CP WNL

Rx: Vaccination (3cc syringe with 18 ga x 1.5 in needle):  
Vaccination: Imrab 3 1.0 ml IM (RR), serial #12480, exp. 01/01/06

A: Apparently healthy.  
P: vaccinate with tetanus as soon as available in next month. (EB)

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Clinical Note: 17.Dec.200

UA results from 12/15/04 (free-catch during exam)  
SG 1.007, 3+ normal amorphous crystals (EB)

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Clinical Note: 4.Jan.2005

Proc: tetanus vaccination

Vaccination: Tetanus toxoid, 1.0 ml im, serial 277334A, exp. 1/4/06  
given im in left thigh with 18 ga 1.5 in needle. (EB)

=====  
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Clinical Note: 14.Feb.2006  
Results of trunk wash from 12/6-12/8/04: no Mycobacterium isolated. (EB)

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Clinical Note: 7.Jun.2005  
Comt: Over the past few weeks an elephant urine study was being conducted at the elephant house (with prior IACUC approval). Blood will be requested on all elephants to run Herpes tests. In addition, some of the urine samples will be run by PCR to test for Herpes. (SZM)

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Clinical Note: 8.Jun.2005  
Comt: Blood submitted for Herpes testing. (SZM)

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Clinical Note: 13.Jun.2006  
Hx: Routine trunk wash. Day 1/3.  
Proc: Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blew contents of trunk into plastic bag. Wash fluid transferred to sterile centrifuge tube.  
A: Routine 3 day trunk wash, day 1/3  
R/O tuberculosis  
P: Next trunk wash 6/14. (EB)

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Clinical Note: 14.Jun.2006  
Hx: Routine trunk wash. Day 2/3.  
Proc: Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blew contents of trunk into plastic bag. Wash fluid transferred to sterile centrifuge tube.  
A: Routine 3 day trunk wash, day 2/3  
R/O tuberculosis  
P: Next trunk wash 6/15 (CSD)

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=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS*  
Common Name: SRI LANKAN ELEPHANT  
Name: Shanthi  
=====

Accession #: 101822  
Female  
Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note: 15.Jun.2005

Hx: Routine trunk wash. Day 3/3.  
Proc: Trunk wash: 60 ml saline instilled in trunk by keepers. Trunk raised then lowered as animal blew contents of trunk into plastic bag. Wash fluid transferred to sterile centrifuge tube.

Elephant bled EDTA tube from ear vein as lab request to test new machine today.

- A: Routine 3 day trunk wash, day 3/3  
R/O tuberculosis
- P: Trunk wash completed, culture results pending. (EB)

=====  
Clinical Note: 5.Jul.2005

Routine blood sample for CBC/CP: WNL (CSD)

=====  
Clinical Note: 29.Aug.2005

Results of mycobacterium culture from trunk washes 6/13-15/05 are negative (NVSL) (EB)

=====  
Clinical Note: 4.Oct.2005

Proc: Monthly urine and blood sample submitted today.

Blood obtained by keepers: WNL

A: Lab results are normal (CSD)  
=====

=====  
Scientific Name: *ELEPHAS MAXIMUS MAXIMUS* Accession #: 101822  
Common Name: SRI LANKAN ELEPHANT Female  
Name: Shanthi Birth: 15.Mar.1975 (Estimated)  
=====

Clinical Note: 14.Oct.200

Blood collection for clotting profile. Shanthi to act as "normal" control for Toni. Shanthi has not been on NSAIDs since 6/04. Toni is currently on oral ibuprofen and carprofen. Blood collected in blue top tubes and submitted to Friendship hospital for PT and PTT.

Results:

Toni: PT: 19.9 PTT: 19.5

Shanthi: PT: 17.5 PTT: 22.1

Both animals' PTs are higher than the lab's dog/cat references (6-12). Both animals' PTTs are within the lab's dog/cat reference ranges (10-25). (NCB)

Clinical Note: 25.Oct.200

Blood collection for clotting profile. Shanthi to act as "normal" control for Toni. Shanthi has not been on NSAIDs since 6/04. Toni is currently on oral ibuprofen and carprofen as well as starting injectable Adequan and Legend last week. Blood collected in blue top tubes and submitted to Friendship hospital for PT and PTT as well as to the NZP to send out (to Cornell) for comparison.

Results:

Toni: PT: 16.3 (Friendship), 20 (Cornell); PTT: 18.3 (F), 16.5 (C);

TCT: 11 (C)

Shanthi: PT: 15.8 (F), 19 (C); PTT: 20.0 (F), 19 (C); TCT: 9 (C)

Both animals' PTs are higher than the lab's dog/cat references (6-12). Both animals' PTTs are within the lab's dog/cat reference ranges (10-25). (109)

Clinical Pathology Records Report - ISIS/In-House Reference Values  
NATIONAL ZOOLOGICAL PARK

Scientific name: *ELEPHAS MAXIMUS*  
Common Name: ASIATIC ELEPHANT

		ISIS Values				
		Mean	S.D.	Min.	Max.	(N)
WBC	*10 <sup>3</sup> /UL	14.43 ±	4.409	5.800	33.30	(1779)
RBC	*10 <sup>6</sup> /UL	3.06 ±	0.51	1.78	5.15	(1501)
HGB	GM/DL	13.2 ±	2.2	6.6	24.9	(1568)
HCT	%	37.1 ±	6.0	20.3	68.0	(1890)
MCH	MG/DL	43.3 ±	4.8	16.6	63.2	(1464)
MCHC	ug	35.4 ±	3.6	16.9	68.6	(1536)
MCV	fL	122.3 ±	13.4	47.1	213.2	(1491)
SEGS	*10 <sup>3</sup> /UL	4.822 ±	2.925	0.291	23.90	(1502)
BANDS	*10 <sup>3</sup> /UL	1.402 ±	2.124	0.000	11.40	(307)
LYMPHOCYTES	*10 <sup>3</sup> /UL	5.243 ±	3.223	0.196	20.60	(1513)
MONOCYTES	*10 <sup>3</sup> /UL	3.677 ±	2.909	0.000	9.983	(1273)
EOSINOPHILS	*10 <sup>3</sup> /UL	0.465 ±	0.551	0.000	4.520	(1093)
BASOPHILS	*10 <sup>3</sup> /UL	0.173 ±	0.105	0.000	0.508	(119)
NRBC	/100 WBC	1 ±	1	0	3	(85)
PLATE. CNT.	*10 <sup>3</sup> /UL	469 ±	215	121	1394	(428)
RETICS	%	0.8 ±	1.6	0.0	4.4	(10)
GLUCOSE	MG/DL	91 ±	21	33	223	(1257)
BUN	MG/DL	13 ±	4	4	30	(1260)
CREAT.	MG/DL	1.6 ±	0.4	0.7	3.3	(1230)
URIC ACID	MG/DL	0.2 ±	0.3	0.0	3.4	(286)
CA	MG/DL	10.6 ±	0.8	7.8	14.8	(1184)
PHOS	MG/DL	5.0 ±	1.2	1.9	11.1	(724)
NA	MEQ/L	130 ±	6	99	181	(859)
K	MEQ/L	4.6 ±	0.5	3.2	6.6	(861)
CL	MEQ/L	89 ±	4	77	103	(731)
IRON	MCG/DL	65 ±	23	29	158	(82)
MG	MG/DL	2.10 ±	0.53	0.00	2.90	(68)
HCO3	MMOL/L	26.3 ±	3.0	19.0	32.3	(55)
CHOL	MG/DL	48 ±	19	0	189	(599)
TRIG	MG/DL	61 ±	42	10	329	(745)
T. PROT. (C)	GM/DL	8.1 ±	0.8	5.8	11.3	(1227)
T. PROT. (R)	GM/DL	8.4 ±	0.4	7.8	9.2	(23)
ALBUMIN (C)	GM/DL	3.2 ±	0.5	1.9	4.7	(648)
GLOBULIN (C)	GM/DL	5.0 ±	1.0	2.7	8.6	(639)
AST (SGOT)	IU/L	22 ±	11	4	97	(1227)
ALT (SGPT)	IU/L	7 ±	8	0	72	(781)
T. BILI.	MG/DL	0.2 ±	0.2	0.0	1.2	(765)
D. BILI	MG/DL	0.1 ±	0.1	0.0	1.3	(233)
I. BILI.	MG/DL	0.1 ±	0.1	0.0	0.6	(224)
AMYLASE	U/L	3017 ±	2492	0	9866	(170)
ALK. PHOS.	IU/L	143 ±	66	28	641	(1157)
LDH	IU/L	655 ±	703	46	4769	(495)

Clinical Pathology Records Report - ISIS/In-House Reference Values  
 NATIONAL ZOOLOGICAL PARK

=====  
 Scientific name: *ELEPHAS MAXIMUS*  
 Common Name: ASIATIC ELEPHANT  
 =====

		ISIS Values				
		Mean	S.D.	Min.	Max.	(N)
CPK	IU/L	225 ±	170	23	1260	(486)
OSMOLARITY	MOSMOL/L	264 ±	29	0	325	(98)
ALPHA GLOB.	MG/DL	250.4 ±	353.1	0.7	500.0	(2)
ALPHA-1 GLOB	MG/DL	0.8 ±	0.1	0.7	1.0	(6)
ALPHA-2 GLOB	MG/DL	0.9 ±	0.2	0.7	1.1	(6)
BETA GLOB.	MG/DL	1.0 ±	0.6	0.6	1.4	(2)
Body Temperature:		36.3 ±	0.5	36.0	37.0	(4)
CO2	MMOL/L	24.8 ±	4.0	15.8	37.0	(230)
CORTISOL	UG/DL	2.0 ±	1.0	0.5	5.4	(35)
ESR	MM/HR	98 ±	32	53	130	(7)
FIBRINOGEN	MG/DL	371 ±	181	0	810	(238)
GGT	IU/L	7 ±	5	0	33	(314)
LIPASE	U/L	19 ±	30	0	127	(53)
PROGESTERONE	NG/DL	18.82 ±	62.45	0.020	346.0	(379)
TESTOSTERONE	NG/ML	20.34 ±	27.95	0.570	40.10	(2)
A-TOCOPHEROL	UG/DL	19 ±	15	0	42	(8)
TOT. T4 (RIA)	UG/DL	10.0 ±	2.7	4.2	12.6	(10)
T3 UPTAKE	%	28 ±	2	26	29	(2)
ALBUMIN (E)	GM/DL	4.1 ±	0.6	3.5	4.9	(4)
GAMMA GLOB	GM/DL	2.9 ±	2.9	0.0	9.0	(11)