MARINE MAMMAL STRANDING REPORT - LEVEL A DATA

| FIELD #: | NMFS REGIONAL #: | :(NMFS | NATIONAL DATABASE#:(NMFS USE) | | | | | | |
|---|--|----------------|---|--|--|--|--|--|--|
| COMMON NAME: | GENU\$ | , | SPECIES: | | | | | | |
| | | | liation: | | | | | | |
| · | | | Phone: | | | | | | |
| | | | | | | | | | |
| Stranding Agreement or Authority: _ | | | - | | | | | | |
| port Type: ☐ Stranded ☐ Live entan | ngled, in-water CONFIDENC | CE CODE (Check | ONE): ☐ Unconfirmed Public Report ☐ Confirmed Public Report ☐ Confirmed by Netwo | | | | | | |
| INITIAL OBSERVATION | ☐ Same Information for Level | A Examination | LEVEL A EXAMINATION □ Restrand Examined? □ YES □ NO | | | | | | |
| DATE: Year:Month: | Day: | | DATE: Year:Month:Day: | | | | | | |
| First Observed: ☐ OnBeach/Land/Id | e □ Floating □ Swimming | ☐ Anchored | First Examined: ☐ OnBeach/Land/Ice ☐ Floating ☐ Swimming ☐ Anchored | | | | | | |
| LOCATION: State: County: | City: | | LOCATION: State: County: City: | | | | | | |
| Body of Water: Locality Details: | | | Body of Water: Locality Details: | | | | | | |
| Locality Details: Lat (DD): Long (DD): | N W | _ | Locality Details: Lat (DD): Long (DD): W | | | | | | |
| □ Actual □ Estimated | vv | | □ Actual □ Estimated | | | | | | |
| How Determined (sheet ONE) | | | | | | | | | |
| How Determined: (check ONE) ☐ GPS ☐ Map ☐ Internet/Softw | ware □Other | | How Determined: (check ONE) ☐ GPS ☐ Map ☐ Internet/Software ☐ Other | | | | | | |
| CONDITION AT INITIAL OBSERVA | | | , | | | | | | |
| □ 1. Alive | ☐ 4. Advanced Decomposi | ition | CONDITION AT EXAMINATION (Check ONE) □ 1. Alive □ 4. Advanced Decomposition | | | | | | |
| 2. Fresh Dead3. Moderate Decomposition | □ 5. Mummified/Skeletal□ 6. Condition Unknown | | □ 2. Fresh Dead □ 5. Mummified/Skeletal | | | | | | |
| 3. Moderate Decomposition | ☐ 6. Condition Onknown | | □ 3. Moderate Decomposition | | | | | | |
| LIVE ANIMAL INFORMATION | | | DEAD ANIMAL INFORMATION | | | | | | |
| INITIAL LIVE ANIMAL DISPOSITIO | N (Check one or more) | | CARCASS STATUS (Check one or more) | | | | | | |
| □ 1. Left at Site | ☐ 5. Died at Site | | ☐ 1. Frozen for Later Examination/Necropsy Pending | | | | | | |
| □ 2. Immediate Release at Site | ☐ 6. Died during Transp | oort | □ 2. Left at Site □ 5. Landfill □ 8. Towed: | | | | | | |
| 3. Relocated and Released4. Disentangled | 7. Euthanized8. Transferred to Reh | abilitation: | LatLong □ 3. Buried □ 6. Incinerated □ 9. Sunk: LatLong | | | | | | |
| □ a. Partially | | | ☐ 4 Rendered ☐ 7 Composted ☐ 10 Unknown/Other | | | | | | |
| □ b. Completely | Date: Year:Month: Facility: | Day: | | | | | | | |
| □ 9. Other: | • | | DEAD ANIMAL EXAM □ YES □ NO □ Photos Only □ External Exam □ Partial Internal Exam □ Complete Internal Exa | | | | | | |
| | | | ☐ Carcass Fresh ☐ Carcass Frozen/Thawed | | | | | | |
| CONDITION/DETERMINATION (Che | eck one or more) 7. Location Hazar | | | | | | | | |
| □ 1. Sick □ 2. Injured | 7. Location Hazar | | CARCASS CODE AT EXAM □ Code 2 □ Code 3 □ Code 4 | | | | | | |
| ☐ 3. Out of Habitat | □ b. To public | | EXAMINED BY: Date: Year: Month: Day: | | | | | | |
| ☐ 4. Deemed Releasable | ☐ 8. Unknown/CE | BD | Date: Year:Month:Day: | | | | | | |
| ☐ 5. Abandoned/Orphaned | □ 9. No Rehabilita | ation Options | | | | | | | |
| ☐ 6. Inaccessible | ☐ 10. Other: | | PHOTOS/VIDEOS TAKEN: □ YES □ NO Photo/Video Disposition: | | | | | | |
| MORPHOLOGICAL INFORMAT | TION | OCCURRE | NCE DETAILS | | | | | | |
| | | | ine Mammal Human Interaction Report completed? ☐ YES ☐ NO | | | | | | |
| SEX (Check ONE) ESTIMATED 1. Male 1. Adult | D AGE CLASS (Check ONE) 4. Pup/Calf | | | | | | | | |
| ☐ 2. Female ☐ 2. Subadi | · | | Human Interaction: ☐ YES ☐ NO ☐ Could Not Be Determined (CBD) | | | | | | |
| ☐ 3. Unknown ☐ 3. Yearlin | ng | Evidence of: | Vessel Interaction □ YES □ NO □ CBD Shot □ YES □ NO □ CBD | | | | | | |
| | | | 3. Fishery Interaction □ YES □ NO □ CBD | | | | | | |
| ☐ Whole Animal ☐ Partial Anima | al | | 4. Entangled □ YES □ NO □ CBD | | | | | | |
| Straight Length: | cm □ in | | 5. Ingestion ☐ GEAR ☐ DEBRIS ☐ NO ☐ CBD | | | | | | |
| \square Actual \square Estimated \square Not Meas | ured | | 6. Other Human Interaction: | | | | | | |
| Weight: □ kg | n □lb | If VES, what w | | | | | | | |
| □ Actual □ Estimated □ Not Weighod | | | ES, what was the likelihood that the human interaction contributed to the stranding event? Uncertain (CBD) □ Improbable □ Suspect □ Probable | | | | | | |
| · · | | - Unicertain (| (CBD) □ Improbable □ Suspect □ Probable | | | | | | |
| SAMPLES COLLECTED (Check one ☐ 1. Histology ☐ 2. Other Diagno | , | Gear/HI Item | s Collected? YES NO Gear Disposition: | | | | | | |
| ☐ 4. Skeletal ☐ 5. Other | | | gs Upon Level A: | | | | | | |
| PARTS TRACKING (Check one or | | | e one or more: 1. Illness 2. Injury 3. Pregnant 4. Other: | | | | | | |
| ☐ 1. Scientific Collection ☐ 2. E | • | | ned (Check one or more): Photos Only External Exam Partial Internal Exam Internal Exam (Necropsy) Other: | | | | | | |
| □ 3. Other: | | | | | | | | | |

| GROUP EVENT (NMFS Use) GE# | | | | | | | | | | |
|--|----------|-----------|-----------------|-----------------|---------------|-----------------|-----------------------------|-------------------|---------------|----------------------|
| Group Event: ☐ YES ☐ NO | | | | | | | | | | |
| If Yes, Type: ☐ Cow/Calf Pair ☐ Mass Stranding | | # An | imals: | | | stimated | | | | |
| TAG DATA | | | | ID# | Color | Type | Placement* | Applied | Present | Removed |
| Tags Were: | | | | | | | (Circle ONE) | | | |
| Present at Time of Stranding (Pre-existing): | | VES | □ NO | | | | D DF L R | | | |
| Applied during Stranding Response/Release: | | | □ NO | | | | LF LR RF RR V | | | |
| Applied during Rehabilitation/Release: | | | □ NO | | | | D DF L R | | | |
| Absent but Suspect Prior Tag: | | | □ NO | | | | LF LR RF RR V | | | |
| Absolit but outpoot 1 not rag. | | 120 | _ NO | | | | | | | |
| | | | | | | | D DF L R | | | |
| | | | | | | | LF LR RF RR V | | | |
| | * D= Dor | sal· DF- | - Dorsal Fin | l = l eft l ate | ral Body R- F | Right Lateral F | Body LF= Left Front; LR= Le | oft Rear: RF= Ric | ht Front: RR= | Right Rear: V= Ventr |
| | D- 001 | oui, Di - | - D010ai 1 iii, | , L= Lon Late | | | | | | |
| ADDITIONAL IDENTIFIER: | | | | | (If anim | al is restrar | nded, please indicate ar | ny previous fie | ld numbers h | nere) |
| ADDITIONAL REMARKS: | | | | | | | | | | |
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DISCLAIMER

THESE DATA SHOULD NOT BE USED OUT OF CONTEXT OR WITHOUT VERIFICATION. THIS SHOULD BE STRICTLY ENFORCED WHEN REPORTING SIGNS OF HUMAN INTERACTION DATA.

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