

Medical History Report - Summary for Individual Specimen  
TULSA ZOOLOGICAL PARK

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Scientific Name: ELEPHAS MAXIMUS (no subsp)           Accession #: 2702
Common Name: ASIATIC ELEPHANT                           Male
Name: Sneezy                                           Birth: 17.Jul.1973 (Estimated)
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.....1977....

29.Nov Obtained from another institution.

.....1995....

15.Oct Parasitology examination: (DIAGNOSTIC EXAMINATION) Fecal sample.  
NO PARASITES SEEN.

.....1996....

13.Aug Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.  
NO PARASITES SEEN.

.....1998....

- 1.Oct PROBLEM: abscess - TEMPORAL GLAND (onset)  
Proc 1. Visual. Right temporal gland swollen and bothering the animal. Blowing at area with his trunk and touching it frequently. Keepers noted it exuded thick secretion last week.  
Assess: Possibly abscessed Rt. Temporal gland.  
Plan: will attempt to express and culture tomorrow with animal in squeeze.  
RX: TMS 30 mg/kg PO q 24 hours X 7 days. (KAB)
- 2.Oct Proc 1. Shifted into chute and attempted to squeeze in stretched position. Animal frightened by chute and uncooperative. Squeezed lightly while standing.  
Proc 2. Able to touch area of swollen Rt temporal gland with short probe, unable to express exudate.  
Assess: abscessed temporal gland uncomfortable for animal.  
Plan: Culture swabs left for staff if drainage seen and can be safely cultured. Monitor daily. (KAB)
- 3.Oct Proc 1. Visual. Right temporal gland even more swollen with minimal drainage. Still won't enter squeeze chute for culture. Taking medication well. (MLL)
- 4.Oct Proc 1. Visual. Right temporal gland continues to be swollen and painful to animal. Small spot were exudate present is visible.  
Animal will not allow himself to be caught in chute for closer exam.  
Plan: Continue to attempt restraint in chute for possible surgical drainage of swelling. Contingency for sedation if necessary will be made.  
RX: banamine granules, 1mg/kg for 2 days dispensed for pain. (KAB)
- 6.Oct Sedated: XYLAZINE/BUTORPHANOL/YOHIMBINE  
Sedated for facial abscess, aerobic culture submitted  
Proc 1. Sedation. 350mg Xylazine/40mg Butorphanol IM, 20 minutes post injection animal very sedate. Lidocaine infused locally.

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.....1998....

- 6.Oct Reversed 60 minutes post injection with 100 mg Yohimbine. Animal slow but alert at end of day.  
Proc 2. Right temporal gland lanced and drained, copious, watery and foul smelling pus expressed. Abscess is extensive and travels dorsally from temporal gland opening at least 12 inches. Possibly septae present within abscess. Betadine flushed into abscess and opening widened to allow drainage, finger can be placed into opening.  
Proc 3. Microbiology: Swab submitted for aerobic bacterial culture. Assess: Temporal gland abscess, drained.  
Plan: Continue current course of antibiotics until culture results return. (KAB)
- 7.Oct Proc 1. Visual, abscess drainage site seems swollen shut. Keepers will attempt warm hydrotherapy BID until further notice.  
RX: Phenylbutazone 10 grams PO q 24hrs X 3 days. pain and inflammation.  
HMC culture results: Many gram neg. bacilli, rare E. coli. Sensitive to trimethoprim/sulfa. (KAB)
- 9.Oct Proc 1. Visual. Swelling limited to a 10 cm. diameter (approximate) area. Skin around area is moist. Animal had loose stools overnight, so the last dose of phenylbutazone was not given. (MLL)
- 11.Oct Proc 1. Visual. Swelling seems reduced, though not actively draining at this time. Attitude and appetite normal. (KAB)
- 12.Oct Proc 1. Visual. Abscess actively draining fluid white exudate. Microbiology results: Alpha and Beta hemolytic Steptococcus and E. Coli sensitive to TMS and cephalosporins, aminoglycosides. TMS continued until the end of the week. (KAB)
- 15.Oct Proc 1. Visual. Swelling slightly reduced, not actively draining today.  
Plan: Continue antibiotics TMS PO q 24hrs for 1 more week. Animal has been inconsistent in taking the full dose. Continue BID hydrotherapy. (KAB)
- 16.Oct Proc 1. Visual. Swelling greatly reduced. Keepers found the organized sac from the abcess almost in its entirety on the ground this morning. There is still a remnant protruding from the drainage hole. (MLL)
- 20.Oct Proc 1. Visual. Swelling still reduced. Still some drainage and possibly still the remnant mentioned above remaining. (MLL)
- 22.Oct Proc 1. Visual. Still slight amount of drainage. Swelling nearly gone. (MLL)
- 25.Oct PROBLEM: abscess - TEMPORAL GLAND (resolved)  
Proc 1. Visual. Swelling of temporal region almost completely resolved, small drainage hole still present and should remain at

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.....1998....

- 25.Oct opening of temporal gland.  
Proc 2. Hydrotherapy continuing once a day.  
Plan: continue antibiotics until the end of the week. (KAB)
- 27.Oct Proc 1. Trunk wash for TB surveillance. Elephant blew into bag  
several times, bag was washed with 30 mls of sterile saline, samples  
frozen for submission to NVSL.  
Proc 2. visual, no swelling or evidence of drainage from right  
temporal gland.  
Plan: Attempt to get the required three samples for Tb surveillance.  
(KAB)
- 28.Oct Proc 1. Trunk wash for TB surveillance. Elephant blew into bag  
several times, bag was washed with 30 mls of sterile saline, samples  
frozen for submission to NVSL.  
Plan: attempt again tomorrow. (KAB)
- 29.Oct Proc 1. Trunk wash for TB surveillance. Elephant blew into bag  
several times, bag was washed with 30 mls of sterile saline, samples  
frozen for submission to NVSL.  
three samples have now been collected and will be sent for culture.  
(KAB)
  
- 15.Nov Proc 1. Visual, small circular swelling noted at pore to right  
temporal gland, animal has been packing dirt and blowing on area.  
Assess: Possible return of abscess to this area, obviously bothering  
the animal  
Plan: Section will begin BID hydrotherapy until further notice.  
(KAB)
- 16.Nov PROBLEM: abscess - TEMPORAL GLAND (onset)
- 29.Nov PROBLEM: abscess - TEMPORAL GLAND (resolved)  
Proc 1. Visual, area of right temporal gland swelling has resolved,  
as has drainage.  
assess: resolution of rt. temporal gland abscess.  
Plan: Hydrotherapy discontinued. (KAB)

.....1999....

- 9.Feb Proc. Visual, right temporal gland slightly swollen and draining  
some thick whitish exudate.  
Plan: Hydrotherapy BID for a total 7 days. (KAB)
- 18.Feb Blood sample: (EDTA) Hematology/Chemistry/Serology results.  
WBC:12.68 \*10<sup>3</sup>/UL; HCT: 37.5%; BUN:13 MG/DL;
- 28.Feb Routine CBC/chem results: WBC:12.68X10<sup>-3</sup>, Neutros-54%, Bands-5%,  
Lymphos-23%, Monos-15%, Eos-3%, Tprotein-9.4, HCT-37.5%, BUN-13,  
creatinine-1.8, Na-128, Cl-85, Ca-10.6, Alkphos-111, albumin-3.7,  
AST-15, Gluc-69, CPK-113, GPT-1. (KAB)

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.....1999....

- 3.Mar Present for foot care session, full lenght crack on p2 nail of left rear foot. Temporal gland was not shown any signs of reswelling, staff will discontinue hydrotherapy. (KAB)
- 4.Mar Final culture results from NVSL: trunk wash mycobacterial cultures, all three negative. (KAB)
- 18.Mar PROBLEM: crack - left rear foot (onset)  
Proc. 1. Visual, recheck of nail crack on left rear foot p3, foot care needs to be increased to a least twice weekly to pare out the nail crack.  
Plan: Spray with betadine. (KAB)
- 25.Mar Blood sample: (EDTA) Hematology/Chemistry/Serology results.  
WBC:9.00 \*10<sup>3</sup>/UL; HCT: 36.5%; BUN:12 MG/DL;
- 4.Apr Proc 1. Visual exma of left rear foot P3, foot crack has been trimmed to the top of nail, area readily bleeds.  
Plan: Spray with betadine at least twice daily. (KAB)
- 12.Apr Proc 1. Visual, nail crack appears unchanged but is very sensitive, animal is refusing to go into chute due to trimming.  
Plan: Discontinue trimming for 1-2 weeks, spray betadine as many times a day as possible. (KAB)
- 14.Apr fecal results, routine, negative by floatation (EM)
- 15.Apr Blood sample: (EDTA) Hematology/Chemistry/Serology results.  
WBC:10.11 \*10<sup>3</sup>/UL; HCT: 38.0%; BUN:13 MG/DL;
- 22.Apr CBC and Chem results: WBC:10.11X10<sup>-3</sup>, Neutros-24%, Lymphs-13%, Monos-60%, HCT-38%, tprotein-8.1, BUN-13, creatinine-1.8, Gluc-72. (KAB)
- 4.Jun Blood sample: (EDTA) Hematology/Chemistry/Serology results.  
WBC:7.95 \*10<sup>3</sup>/UL; HCT: 36.9%; BUN:11 MG/DL;  
CBC/Chem results: WBC: 7.95X10<sup>-3</sup>, Neutros-32%, lymphs-125, Monos-54%, HCT 36.9%, tprotein-8.6, albumin-3.6, BUN-11, creatinine-1.8. (KAB)
- 5.Jul Proc 1. Visual, slight swelling present just caudal to pore of right temporal gland.  
Assess: He has been showing signs of musht, and is draining from the left gland.  
Plan: begin hydrotherapy daily if possible to stimulate drainage from abnormal right temporal gland. (KAB)
- 29.Sep PROBLEM: crack - left rear foot (resolved)
- 2.Nov PROBLEM: tuberculin testing - trunk (onset)
- 22.Nov PROBLEM: abscess - TEMPORAL GLAND (onset)

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.....1999....

- 22.Nov Proc 1. Visual exam, right temporal gland is swollen, pore of gland is pouching outward.  
Assess: Re-flaring of infected impacted temporal gland, unable to treat with hydrotherapy due to broken squeeze chute.  
Plan: Keepers will attempt to push on gland area with a pole in attempt to express gland. Animal will not stand for hydrotherapy unless in the chute. (KAB)
- 23.Nov Proc 1. Keepers report gland is slightly less swollen today. They will continue attempts to express gland using a wooden pole. (KAB)
- 24.Nov Proc 1. Visual, gland is draining a thick whitish exudate, swelling is present but reduced from 22Nov99. (KAB)
- 30.Nov PROBLEM: abscess - TEMPORAL GLAND (resolved)
- 10.Dec Proc 1. Hydrotherapy because of keeper's report of exudate from gland. (MLL)
- 11.Dec Proc 1. Visual. Small white flecks of possible exudate on skin surrounding right temporal gland. Slight swelling.  
Plan: continue hydrotherapy until Dr. Backues evaluates condition. (MLL)

.....2000....

- 20.Feb PROBLEM: tuberculin testing - trunk (resolved)  
NVSL Mycobacterial cultures from annual trunk washes: All three samples are negative, no mycobacterial isolates made. (KAB)
- 26.Feb PROBLEM: abscess - TEMPORAL GLAND (onset)  
Proc 1. Visual exam. Right temporal gland is pointed and has a thick pasty white exudate. Keepers have been applying hydrotherapy for two days. (MLL)
- 27.Feb Proc 1. Visual exam. right temporal gland is draining thick pus, keepers reported a significant amount of drainage yesterday and overall reduction in swelling around rt. temporal gland today.  
Plan: Will continue daily hydrotherapy for a least another week. (KAB)
- 5.Mar PROBLEM: abscess - TEMPORAL GLAND (resolved)

.....2001....

- 25.Jan NVSL trunk wash results: No isolation made. (MLL)
- 29.Jan PROBLEM: abscess - TEMPORAL GLAND (onset)  
Proc 1. Note keeper report states drainage from right temporal gland, small amount, hydrotherapy started immediately. (KAB)
- 5.Feb PROBLEM: abscess - TEMPORAL GLAND (resolved)

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.....2001....

- 5.Feb            VACCINATION  
           Blood sample: (EDTA) (10:00.0) Hematology/Chemistry/Serology results.  
           WBC:9.01 \*10<sup>3</sup>/UL; HCT: 34.3%; BUN:11 MG/DL;  
           Proc 1. Blood sample collected - EDTA and serum. from right rear  
           saphenous vein for CBC/Chem/ and research serum samples.  
           Proc 2. Vaccinated with 2.0 mls ~ 1X10<sup>-7</sup> PFU of experimental VMCO  
           vaccine for vaccination research trial.  
           Plan; monitor for adverse reactions. (KAB)
- 12.Feb        Proc 1. Attempted blood sample collection from rear leg,  
           unsuccessful, animal pulled leg back into chute. (KAB)
- 13.Feb        Proc 1. Blood sample collected - serum. T-7 serum samples for  
           research vaccine trial. (KAB)
- 19.Feb        Proc 1. Blood sample collected - serum. From leg vein for research  
           serum samples. (MLL)
- 26.Feb        Blood sample: (10:00.0)  
           Proc 1. Blood sample collected - serum. From right rear leg vein for  
           research serum samples. (KAB)
  
- 5.Mar        Blood sample: (EDTA) ( 9:20.0) Hematology/Chemistry/Serology results.  
           WBC:9.35 \*10<sup>3</sup>/UL; HCT: 33.9%; BUN:11 MG/DL;  
           Proc 1. Blood sample collected - serum. From rear leg vein for  
           research serum samples. and CBC/Chem (KAB)
- 12.Mar        Blood sample: ( 9:30.0)  
           Proc 1. Blood sample collected - serum. From right leg vein for  
           research serum samples. (KAB)
- 22.Mar        NVSL titers negative at 1:32 for all serum samples. No response to  
           vaccine (KAB)
  
- 7.Apr        Blood sample: (EDTA) ( 9:20.0) Hematology/Chemistry/Serology results.  
           WBC:12.52 \*10<sup>3</sup>/UL; HCT: 30.4%; BUN:10 MG/DL;  
           Proc 1. Blood for bimonthly CBC & chem to HMC.  
           Proc 2. Annual fecal exam by flotation: NPS. (MLL)
- 16.Apr        Blood sample: ( : 9.0)  
           Proc 1. Blood sample collected - serum. From ear vein for research  
           serum samples. (KAB)
  
- 14.May        Proc 1. Blood sample collected - serum from right saphenous for  
           research serum samples. (KAB)
- 21.May        Blood sample: (EDTA) Hematology/Chemistry/Serology results.  
           WBC:11.90 \*10<sup>3</sup>/UL; HCT: 34.9%; BUN:12 MG/DL;  
           Blood sample collected - serum. From right saphenous vein for  
           research serum samples. and routine CBC/chem.  
           Vaccinated: 5ml of experimental VMCO virus in left rear leg. (KAB)
  
- 4.Jun        Blood sample:

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.....2001....

- 4.Jun Hemolysis
- 9.Jul Blood sample: ( 8:15.0)
- 16.Jul Blood sample: ( 9:50.0)
- 30.Jul Blood sample:
- 13.Oct Blood sample: (EDTA) ( 8:55.0)  
Proc 1. Blood for CBC/chem to HMC. (MLL)
- 2.Nov Blood sample collected - serum. From right leg vein for research  
serum samples. (MLL)
- 6.Dec TB test via trunk wash. (CLD)

.....2002....

- 18.Feb Visual exam. Small amount of drainage from right temporal gland.  
Rx: Hydrotherapy SID to BID. (ADF)
- 20.Feb Proc 1. Visual exam. Missing approx 6 inch chunk out of left lateral  
ear margin secondary to Sooky being aggressive.  
Assess: Aggression from enclosure mate.  
Plan: Dilute Betadine solution sprayed on area SID to BID. (ADF)
- 27.Feb NVSL annual Trunk wash mycobacterial isolation attempts are  
negative. (KAB)
- 30.Jun Proc 1. Chute restraint  
Proc 2. Rectal exam, keepers had seen a small spot of blood when  
attempting to clean out rectum for semen collection training 3-4  
days ago. Rectal lining is smooth and nonreactive. No blood seen.  
Instructed keepers in where to stimulate urethra to train for semen  
collection  
Plan: monitor (KAB)
- 21.Jul Keepers collected first successful semen sample. Microscope; sample  
is thick with sperm, many are still alive, but weakly moving (KAB)
- 30.Jul Semen collection, numerous sperm but no motility  
Proc 1. Reproductive ultrasound exam performed by Dr. Dennis Schmitt  
for AZA/SSP survey. See his comments below  
Seminal vesicle: small for active breeder  
Ampulla: large well filled ampulla  
Testes: large left testis seen with US, due to difficulty of finding  
right testis not examined.  
Overall: Satisfactory potential breeder, good candidate for semen  
doner for AI. (KAB)

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.....2002....

- 4.Aug Keepers were again successful in semen collection, large volume with diluted sperm, almost no motility, some just barely moving. thought to have urine contamination (KAB)
- 14.Aug Semen collection attempt, ejaculated and then urinated together. Sperm viability thought to be ~50%. Semen extension protocol followed and samples sent to SMSU via FedEx. (KAB)
- 10.Sep Semen collection attempt, ejaculated and then urinated together. Diluted sample, viability 0%. (PHJ)
- 29.Sep PROBLEM: lameness - both front limbs (onset)  
Proc 1. Visual exam, animal walks stiffly w/o flexing carpi. Lameness appears symmetrical as appears reluctant to flex both carpi equally.  
Assess: soft tissue stress strain  
Plan: RX: phenylbutazone 4.4 mg/kg PO x 2-3 days.  
high end of dose spectrum (KAB)
- 3.Oct PROBLEM: lameness - both front limbs (resolved)
- 6.Dec Diagnostic fecal exam by Hemocult: NEG. (MLL)

.....2003....

- 4.Feb NVSL trunk wash Mycobacteria isolation results: No isolation made.
- 4.Feb (MLL)
- 28.Feb PROBLEM: VACCINATION TETANUS TOXOID  
Proc 1. Restrained in chute.  
Proc 2. Vaccination: 1 ml Tetanus Toxoid i/m, Professional Biological Co. 138D Exp 11 Jul 03. (PHJ)
- 16.Apr PROBLEM: VACCINATION WNV  
Proc 1. Restrained in chute.  
Proc 2. Vaccination: WNV 1 ml IM right hip (Ft. Dodge, 1666126A, 15Apr04) (VEM)
- 8.May PROBLEM: VACCINATION WNV  
Proc 1. Restrained in chute.  
Proc 2. Vaccination WNV #2 of 2, 1ml IM rt thigh (Ft. Dodge, 1666122A, 17May04). (VEM)
- 24.May Proc 1. Visual lameness exam. Sudden weight-bearing lameness of right front leg. Slight swelling from the elbow through the pastern. Leg is held stiffly with the elbow and carpus kept straight during locomotion, resulting in the leg being swung out to the side. First noted yesterday but seems worse today. No abnormalities noted during

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.....2003....

- 24.May footwork two days before.  
Assess: weight-bearing lameness of unknown origin.  
Plan: Dispense phenylbutazone 4.4 mg/kg SID PO x 2 days.  
Reevaluate (MLL)
- 27.May Proc 1. Recheck exam, keepers report improvement in lameness noted  
24May03. No lameness or swelling at carpus noted on visual exam  
Plan: no further medication to be given (KAB)
- 16.Jul PROBLEM: VACCINATION IMRAB-3 - right rear limb  
Proc 1: Restrained in chute. Vaccination: Rabies 2ml IM right  
quadriceps. (IMRAB3, Merial, 12456A, 05Mar04). (TJZ)
- 11.Dec Proc 1: Visualization of annual trunk wash for tuberculosis  
testing. Continue for next 2 days. (TJZ)
- 16.Dec Blood sample: (EDTA) ( 9:00.0) Hematology/Chemistry/Serology results.  
WBC:12.50 \*10<sup>3</sup>/UL; HCT: 36.0%; BUN:11 MG/DL;

.....2004....

- 24.Feb NVSL trunk wash Mycobacterial isolation results: No isolation made.
- 24.Feb (MLL)
- 9.Mar Proc 1: Restrained in chute. WNV vaccination 1ml IM right rear leg  
(WNV Innovator, Ft. Dodge, 1666135A, 29July05) (TJZ)
- 10.Mar PROBLEM: VACCINATION WNV
- 1.Nov Proc 1: Restrained in chutes for semen collected; used ultrasound to  
locate seminal vesicles, prostate, urethra. Improved motility  
compared to last time collected.  
Assess: Improved motility.  
Plan: keepers will collect opportunistically (JS)
- 16.Nov Proc 1: Restrained in chute for blood collection from right rear  
tarsal vein.  
Serum banked and logged. (JS)
- 10.Dec NVSL mycobacterium culture results: No isolation made. (MLL)

.....2005....

- 1.Feb Proc 1. Dickerson Park Zoo staff collected semen. Good  
concentration,  
< 50 % motility.  
Assess: Successful collection.  
Plan: Invite Dickerson staff to collect when recipient cow cycling.  
(JS)

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.....2005....

- 15.Feb Proc 1. Blood sample collected - serum, from right metatarsal vein.  
Banked and logged. (JS)
- 22.Feb PROBLEM: VACCINATION WNV  
Proc 1. Vaccination: WNV, IM, left hip, Fort Dodge, serial #  
1666140A, exp. 18 June, 06. (JS)
- 28.Feb Proc 1. Restrained in chute for semen collection.  
Proc 2. Semen sample; two samples, first had some minor motility,  
the second had no motility. Samples sent via Federal Express to  
Woodland Park Zoo for AI.  
Plan: Continue routine semen collection. (JS)
  
- 1.Mar Proc 1. Restrained in chute for semen collection.  
Proc 2. Semen sample; Increased motility compared to yesterday.  
Samples sent via Federal Express to Woodland Park Zoo for AI.  
Plan: Last day of semen collection; recipient cow ovulated today.  
(KAB)
  
- 6.Sep Proc 1: Semen collection today for AI in Honolulu.  
Assess: Good concentration and motility. Extended with Schmidt  
protocol.  
Plan: Repeat tomorrow. (KEV)
- 7.Sep Proc 1: Semen collection today for AI in Honolulu. Yesterday's  
sample arrived 40% motile.  
Assess: Excellent concentration and motility. Extended with  
Schmidt protocol and with Woodland Park protocol.  
Plan: Repeat tomorrow. (KEV)
- 8.Sep Proc 1: Semen collection today for AI in Honolulu. Keepers report  
cow ovulated yesterday and yesterday's sample arrived in very good  
condition.  
Assess: Less concentration and motility today, but still ~75%  
motile. Extended with Woodland Park protocol.  
Plan: next AI in a few weeks. (KEV)
- 12.Sep Proc 1: Visual exam. Keepers noted swelling in region of R  
temporal gland two days ago. This a.m., the lesion has opened and  
is draining purulent material. Normal behavior.  
Assess: abscess, open and draining.  
Plan: recheck tomorrow, start hydrotherapy. (KEV)
- 15.Sep Proc 1: Visual exam. Swelling decreased since monday, lesion  
appears to be closing, but still is producing purulent exudate.  
Assess: abscess, draining  
Plan: continue hydrotherapy (KEV)
  
- 19.Oct PROBLEM: partial anorexia (onset)  
Proc 1. Visual exam: Keepers report animal off feed (hay only x 1

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.....2005....

- 19.Oct day) and feel that animal is walking with a stiff gait. Ocular, integumentary, musculoskeletal exam WNL. No lameness or obvious abdominal discomfort. Stool and urine appear grossly normal. Animal is eating browse currently.  
A: Partial anorexia, lethargy - r/o non-specific finding v. systemic or metabolic disease.  
P: Monitor. If anorexia persists 20-Oct-05, will attempt to obtain blood for CBC/Chem, fibrinogen. Keepers will collect feces and urine for analysis. (TAG)
- 20.Oct Blood sample: (EDTA) Hematology/Chemistry/Serology results.  
WBC:13.50 \*10<sup>3</sup>/UL; HCT: 22.7%; BUN:7 MG/DL;  
Proc 1. Visual exam: Animal continues off feed. Now will not eat grain. In PM, decreased interest in browse. Animal has only eaten small amount of produce. QAR, no observable signs of colic, no observable lameness.  
Proc 2. Blood sample collected - EDTA and serum. CBC/Chem and fibrinogen to VPL.  
Proc 3. Urinalysis - free catch obtained from floor of elephant barn. USG - 1.023, pH - 9.0, blood - NEG, leukocyte - NEG, nitrite - +, protein - 1+, bilirubin - 1+, ketone - NEG, glucose - 500, urobilinogen - NEG. NSF sediment analysis.  
A: Continued partial anorexia. R/O abdominal discomfort/colic.  
P: Increase walking in yard. Consider NSAID in AM 21-Oct-05 if no improvement. Pend diagnostics. (TAG)
- 21.Oct PROBLEM: partial anorexia (resolved)  
Proc 1. Visual exam: Continued anorexia. Animal very lethargic, shifting weight at stand from side to side in stall. Poor appetite.  
A: Suspected mild colic and mild hypokalemia ond CBC/Chem, respectively.  
Low HCT is artifact, normal when performed in house sample.  
P: Continue frequent walking.  
Rx: Flunixin meglumine 1250 mg IM, partial injection patient received 750 mg.  
Flunixin meglumine 5000 mg (1 mg/kg) PO SID x 3 days  
Trimeoprim/sulfadiazine 120,000 mg (24 mg/kg) PO SID x 6 days (TAG)
- 23.Oct Proc 1. Visual exam, keepers report animal is almost back to normal, appetite greatly improved, producing normal amounts of feces. monitor complete RX (KAB)
- 25.Oct Blood sample: (EDTA) (14:15.0) Hematology/Chemistry/Serology results.  
WBC:12.80 \*10<sup>3</sup>/UL; HCT: 36.4%; BUN:8 MG/DL;  
Proc 1. Visual exam: No significant findings. Keepers report normal appetite.  
Proc 2. Blood sample collected - EDTA and serum. CBC/Chem and fibrinogen to VPL.