

ELEPHANT PROFILE FORM

Scientific Name Loxodonta africana
Common Name African Elephant House Name Mailika
Acquisition Date 1989 Sex Female Birth Date 1987
Birth Place Zimbabwe Weight Actual/estimate 4,900

Transaction History:

Date	Type	From	To
1988	capture	Zimbabwe	Ferndale
1989	transfer	Ferndale	Redwood (Marine World)

Recurring Medical Problem and Current Physical Condition:

Allergies, Good Physical Condition

Socialization, Temperament and Behavior History:

Gets along with others but pushy around food. Juvenile still working on place in herd. Excitable and Reactionary. No aggression shown towards staff.

Voice and Ankus Commands, and Chaining Protocol used with this elephant:

This elephant is conditioned to: give rides do shows walks transport

Understands both commands used in free contact management. Has no problem being restraint by chaining.

Types of Reinforcement Rewards or Discipline:

What rewards or discipline works best with this elephant?

Food, verbal and tactile reinforcement applied through Operant Conditioning.
Best discipline is a well defined structure

Breeding Potential:

Poor Good Excellent Explain why.

Young animal may have problems with allergies.

Comments and Suggestions:

Handling firm but patient and consistent. , can be reactionary if surprised or confused.
Motivated well with positive reinforcement.



Date

Observation Notes

Treatment Administered

ELEPHANT (common name)

Malaika #2009

6/7/2006	TOOK BLOOD: Large animal profile sent to Idexx. In house CBC and Chem. Sed Rate 58. Banked extra serum -KS	Continue weekly Antigen injections SQ for allergies
6/10/2006	Doing well on dexamethasone.	
6/14/2006	Sed Rate 46.	
6/21/2006	TOOK BLOOD: Sed rate = 58	
6/23/2006	Doing well on EOD dexamethasone. Will try to begin decreasing dosage.	Begin 200 mg EOD X 10-14 days then reevaluate (80 mg dexamethasone NOT 200 mg EOD) DP
6/28/2006	Sed Rate 56. Continues to do OK on EOD Dex. Will try to decrease dosage again in 1 week.	Continue 80 mg dexamethasone EOD for 1 more week and then try to go down to 60 mg EOD.
7/3/2006	Continues to be stable on EOD dex.	Continue 80 mg EOD for 2 more treatments and then try 60 mg EOD. Continue hydroxyzine.
7/5/2006	TOOK BLOOD: Large Animal Profile sent to Idexx. In house CBC and Sed Rate. Sed Rate = 55 - CO	Continue weekly Antigen injections SQ for allergies
7/11/2006	Doing well.	Dexamethasone decreased to 60 mg EOD
7/12/2006	TOOK BLOOD: for Sed Rate= 54.-KS	
7/17/2006	Trainers noted scrapes on back. No new hives. Area where previous hives were is still thickened but not warm or inflamed. DP	Observe scrapes and continue other meds.
7/19/2006	TOOK BLOOD: for Sed Rate = 54. In house CBC. -KS. Scrapes on back healing. Since she is stable will decrease her dexamethasone dose again tomorrow.	
7/20/2006	Decrease dexamethasone dose starting today. And continue to monitor.	Dexamethasone 40mg EOD
7/24/2006	Stable on lowered dexamethasone dosage.	PLAN: will try to decrease dosage again after 1 more week.

<u>Date</u>	<u>Observation Notes</u>	<u>Treatment Administered</u>
Malaika #2009		
7/26/2006	TOOK BLOOD: for Sed Rate= 54. In house CBC. -KS	
7/31/2006	Mild increase in respiratory sounds today. All else stable.	Continue meds
8/2/2006	TOOK BLOOD: Large animal profile sent to Idexx. In house CBC and Chemistries. Sed Rate= 52. -KS ACCURATE WEIGHT 4660 #. Doing well.	Continue weekly Antigen injections SQ for allergies.
8/3/2006	TOOK RADIOGRAPHS: 4 views of front left toes. -KS	
8/15/2006	ROUTINE FECAL - D & F - Negative. URINALYSIS - Milky yellow, + protein, pH 8, Specific Gravity 1.014. Microscopic exam - Lots of debris. There were random areas with cocci bacteria and some budding yeast. Possibly due to a fair amount of contamination in the sample- CO Was spitting food in the AM, was day 2 of lowered steroid dose so gave injectable steroids and will return to higher oral dose every day for 2-3 days then try to wean back to EOD. -RT	40mg dexamethasone PO, was still spitting food after oral dose and having trouble swallowing even favorite foods. Gave additional 80mg dexamethasone IM once only.
8/16/2006	Trainer found a small amount of food in the yard this AM, but overall she is much improved from yesterday. Responded to oral medications and had no difficulty breathing or swallowing today. -RT TOOK BLOOD: Large animal profile sent to Idexx. In house CBC and Chemistries. In house PCV= 35. In house TP= 7.8. Sed Rate 58. -KS	40mg dexamethasone SID for 3 days and then reassess.
8/17/2006	Stable today, no spitting food or respiratory difficulty. -RT	
8/18/2006	Has been very stable last few days. Okay to switch to every other day steroids and taper dose after 5 treatments. Monitor carefully. -RT	40mg dexamethasone PO EOD for 5 treatments, then taper to 30mg PO EOD and reassess.
8/19/2006	First day of EOD dex, doing well.	
8/22/2006	Stable on 40mg dex EOD.	
8/28/2006	Trainers noticed she was dropping some food in afternoon. Discussed trying some sort of aerosolized therapy. She is now on 40 mg dex EOD> Today was an off day.	Give 20 mg dexamethasone PM and then 40 mg tomorrow.

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Malaika #2009		
8/29/2006	Improved today. Not spitting food. Practiced passing a red rubber tube down past tongue and inserting water to see if it might be a way to deliver topical steroids to pharyngeal area. Will attempt a treatment in a few days.	28 mg dexamethasone EOD beginning today.
8/30/2006	Doing well today, eating and not having any respiratory difficulty.	continue 28mg dex EOD.
9/2/2006	Has been stable last few days on 28mg dex EOD. Breathing well and no difficulty swallowing food. Continue to monitor. -RT	28mg dexamethasone EOD
9/4/2006	Was spitting food 2x this AM, trainer gave mineral oil and she was normal by early afternoon. Got pred this AM. Otherwise doing well. Continue to observe. -RT	
9/6/2006	ACCURATE WEIGHT: 4790#	Continue weekly Antigen injections SQ for allergies.
9/8/2006	Doing well today	
9/13/2006	TOOK BLOOD: Large animal profile sent to Idexx. In house CBC. Sed Rate= 54.	
9/17/2006	Decreased steroid dose yesterday with no apparent complications. -RT	20mg dexamethasone PO EOD
9/19/2006	Stable on lower dose of dexamethasone, however staff worked on yard today and this may disperse potential allergens and cause a flare up. Monitor carefully. -RT	20mg dexamethasone EOD
10/4/2006	TOOK BLOOD: Large animal profile sent to Idexx. In house CBC. Sed Rate= 62. Sent extra serum to Cornell for WNV titer.	Continue weekly Antigen injections SQ for allergies.
10/11/2006	ROUTINE VACCINATION (WNV, KV)	1 ml West Nile- Innovator IM via hand injection by trainer. Fort Dodge #1666145A. Exp 21 Sep 07.
10/25/2006	Knocked completely to ground by Bertie Mae and then tusked by Tava. Very superficial abrasions on dorsal back in 2 places. Hindlegs were trembling after incident and trainers hosed her off and looked her over. Eating normally.	Bertie separated out of yard. Ibuprofen given PM (7 mg/kg) Recheck 1 day. Watch skin lesions for any signs of infection. Discontinue Ibuprofen if she is walking OK tomorrow otherwise continue for 2-3 days BID.

Date	Observation Notes	Treatment Administered
Malaika #2009		
10/26/2006	Was spitting out food today. Increased steroids to control likely hypersensitivity reaction. Wounds from yesterday are static and she did not appear overtly painful or stiff. PLAN give additional 16mg dexamethasone PO today and give 20mg tomorrow and reassess.	32 mg dexamethasone PO
10/27/2006	Had some spit out feed in the yard this morning, but has been stable all day and breathing well, eating and drinking normally. Will decrease to 16mg dex tomorrow if she continues to be stable. -RT	20mg dexamethasone PO today
10/28/2006	Keepers report that she is doing fine. Have not heard anything and she has not spit today.-AM	
10/30/2006	Trainers did not give any dex yesterday by mistake and today she began dropping food in morning. Was given 16 mg dex in early AM and a second 16 mg given late morning to try to keep her from needing a larger dose. New hay is dustier than old hay and that is probably a lot of problem. Activity level is good and she is slightly bloated per trainer.	32 mg dexamethasone PO(and all other meds) PLAN: 32 mg SID 10/31 then try to decrease to 20 mg SID X 3-5 days then may try EOD again.
10/31/2006	Dropping some food overnight but other wise doing well. PLAN- give higher dose of steroids today and try to decrease in 1-2 days. -RT	32mg dexamethasone today and tomorrow and try to decrease to 20mg in 2 days.
11/1/2006	TOOK BLOOD: Large animal profile sent to Idexx. In house CBC and Chemistries.	Continue weekly Antigen injections SQ for allergies.
11/4/2006	Spit up food this AM, but not overnight. Supervisor gave dexamethasone (currently on 20mg q24h). By 10:30 AM she had improved. Rechecked in the PM, she had no appetite throughout the day.	Gave 60mg. Dexamethasone SP IM in PM.
11/5/2006	Doing better this morning. BAR.	
11/6/2006	Dropping food AM and having trouble swallowing. Trainers gave her AM dex (20 MG) but no improvement. She became angry early in day at not being able to swallow well. PM: gave Pulmicort by spraying into back of throat, she did eat afterward and was not seen spitting food at trainers night feed. Will keep in a different part of yard tonight to see if that helps. Still working in barn so unable to keep inside.	11 ml(1.375 mg) of budesonide given orally. Observe closely and reevaluate daily. Continue other meds.
11/7/2006	Spitting food this AM. Otherwise acting normal	20 mg dexameth PO AM with 40 mg IM. Continue to observe daily.

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Malaika #2009		
11/8/2006	Was spitting out food again this morning, eating finer particles and spitting stems. Ate a flake of alfalfa without spitting, but during hygiene trainer appreciated harsh breathing and once up was pulling her head as if difficult to swallow. Opted to give injectable steroid this afternoon and increase oral dose tomorrow morning. Discussed options for getting some better hay for her until next shipment arrives. Recheck in 1 day. -RT TOOK BLOOD: for in house CBC and Sed Rate= 58.	20mg Dexamethasone PO in the AM. 60mg dex IM in the early afternoon. Give 40mg dex PO tomorrow AM and reassess.
11/9/2006	Did well today. Ate well and did not spit feed. Continue on 40mg dex PO SID and recheck in 1 day. -RT	40mg dexamethasone PO SID
11/10/2006	Staff observed some feed spit out in the yard this morning, but she ate well and did not spit throughout the day. Breathing normally. Seems stable today. Supposed to be cold overnight and barn has not been finished so they are installing heaters outside tonight. Recheck in 1 day. -RT	40mg dexamethasone PO SID UFN.
11/11/2006	No obvious complications related to colder weather overnight. Static today. Trainers report that she will spit feed first thing in the morning, but then is fine after her morning dose of steroids. Is then normal for the remainder of the day and at night check. PLAN- will continue increased dose of steroids until the barn construction is complete, recheck in 1-2 days. -RT	40mg dexamethasone SID UFN.
11/13/2006	Still spitting feed first thing in the morning. Will try to split steroid dose tomorrow and see if that has any effect. Recheck in 1 day. -RT	20mg dexamethasone PO BID
11/14/2006	Got oral steroids this morning, but was still having trouble swallowing so followed with an injection this afternoon. Discussed with trainers, and plan is to convert back to prednisone and give injections as needed over the next few days to see if we see a change in her condition as we cannot control environmental factors until barn is complete and hay quality is poor throughout the region. Recheck in 1 day.	40mg dexamethasone PO in the am, 80mg dexamethasone IM at 3pm. Tomorrow begin 1G prednisone PO BID and give dexamethasone injections PRN.
11/15/2006	Trainers report that she was spitting food last night and this AM. Improved as day went on and no spitting and normal swallowing by PM.	Begin 1 gm Prednisone BID (change to prednisolone if pharmacy can get it)

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Malaika #2009		
11/16/2006	Swallowing with effort this morning, started spitting food late morning. Eyes were dull, half open, seemed lethargic. Will give injectable steroid today. Discussed giving oral steroid via red rubber tube or some kind of lozenge that she could suck on for local anti-inflammatory effects. Will discuss with compounding pharmacy to see what options are possible. Continue to monitor closely. -RT Addendum- she perked up and ate better after the steroid injection.	1 gram prednisone PO BID, 80mg dexamethasone IM at 12pm.
11/17/2006	Eating well this morning, no spitting, breathing is normal. Continue oral prednisone and monitor carefully. -RT TOOK BLOOD: Large animal profile sent to Idexx. In house CBC and Chemistries. FECAL D & F: Negative. Sent FECAL to Idexx for fecal occult blood. URINALYSIS: milky yellow, cloudy, ++ protein, + bilirubin, pH 8.0, Sp Grav greater than 1.045. Microscopic exam: few epithelial cells seen.	Recheck UA next week
11/18/2006	Eating well, no spitting & breathing normally.	
11/20/2006	Did spit some hay during day but able to swallow browse normally. Breathing normal. Barn nearly completed.	Continue 1 Gm Pred BID (switch to prednisolone when it arrives) Try to taper dose after stable.
11/21/2006	Is doing well on the pred. Did not spit up over night-AM	
11/22/2006	Spit hay one time this morning, otherwise eating, swallowing, breathing normally. Behavior is normal. Recheck in 1 day. -RT	switch to prednisolone tablets 1 gram PO BID, continue hydroxyzine as prescribed
12/2/2006	Has some minor abrasions behind her ears as if she has been rubbing on the bars. No hives, breathing well and eating normally. Staff to apply SSD to abrasions and monitor. Recheck in 2-3 days. -RT	stable on 1Gram prednisolone BID
12/6/2006	TOOK BLOOD: large animal profile sent to Idexx, in-house CBC chemistries.	Continue weekly Antigen injections for allergies.
12/7/2006	TOOK RADIOGRAPHS: 4 views of front right toes.	
12/13/2006	TOOK RADIOGRAPHS: 4 views of left rear toes.	
12/20/2006	TOOK RADIOGRAPHS: 4 views of right rear toes.	

<u>Date</u>	<u>Observation Notes</u>	<u>Treatment Administered</u>
Malaika #2009		
12/29/2006	TOOK RADIOGRAPHS: views of both right and left front carpals.	
1/3/2007	TOOK BLOOD: large animal profile sent to Idexx. Sed Rate= 64. CULTURES from left and right side of face also sent Idexx. Bilateral temporal gland swelling for a week or more. Glands do not feel warm (maybe slightly) but are swollen especially the left side. Trainer was able to express some thicker looking discharge from left side this AM but unable to do PM. Unable to express anything from right side. PLAN: Wait on culture, check progesterone, consider, antibiotics.	Continue weekly Antigen injections for allergies.
1/4/2007	TOOK RADIOGRAPHS: views of both right and left rear carpals. Temporal glands the same. WBC from yesterday 18,000 which is mildly elevated for her.	Wash temporal gland are daily and try to express glands. Discussed hot packing areas.
1/5/2007	TOOK BLOOD: Progesterone sent to Idexx.	
1/10/2007	TOOK BLOOD: sent to Idexx for CBC Temporal glands still swollen. Discussed decreasing prednisolone dosage .	Observe and consider antibx if glands do not improve.
1/13/2007	Temporal glands still slightly swollen, but improving. No discharge obtained last few days, no increase in temperature appreciated. Eating well (hay shipment this week, transitioned and is now on 100% new hay) and no respiratory difficulty noted. Getting 500mg pred in the AM and 1000mg in the PM for 2 days and no adverse effects noted. Continue to monitor. -RT	
1/15/2007	Elephants were in rehearsal for media event today and Malaika had normal consistency but larger amount of temporal secretions when compared to the other elephants (most of others were asian). Both temporal glands still mildly swollen	
1/22/2007	ANNUAL TB TESTING Day #1. Infused 60cc sterile saline into trunk and collected at least 20 cc for submission to Solano County Health Dept.	
1/23/2007	ANNUAL TB TESTING Day #2. Infused 60cc sterile saline into trunk and collected at least 20 cc for submission to Solano County Health Dept.	
1/24/2007	ANNUAL TB TESTING Day #3. Infused 60cc sterile saline into trunk and collected at least 20 cc for submission to Solano County Health Dept.	Continue weekly Antigen injection for allergies.

<u>Date</u>	<u>Observation Notes</u>	<u>Treatment Administered</u>
Malaika #2009		
2/7/2007	TOOK BLOOD: Large animal profile sent to Idexx. Banked extra serum.	Continue weekly Antigen injections for allergies.
2/15/2007	Has been wheezing some last 2 days otherwise doing well.	Now on 500 mg prednisolone AM and 1 Gm PM and Hydroxazine
2/26/2007	Doing well on medications	
3/2/2007	ACCURATE WEIGHT: 4765#	
3/5/2007	ROUTINE FECAL D & F: Negative. URINALYSIS: milky yellow, cloudy, ++ protein, pH 8.0, Sp Grav greater than 1.045. Microscopic exam: casts (granular?) 0-1/HPF, epithelial cells 0-1/HPF, some cocci shaped bacteria seen.	
3/6/2007	ROUTINE VACCINATION: (WNV, KV)	1 ml West Nile- Innovator IM via hand injection by trainer. Fort Dodge #1666146B, Exp 08 Nov 07.
3/7/2007	TOOK BLOOD: Large animal profile sent to Idexx. Banked extra serum.	Continue weekly Antigen injections for allergies.
3/10/2007		decrease prednisolone to 1 gram PO SID, continue hydroxazine 1 gram PO BID
3/14/2007	Stable since decreased prednisolone dosage to 1 G SID	
3/24/2007	Continues to do well on prednisolone. Keepers are offering her a variety of cuttings and she has not had any allergic episodes.	Now on 1 gm prednisolone daily and hydroxazine BID
3/26/2007	Was apparently pinned against fence late last night by another elephant (probably Taj) Dorsal hip area (bilateral) has multiple superficial wounds and her L H taral area is warm and stiff. She ate a small amount AM but nothing in the PM. Overall very stiff and uncomfortable	Trainers gave her Ibuprofen early AM. She is still on 500 mg prednisolone BID. Trainers hydrotherapied leg and hips and applied Silvadene on hip lesions. PM gave 2.15 Gm Ketoprofen PO (half of Taj ketoprofen capsule) Walked her on back road a few times.
3/27/2007	Doing better today. Hip area not as swollen. She seemed stiff in the afternoon. Trainers will continue to treat wounds/	Clean wounds daily and apply Silvadene cream on hip lesions. Gave 1.5 Gm Ketoprofen PO in pm.

<u>Date</u>	<u>Observation Notes</u>	<u>Treatment Administered</u>
Malaika #2009		
3/28/2007	Still stiff in the AM. Trainers gave 1/2 of Taj's ketoprofen pill in the AM. She is slightly swollen over her hips. Would like to d/c analgesics tomorrow but continue hydrotherapy if indicated. Recheck in 1 day. -RT	got 2 Grams ketoprofen this AM.
3/30/2007	TOOK BLOOD: Large animal profile and progesterone sent to Idexx. URINALYSIS: sent to Idexx for Urine Cortisol:Creatinine Ratio.	
4/4/2007	TOOK BLOOD: Large Animal profile sent to Idexx. In hs CBC. Banked extra blood and serum.	
4/6/2007	Still stiff, last bloodwork shows CPK still elevated but much improved. Ear not folding over today like it has been for last 2 days	Continue 2.1 gm Ketoprofen.
4/9/2007	L ear is flipped again today and beginning to make a crease in pinna. Overall she is slowly improving but still has a hard time getting up after bath and gets stiff.	
4/11/2007	TOOK BLOOD: Large animal profile sent to Idexx. In hs CBC and chemistries, made slides.	
4/16/2007	Was beaten up by Bertie Mae last night, re-opened wounds over her hips (seroma/hematoma persists on left hip) and has some new abrasions on her left elbow, distal leg, and ventral abdomen. Left ear has several abrasions and is very irritated. Concerned with sun exposure and drying of skin over injuries. PLAN: clean all wounds with chlorhexidine solution and apply silver sulfadiazine cream topically. Apply zinc oxide to protect new skin from sunburn. Leave inside today and possibly tomorrow. Continue keptoprofen orally for analgesia. Get full blood panel on Wed. Monitor wounds carefully. Recheck in 1 day.	Wound care as described, and continue analgesics as directed.
4/17/2007	Trainer reports that wounds appear improved after cleansing and topical treatment yesterday. It seems that much of the left posterior surface of the ear may be sunburn rather than abrasion. She is maintaining that ear in a normal position more today, although still flops over periodically. PLAN: continue oral analgesics and protect wounds with sunscreen or zinc oxide, walk her regularly to avoid stiffness and GI stasis. Recheck in 1 day.	as directed
4/18/2007	TOOK BLOOD: Large animal profile sent to Idexx. Sed Rate= 56.	

Date

Observation Notes

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Malaika #2009

4/19/2007 Skin on posterior ear is still irritated, but improving daily. Still has ear flopped over sporadically, but less than a few days ago. Wounds on back are healing. Appetite is good. Eyes are droopy, but she is responsive to trainers and interacts with them and other elephants. Swelling/hematoma over left hip is improved. Ambulation appears more comfortable. Assessment: she is improving, but still requires wound care/maintenance and want to protect new skin from potential sunburn. PLAN: continue wound care and provide sun protection, analgesics, walk frequently to avoid stiffness etc. Recheck in 1 day.

continue as directed