

Medical History Report - Summary for Individual Specimen
TULSA ZOOLOGICAL PARK

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=====
Scientific Name: ELEPHAS MAXIMUS (no subsp)           Accession #: 12181
Common Name: ASIATIC ELEPHANT                         Female
Name: Sooky                                           Birth: 17.Jul.1972 (Estimated)
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.....1974....

- 17.Jul Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
STRONGYLES
- 13.Aug Rx: LEVAMISOLE 1.542gm PO (8 mg/kg)
- 30.Aug Rx: THIABENDAZOLE 1.233gm PO (2.9 mg/kg)
- 28.Sep Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
COCCIDIA

.....1975....

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

.....1977....

- 23.Jun Immobilized: XYLAZINE
FRACTURED TUSK
- 15.Aug Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
NO PARASITES SEEN.

.....1978....

- 19.Jan Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
NO PARASITES SEEN.

.....1980....

- 25.Mar Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
NO PARASITES SEEN.
- 9.Oct Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
NO PARASITES SEEN.
- 15.Nov Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
NO PARASITES SEEN.

.....1981....

- 14.May Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
NO PARASITES SEEN.
- 17.Nov Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
NO PARASITES SEEN.

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.....1990....

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11.Jan NO PARASITES SEEN.

7.Jul Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
      NO PARASITES SEEN.

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.....1991....

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19.Jan Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
      NO PARASITES SEEN.

18.Mar Sedated: XYLAZINE
      PUNCTURE WOUND IN TRUNK
      Purpose/Problem: TRUNK PUNCTURE WOUND
      Rx: PENICILLIN G BENZATHINE 35ml IM

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18.Jun Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
      CESTODES

10.Dec Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
      NO PARASITES SEEN.

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.....1992....

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1.Jun Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
      CESTODES

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.....1993....

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2.Jan Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
      NO PARASITES SEEN.

18.Jun Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
      CESTODES

9.Jul Rx: ALBENDAZOLE 34.00gm PO (10 mg/kg)

10.Dec Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
      CESTODES

20.Dec Rx: FEBANTEL 21.77gm PO (6 mg/kg)

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.....1994....

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8.Jan Parasitology examination: (FOLLOW-UP/RECHECK EXAMINATION) Fecal sample
      NO PARASITES SEEN.

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.....1994....

9.Jun Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
COCCIDIA

.....1995....

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

26.Jun PROBLEM: dermatitis - cutaneous (onset)
Parasitology examination: (ROUTINE EXAMINATION) Fecal sample.
NO PARASITES SEEN.

3.Jul Culture taken of draining lesions above nails. (EMD)

5.Jul Microbiology results: E. coli
Klebsiella (EMD)

20.Aug PROBLEM: puncture wound - trunk (onset)
wound - face (onset)
Fighting between Asian and African cows while on exhibit together,
Sooky has multiple shallow abrasions on her forehead from Thai's
tusks and one deep gouge about 1 foot from the tip of her trunk.
Small amount of blood loss from trunk wound. Treated with hydrogen
peroxide and nolvasan solution- to be treated next 3 days with
solutions and monitored for any signs infection. (CST)

26.Aug Trypsin spray given to keeper to help clear necrotic tissue out of
the trunk wound. Wound is still fairly deep and being treated
daily. (CST)

2.Sep PROBLEM: wound - face (resolved)
Wounds on face are almost completely healed in. Trunk wound is
looking very good and is granulating in. Feet are still in very bad
shape- one nail has a deep horizontal crack near it's dorsalmost
point. Numerous scarred over areas from cystic skin dz. Will try
anti-yeast medication with DMSO as soon as get it from pharmacy on
the feet. (CST)

8.Sep Two cultures taken from right front foot for candida culture.
Cultures taken from fresh areas with clear fluid draining. (EMD)

10.Sep Microbiology results: Klebsiella (EMD)

15.Sep PROBLEM: puncture wound - trunk (resolved)

19.Sep Started on combination of DMSO, chloramphenicol, and tioconazole
6.5% ointment once a day following betadine scrubbing of the front
left foot. (CST)

25.Sep All of the feet are starting to improve slowly due to the weather
changes. There is no to minimal improvement in the front left foot
(CST)

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.....1995...

16.Oct PROBLEM: VACCINATION - WEE/EEE/TETANUS
Vaccinated for WEE/EEE/tetanus. (CST)

.....1996...

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

21.Feb Problems with serous swellings around the nailbeds resolved over the
winter. Today was the first report of the start of another season
of this problem with one large swelling which ruptured releasing a
clear fluid. (CST)

19.Jun Been working behaviorally with the elephant for about a week now to
prepare her for ear bleeding. She is being a willing patient. (CST)

24.Jun Blood sample:

1.Jul Blood sample:

8.Jul Blood sample:

Icterus

Bled for progesterone screening. This is the third phlebotomy.

Will continue for next several months for reproductive screening.

(CST)

15.Jul Blood sample:

22.Jul Blood sample:

Bled for progesterone study in the lot due to construction in the
building. (CST)

29.Jul Blood sample:

5.Aug Blood sample:

12.Aug Blood sample:

7.Oct Last day for bleeding for progesterone assays. (CST)

1.Nov Graphs from National Zoo Research Center show elephant is cycling
quite nicely. (CST)

.....1997...

5.Jan Elephant is to be sent to Tulsa Zoo. Requested preshipment tests
include intradermal Tb, endoparasite (direct and float), and fecal
culture for shigella, salmonella, campylobacter. To be sent in May.
(CST)

6.Apr Animal to be sent out in early June now. Keepers working with her

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.....1997....

- 6.Apr in protected contact. May use medial metatarsal vein to get preshipment blood. Ear may be too sensitive and throw off training. Will work with elephant keepers for next several weeks to make blood draw easier. (CST)
- 20.Apr PROBLEM: tuberculin testing (onset)
.1 ml bovine PPD tuberculin ID right caudal tail fold. Animal too sensitive after Tb test to allow fecal culture or mammalian Tb test. Keepers obtained culture in afternoon. (CST)
- 23.Apr PROBLEM: tuberculin testing (resolved)
Tb test negative. (CST)
- 28.Apr Animal is doing fairly well in terms of training to allow blood draws. Started applying topical anesthesia to numb area. Will try to draw blood next week. (CST)
- 29.Apr Doing much better. Vessels running on lateral side of right ear may be the best option for blood draw. Local anesthetic appears to be helping. (CST)
- 4.May Poked fairly deeply with butterfly catheter needle- did well. Draw blood tomorrow. (CST)
- 5.May Attempted to draw blood from lateral right ear vessel this morning. Butterfly plugged by thick skin over lateral ear. (CST)
- 7.May Behaving well again in terms of practice blood sticks. Will try again this Sunday if things go well on Saturday. (CST)
- 9.May Attempted to draw blood using vacutainer. Needle went directly into vessel and elephant went directly to the back wall of the building. Used medial side of left ear. Back to the desensitization training. (CST)
- 14.May Mixed up DMSO/lidocaine combination until lidocaine ointment comes in. Will apply to ears and see if desensitizes better than topical cetacaine. (CST)
- 15.May Vaccinated for tetanus/EEE/WEE (CST)
- 17.May PROBLEM: tuberculin testing (onset)
.1 ml mammalian PPD tuberculin ID left caudal tail fold-tissue marker used to demote area. DMSO/lidocaine mixture seems to be desensitizing the skin fairly well. (CST)
- 20.May PROBLEM: tuberculin testing (resolved)
Tb test negative. Still unable to get blood. Elephant knows when needle is going to be used and backs away quickly from it. Needs further desensitization-consider using ice tomorrow. (CST)
- 21.May Ice used to dull sensation to ear. Assistant curator drew blood. Will save some serum for cortisol research in Tulsa. (CST)
- 5.Jun Obtained from another institution.

.....1998....

- 22.Sep PROBLEM: tuberculin testing (onset)

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.....1998....

- 22.Sep Proc 1. Trunk wash for TB surveillance. 60mls of sterile saline flushed into trunk with sterile red rubber tube. Elephant blew out sample on command. 10mls frozen for researcher and 20mls+ frozen for batched sample to NVSL. (KAB)
- 23.Sep Proc 1. Trunk wash for TB surveillance. 60mls of sterile saline flushed into trunk with sterile red rubber tube. Elephant blew out sample on command. 10mls frozen for researcher and 20mls+ frozen for batched sample to NVSL. (KAB)
- 24.Sep Proc 1. Trunk wash for TB surveillance. 60mls of sterile saline flushed into trunk with sterile red rubber tube. Elephant blew out sample on command. 10mls frozen for researcher and 20mls+ frozen for batched sample to NVSL. This is third and final sample required, cultures should take 8-12 weeks. Tests requested: Mycobacterial culture with speciation, Acid-fast stain and Nucleic acid amplification. (KAB)

- 4.Nov PROBLEM: trauma - skin (onset)
Proc 1. Visual. Left in with male overnight, multiple abrasions to left side of face and hindquarters. bite wound and partial degloving of 10-15 cm of ventral skin on tail. Skin tag hanging from injury.
Assessment: superficial skin injuries from male.
Plan: when inside for blood collection tomorrow injuries will be debrided and cleaned. (KAB)
- 5.Nov Proc 1. Attempted to clean abrasions over left eye, and debride dead skin from tail injury. Animal would not allow tail to be manipulated, able to clean abrasion over eye.
Assess: superficial abrasions
Plan: Staff will apply nitrofurazone ointment daily if possible. (KAB)
- 12.Nov Proc 1. Visual, abrasions received from breeding episode appear dry and healing well. Nitrofurazone discontinued. (KAB)

- 2.Dec PROBLEM: trauma - skin (resolved)
- 15.Dec PROBLEM: tuberculin testing (resolved)
- 16.Dec CX Results: NVSL Mycobacterial culture of trunk wash, Negative -No isolation made. (KAB)

.....1999....

- 7.Jan Blood sample: (EDTA) Hematology/Chemistry/Serology results.
WBC:9.93 *10³/UL; HCT: 32.4%; BUN:12 MG/DL;
- 20.Jan CBC and Chem results: WBC: 9.93X10⁻³, Neutros-33%, Lymphs-6%, Monos-57%,Eos-4%, HCT-32.4%, Tprot-7.7, Alb-3.2, SGOT-18, BUN-12,

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.....1999....

- 20.Jan creat-1.4, tbili-0.3, CPK-122, GPT-2. NSF (KAB)
- 18.Feb Blood sample: (EDTA) Hematology/Chemistry/Serology results.
WBC:9.74 *10³/UL; HCT: 33.2%; BUN:15 MG/DL;
- 28.Feb Routine CBC/chem results: WBC:9.74X10⁻³, Neutros-29%, bands-1%,
Lymphos-44%, Monos-23%, Eos-3%, HCT-33.2%, tprotein-8.9, Ca-10.3,
alkphos-61, albumin-3.4, Gluc-79, BUN-15, creatinine-1.4, Na-129,
Cl-89, AST-15, CPK-120, GPT-1. (KAB)
- 18.Mar Blood sample: (EDTA) Hematology/Chemistry/Serology results.
WBC:7.75 *10³/UL; HCT: 36.1%; BUN:13 MG/DL;
- 25.Mar CBC and Chem results: WBC:7.75X10⁻³,
Neutros-34%, Lymphs-53%, Monos-10%, Eos-3%, HCT-36.1%, tprotein-7.7,
albumin- 3.2, BUN-13, creatinine 1.5, Gluc-81, AST-15, CPK-158.
Overall WNL (KAB)
- 14.Apr fecal results, routine, negative by floatation (EM)
- 15.Apr Blood sample: (EDTA) Hematology/Chemistry/Serology results.
WBC:9.41 *10³/UL; HCT: 36.0%; BUN:13 MG/DL;
- 22.Apr CBC/Chem results: WBC: 9.41X10⁻³, Neutros-36%, Lymphs-16%,
Monos-44%, HCT-36%, Tprotein-7.7, BUN-13, creatinine-1.4, Gluc-84.
(KAB)
- 4.Jun Blood sample: (EDTA) Hematology/Chemistry/Serology results.
WBC:7.09 *10³/UL; HCT: 32.7%; BUN:14 MG/DL;
CBC/Chem results: WBC:7.09X10⁻³, Neutros-23%, Lymphs-24%, Monos-50%,
HCT-32.7%, tprotein-8.1, albumin-3.3, BUN-14, Creatinine-1.8. (KAB)
- 2.Nov PROBLEM: dermatitis - cutaneous (resolved)
tuberculin testing - trunk (onset)
Proc 1. Annual elephant trunk wash for Mycobacterial screening.
60 mls of sterile saline flushed into trunk, elephant blew into bag.
Retrieved fluid frozen for batched culture. Day 1 or 3. (KAB)
- 26.Nov Proc 1. Start daily blood draws for the next 7-10 days for
ovulation
detection. (MLL)

.....2000....

- 29.Jan Blood sample: (EDTA) Hematology/Chemistry/Serology results.
WBC:8.06 *10³/UL; HCT: 25.2%; BUN:12 MG/DL;
Proc 1. Vocal restraint.
Proc 2. Blood taken for routine CBC and chem - HMC. (MLL)
- 13.Feb Proc 1. Vocal restraint.

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.....2000....

- 13.Feb Proc 2. Blood taken for routine progesterone levels. (KAB)
- 20.Feb PROBLEM: tuberculin testing - trunk (resolved)
NVSL Mycobacterial cultures from annual trunk washes: All three samples are negative, no mycobacterial isolates made. (KAB)
- 25.Feb Proc 1. Exam. Full-thickness epidermal abrasion 2x5 cm on left quadriceps.
Proc 2. Apply Dermagen ointment BID or TID x 3 days for protection. (MLL)
- 4.Mar Proc 1. Visual exam. Abrasion no longer raw. Discontinue treatment. (MLL)
- 16.Mar Proc 1. Blood sample collected - serum. from ear vein for progesterone assays. (KAB)

.....2001....

- 25.Jan NVSL trunk wash results: No isolation made. (MLL)
- 5.Feb PROBLEM: VACCINATION
Blood sample: (EDTA) (9:20.0) Hematology/Chemistry/Serology results.
WBC:9.26 *10³/UL; HCT: 31.2%; BUN:14 MG/DL;
Proc 1. Blood sample collected - EDTA and serum. from ear vein for CBC/Chem/progesterone and research serum samples.
Proc 2. Vaccinated with 2.0 mls ~ 1X10⁻⁷ PFU of experimental VMC0 vaccine for vaccination research trial.
Plan; monitor for adverse reactions. (KAB)
- 6.Feb Proc 1. Visual exam, animal bright and alert, normal appetite. Keepers just noticed bilaterally symmetrical ventral belly folds and were concerned about edema. Palpates soft and normal, animal has gained ~ 300 pounds.
Assess: over conditioned
Plan: grain ration will be cut by 1/3 until further notice (KAB)
- 12.Feb Proc 1. Blood sample collected - serum. From ear vein for research serum samples. (KAB)
- 19.Feb Proc 1. Blood sample collected - serum. From ear vein for research serum samples. (MLL)
- 26.Feb Blood sample: (9:20.0)
Proc 1. Blood sample collected - serum. From right ear vein for research serum samples. (KAB)
- 5.Mar Blood sample: (EDTA) (9:10.0) Hematology/Chemistry/Serology results.
WBC:9.83 *10³/UL; HCT: 31.3%; BUN:11 MG/DL;
Proc 1. Blood sample collected - serum. From ear vein for research serum samples. and CBC/Chem (KAB)

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.....2001....

- 12.Mar Blood sample: (9:20.0)
Proc 1. Blood sample collected - serum. From ear 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) (9:30.0) Hematology/Chemistry/Serology results.
WBC:11.60 *10³/UL; HCT: 36.8%; BUN:11 MG/DL;
Proc 1. Blood for routine 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)
- 27.Apr PROBLEM: lameness - right rear limb (onset)
Proc 1. Visual exam. Keeper had thought animal was lame on left rear leg, but animal seems to be keeping weight off of the right. Keeps all four legs tucked up under body, as if keeping weight off of the back legs. No lameness obvious during locomotion.
Assess: possible soft tissue injury during time with male.
Plan: separate from male overnight. Recheck in morning. (MLL)
- 28.Apr Proc 1. Visual exam. Animal is still keeping legs tucked up underneath and is reluctant to walk.
Plan: keep separated from male.
RX: phenylbutazone 7 gms SID x 3 days. Recheck with Dr. Backues at that time. (MLL)
- 30.Apr Blood sample collected - serum. From ear vein for research serum samples. (KAB)
- 7.May Blood sample collected - serum. From ear vein for research serum samples. (KAB)
- 14.May Blood sample collected - serum. From ear vein for research serum samples. (KAB)
- 21.May Blood sample: (EDTA) Hematology/Chemistry/Serology results.
WBC:11.45 *10³/UL; HCT: 35.5%; BUN:13 MG/DL;
Hemolysis
Blood sample collected - serum. From ear vein for research serum samples.
and routine CBC/chem.
Note animal is on/off again lame on rear legs since being put with bull for breeding. two regimens of bute have helped temporarily, now seems inflammed again
Plan: begin hydrotherapy to right rear leg tomorrow in conjunction with phenylbutazone.
bute 7.0 grams PO q 24 hours X 5 days. (KAB)

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.....2001....

- 4.Jun Blood sample:
- 9.Jun PROBLEM: lameness - right rear limb (resolved)

- 9.Jul Blood sample: (8:05.0)
- 16.Jul Blood sample: (9:45.0)
- 30.Jul Blood sample:
Blood sample collected - serum. From ear vein for research serum samples. (KAB)

- 16.Aug Blood sample: (EDTA) Hematology/Chemistry/Serology results.
WBC:10.65 *10³/UL; HCT: 32.0%; BUN:10 MG/DL;
Blood sample collected - serum. From ear vein for research serum samples.
and routine CBC/Chem monitoring. (KAB)

- 14.Sep Proc 1. Voice restraint.
Proc 2. Right front space between toes #3 and #4 was puffy and soft to the touch, with the skin pale and almost lucent. Area was rinsed with Nolvasan. Trimming revealed a small hole through with 5 mls of clear colorless odorless fluid could be expressed.
Aerobic and anaerobic cultures submitted to HMC. Refractometer showed no protein (even though the fluid foamed like it had protein in it), and a SG of 1.003. In-house cytology of the scant amount of sediment revealed a small amount of epithelial cells, an amorphous background material, and crystal-like areas.
Assess: blister-like lesions.
Plan: use traditional foot care techniques until culture results are back.
HMC hematology results: WBC: 10,650; polys: 37%; bands: 17%; lymphs: 26% monos: 17%; eos: 3%; HCT: 32%; TP: 8.0 gm/dl; SAP: 71 u/l; gluc: 74 mg/dl; BUN: 10 mg/dl; CPK: 187 u/l. (MLL)
- 16.Sep Proc 1. Visual exam, swollen interdigital area between 3-4 nails, fluid filled area.
Assess: cuticle cysts
Plan: monitor and lance if not relieved (KAB)

- 13.Oct Blood sample: (EDTA) (8:40.0)
Proc 1. Blood for CBC/chem to HMC. (MLL)

- 2.Nov Blood sample collected - serum. From right leg vein for research serum samples. (MLL)
- 29.Nov Proc 1. Blood sample collected from left ear vein. (CLD)

- 6.Dec TB test via trunk wash. (CLD)

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.....2002....

- 18.Feb Proc 1. Blood sample collected from right ear for hormone levels.
- 18.Feb (ADF)
- 27.Feb NVSL annual Trunk wash mycobacterial isolation attempts are negative. (KAB)

- 6.Mar Keeper reports walking stiffly on left hind leg.
 - Proc 1. Visual exam. Walking stiff legged on left side
 - Proc 2. Brief palpation while targeting. No heat, pain or swelling palpable.

Assess: Soft tissue injury, given access overnight for first ti
in
days.

Plan: Monitor, NSAID.

Rx: Dispense Phenylbutazone 1 gram tablest #30, give 8 grams SI
for
3 days. (ADF) (ADF)
- 7.Mar Problem: Recheck.
 - Proc 1. Visual exam. Still limping. Acting agitated.
 - Proc 2. After 3 attempts and several time outs, blood sample collected from right ear for hormone levels.

Plan: Monitor. Try to increase time and manipulation of righ
ear
on separate occassions with positive reinforcem
unwanted behaviors. (ADF) (GLD)

- 30.Jul Proc 1. Reproductive ultrasound exam performed by Dr. Dennis Schmitt for AZA/SSP survey. See his comments below.
 - Vagina: normal mucuosal epithelium 1 cm
 - Uterus: normal uterus with porminent endometrium
 - Left ovary: Not examined, Right ovary: 2X3cm, normal,
 - Overall: satisfactory potential breeding candidate (KAB)

- 21.Oct Proc 1. Blood obtained via ear vein for hormonal assay. Serum frozen for future testing.
 - Assess: Healthy animal. (PHJ)

.....2003....

- 4.Feb NVSL trunk wash Mycobacteria isolation results: No isolation made.
- 4.Feb (MLL)
- 25.Feb PROBLEM: VACCINATION TETANUS TOXOID
 - Proc 1. Vaccinate: 1ml Tetanus toxoid i/m left triceps, Professional

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.....2003....

- 25.Feb Biological Co. 138D Exp 11Jul03. (PHJ)
- 15.Apr PROBLEM: VACCINATION WNV
Proc 1. Vaccination: 1ml WNV IM right triceps (Ft. Dodge, 1666126A, 15Apr04). (VEM)
- 8.May PROBLEM: VACCINATION WNV
Proc 1. Vaccination: Keeper stationed elephant for WNV #2 of 2, 1ml IM rt thigh (Ft. Dodge, 1666122A, 17May04). (VEM)
- 16.Jul PROBLEM: VACCINATION IMRAB-3 - left front limb
Proc 1: Vaccination: Keeper stationed elephant for Rabies, 2ml IM Left front tricep (IMRAB3, Merial, 12456A, 05Mar04). (TJZ)
- 11.Dec Proc 1: Visualized annual trunk wash for tuberculosis testing. Repeat for next 2 days. (TJZ)

.....2004....

- 6.Feb Proc 1. Exam. Left hip has a discolored area of skin 10x15 cm. Area has a linear opening 3 cm. long on its dorsal side. Area is warm and painful to the touch.
Assess: abcess or localized cellulitis.
Plan: warm hydrotherapy SID followed by chlorhexidine flush.
Reevaluate in one week. (MLL)
- 9.Feb Proc.1 Examination- keeper noted bilateral tongue lesions on the lateral aspect of the tongue. The right ulceration seems worse than the right.
Laceration on left hip does not have any pus or fluid in it.
Assessment- tongue lesions likely traumatic
Plan-re-evaluate in 48-72 hours. (AGB)
- 12.Feb Tongue lesions are improving. Left side is barely noticeable, right is improving. Defect on left hip appears unchanged.
Plan- Flush wound on hip area with chlorhexidene, continue hydrotherapy. Re-assess in 4 days. (AGB)
- 24.Feb NVSL trunk wash Mycobacterial isolation results: No isolation made.
- 24.Feb (MLL)
- 9.Mar Proc 1: Standing in enclosure. WNV vaccination 1ml IM left front leg (WNV Innovator, Ft. Dodge, 1666135A, 29July05) (TJZ)
- 10.Mar PROBLEM: VACCINATION WNV
- 26.Mar Proc 1: Visual exam. Keepers reported small amount of blood (mucoïd) at beginning of urination this AM. Small amount of blood on floor when visualized. Vulvar exam WNL. Animal acting normally,

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TULSA ZOOLOGICAL PARK

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Scientific Name: ELEPHAS MAXIMUS (no subsp)           Accession #: 12181
Common Name: ASIATIC ELEPHANT                           Female
Name: Sooky                                             Birth: 17.Jul.1972 (Estimated)
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.....2004....

- 26.Mar eating well, did not strain during urination.
Assess: R/O Urinary (UTI vs Renal) vs Genital vs pigments in diet or other
Plan: Monitor, collect urine for analysis. (TJZ)
- 27.Mar Proc 1: UA results (free catch): Urobilinogen - Normal, Glucose - Negative, Ketone - Negative, Bilirubin - Negative, Protein - Negative, Nitrite - Negative, Leukocytes - 1+, Blood - Negative, pH - 8, SpG - (stick 1.010, refractometer 1.015). Microscopic analysis: No casts, blood or bacteria seen.
Assess: normal UA , no evidence of hematuria (TJZ)
- 26.Oct Proc 1. Blood drawn from left ear vein. Serum banked and logged for research project. (JS)
- 10.Dec NVSL mycobacterium culture results: No isolation made. (MLL)

.....2005....

- 15.Feb Proc 1. Blood drawn from ear vein (vessel not specified, keeper procedure).
Serum banked and logged. (JS)
- 21.Feb PROBLEM: VACCINATION WNV
Proc 1. Vaccination: WNV, IM, left hip, Fort Dodge, serial # 1666140A, exp June 18, 2006.
Plan: vaccinate annually. (JS)
- 22.Feb Proc 1. Blood drawn from left ear vein. Serum banked and logged for research project. (JS)
- 1.Mar Proc 1. Blood drawn from left ear vein. Serum banked and logged for research project. (KAB)
- 3.Mar Proc 1. Exam; 6 x 8 cm purulent lesion on left flank, cranial and proximal to the knee.
Plan: keepers instructed to clean with dilute chlorhexidine. (JS)
- 29.Mar Blood sample collected - serum logged and banked (JS)
- 30.May PROBLEM: localized swelling - LYMPH NODE (onset)
Keepers note in increase in size of mass in prescapular region
Proc 1. Exam and palpation: mass in right prescapular region feels firm and possibly larger than previously noted
Assess: differentials include; fat, edema, lymph node, abscess, cyst, normal anatomy
Plan: CBC/Chemistry (JS)
- 31.May Blood sample: (10:23.0) Chemistry results.
BUN:11 MG/DL;

Medical History Report - Summary for Individual Specimen
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.....2005....

- 1.Jun Blood sample: (EDTA) (10:00.0) Hematology results.
WBC:13.80 *10³/UL; HCT: 30.6%;
Chemistry results wnl; for details see test results menu. (JS)
- 2.Jun Hematology results; Chemistry wnl, CBC; hematocrit at low end of
normal 30.6 % (normal 37% +/- 6).
Assess; likely lab error
Plan: in house PCV/TP (JS)
- 9.Jun Proc 1. Recheck of mass; no change, no fluid wave, no increase in
size. Areas are not painful, etc
Proc 2. Ultrasound of prescapular mass/lnode; architecture
consistent with connective tissue of lymph node. Ultrasound probe
placed on Gunda in same area; tissue architecture the same as
Sooky's
Proc 3. Fine needle aspirate of suspected lymph node no cells
recovered.
Assess: possibly normal anatomy, enlarged prescapular lymph nodes.
Plan: monitor, repeat PCV/TS. (JS)
- 21.Jun PCV 37%, TS 7.2 g/dl (JS)
- 27.Jun Blood sample: (EDTA) Hematology/Chemistry/Serology results.
WBC:10.50 *10³/UL; HCT: 32.7%; BUN:12 MG/DL;
Proc 1. blood drawn from left ear vein. submitted for
CBC/Chemistry/fibrinogen to VPL (JS)
- 30.Jun Proc 1. recheck of "masses" in clavicular region; decrease in size
of both masses
Assess: static
Plan: monitor (JS)
- 1.Jul PROBLEM: localized swelling - LYMPH NODE (resolved)
- 7.Nov Keepers note and opened cuticular cyst on left rear foot.
Should require no further treatment
Plan; Monitor (KAB)