**Appendix 2A**. Fish Health Examination Datasheet.

# U.S. Fish & Wildlife Service
## FISH HEALTH EXAMINATION SHEET

Date: ___/___/___ Fish ID# _____

Capture Time: _____ External Photo ☐

Workup START Time: _____

**SPECIES:** _____ **Initials:**

RECORDER:_____

Total ***Weight***: _____ (g) Total ***Length***: _____ (mm)

**Gender:** ☐Male ☐Female DISSECTOR:_____

**EXTERNAL EXAM:** ***(check all that apply)*** ***Note any condition caused by capture or holding method.**

**EYES:**

Left:
☐normal ☐opaque ☐OTHER *specify:*
☐exopthalmic ☐missing _____
☐hemorrhagic ☐emboli _____
# in fixative _____ _____
# of Photos _____

Right:
☐normal ☐opaque ☐OTHER *specify:*
☐exopthalmic ☐missing _____
☐hemorrhagic ☐emboli _____
# in fixative _____ _____
# of Photos _____

**HEAD:**
☐normal ☐OTHER *specify:*
☐tumors _____
☐lesions _____
☐parasite _____
# in fixative _____
# of Photos _____

**BODY SURFACE:**
☐normal ☐OTHER *specify:*
☐tumors _____
☐lesions _____
☐parasite _____
# in fixative _____
# of Photos _____

**OPERCLES:**

Right:
☐normal ☐OTHER *specify:*
☐slight shortening _____
☐severe shortening _____
# in fixative _____ _____
# of Photos _____

Left:
☐normal ☐OTHER *specify:*
☐slight shortening _____
☐severe shortening _____
# in fixative _____ _____
# of Photos _____

**GILLS:**

Left:
☐normal ☐marginate ☐OTHER *specify:*
☐frayed ☐pale _____
☐clubbed ☐parasites _____
VIAL NAME_____ _____
# in fixative _____ _____
# of Photos _____

Right:
☐normal ☐marginate ☐OTHER *specify:*
☐frayed ☐pale _____
☐clubbed ☐parasites _____
VIAL NAME_____ _____
# in fixative _____ _____
# of Photos _____

**FINS:** ***Note any condition caused by capture or holding method.**

Pectoral _____
Pelvic _____
Anal _____
Caudal _____
Dorsal _____
# in fixative _____
# of Photos _____

Fin Observation Key:
(N) normal
(M) mild erosion
(S) severe erosion
(F) frayed
(H) hemorrhagic
(E) emboli
(OT) Other – *specify*

OTHER *specify*:
_____
_____
_____
_____

**NOTE:** Any tissues taken during external examination should be described on this datasheet, placed in a histological vial, preserved and labeled appropriately.

REVIEWER'S INITIALS _____

**Appendix 2A** (continued).

**INTERNAL EXAM:** ***(check all that apply)***

Fish ID# _____

Internal Photo ☐

**LIVER:**

☐dark to light red (normal)
☐tan (coffee with cream)
☐general (overall) discoloration
☐focal (mottled) discoloration
☐nodules

☐OTHER *specify:*
_____
_____
_____

Weight _____(0.1g) *without gallbladder*

VIAL NAME_____
# in fixative _____
# of Photos _____

**BILE:**

Fullness:
☐empty
☐partly full
☐full

Color:
☐N/A (empty)
☐yellow
☐light-grass green
☐dark green to blue green

☐OTHER *specify:*
_____
_____

**SPLEEN:**

☐red to black (normal)
☐granular
☐nodular
☐enlarged

☐OTHER *specify:*
_____
_____
_____

Weight _____(0.002g)

VIAL NAME_____
# in fixative _____
# of Photos _____

**GONADS:**

Gender:
☐male
☐female
☐juvenile

Development:
☐ripe
☐spent
☐intermediate

☐OTHER *specify:*
_____
_____
_____

Weight _____(0.1g)

VIAL NAME_____
# in fixative _____
# of Photos _____

**MESENTERIC FAT:**

☐no fat ☐slight fat ☐50% ☐>50% ☐completely covered ☐parasites ☐OTHER

# in fixative _____
# of Photos _____

**KIDNEY:**

☐normal
☐swollen
☐mottled
☐granular
☐urolithiasis

☐OTHER *specify:*
_____
_____
_____

# in fixative _____
# of Photos _____

Hind:
☐normal
☐swollen
☐mottled
☐granular
☐urolithiasis

☐OTHER *specify:*
_____
_____
_____

# in fixative _____
# of Photos _____

**Sample Summary:**

☐None taken ☐Gill ☐Liver ☐Spleen ☐Gonad ☐OTHER:
_____
_____
_____

Workup END Time: _____

**RECORDER'S INITIALS:** _____ **DISSECTOR' INITIALS:** _____ **REVIEWER'S INITIALS:** _____

**NOTES:** _____
_____
_____