Greetings from the ARAV Technician Liaison

Hello my Reptilian and Amphibian shugs,

With the cold weather receding, or warm weather receding depending on where you are, let’s play a quick game! If you score high enough you could potentially maybe possibly win something epic from ARAV!

If you are a technician or have a technician, add 10 points

If you are a technician that is a member of ARAV or a vet that signed their technician up to become an ARAV member, add 100,00 points.

If you are a technician that wrote an article for the Herp Blerp or you had your technician write for the Herp Blerp, add 1,000,000 points.

If you scored 1,100,010 points, you are qualified to potentially win an epic prize from ARAV (that may or may not be a sweet t-shirt!) Didn’t make the qualifying round?! That’s alright! Go to www.arav.org and sign up and send e.medecvt@gmail.com an e-mail on writing articles! Soon you too can be in the running for epicness!

Your ARAV pushing tech,

Erica Mede, CVT

I’m Hooked: Dealing with Fish Hooks

The Wildlife Medical Clinic (WMC) at the University of Illinois sees a wide spectrum of native species, from Bald Eagles to juvenile white-footed mice to Red-eared sliders. As spring rolls around, turtles awake from brumation and seek food. With this increased activity, members of the community will begin bringing turtles in for a variety of reasons – infectious disease, shell fractures, limb wounds, and even the occasional fishhook injury. Like many fish, turtles are lured to the easy meal that happens to be pierced with a metal hook. Some turtles are brought in with the hook still exposed while other turtles have swallowed the entire hook. An example of each of these was seen at the WMC last year.

A gentleman brought in a Juvenile Snapping Turtle (Chelydra serpentina) that had swallowed his fishhook. Radiographs of the turtle were quickly obtained, verifying a Snel fishing hook in the left lateral area of the coelomic cavity. The turtle was placed under general anesthesia and an incision was made caudal to the bridge. The stomach was isolated with two stay sutures and a small incision was made to remove the fishhook with mosquito forceps. In addition, a limited abdominal explore was performed to check for inflammation, and all observable tissue appeared viable.

Continued on next page ...

Tips, Tricks, and Toys

For those of us who have to give a subcutaneous or intramuscular injection into a large and sometimes cranky chelonian there is new hope!

Wooden bite blocks or even just regular wooden blocks offer an alternative to having your fingers or syringe crushed by a large tortoise. The wooden blocks are placed behind the limb when it is extended outward generally in an attempt to walk away. Once the block is in place, there isn’t really a magic spot, the injection site will be easier to view and utilize.

We have used this at the hospital for larger 70 kg tortoises without issue. Placement can be tricky but it still allows for easier treatments.

- Michelle S.
Four weeks later, the young turtle was released to its finder so it could be returned to the pond it was accidentally caught in.

When a Red-eared slider (Trichemys scripta elegans) was brought to the WMC, he had a large fishhook in his oral cavity with the hook and was unable to close his mouth. The hook appeared to be buried somewhere down his esophagus or near his tympanum, so radiographs were vital in determining the hook’s location and the best approach to removing it while minimizing further nerve or soft tissue damage. Intramuscular injections of Ketamine and Dexmedetomidine were given to sedate the slider for the procedure. Once the he was adequately sedate, a small incision was made near the tympanum to expose the barb of the hook and remove it with wire cutters. The rest of the hook was retracted out of the oral cavity with an earthworm still on the hook. The turtle recovered without complications and had a healthy appetite following the procedure. Unfortunately, five days later the slider began open-mouth breathing, had a bout of hematemesis, and died shortly after. Upon necropsy, diffuse enteritis and a perforation in the small intestine were found.

The treatment for fishhook removal varies depending on the location, duration, and severity of damage the turtle has incurred before arriving to the WMC. Fortunately, wildlife veterinarians at the University of Illinois Veterinary Teaching Hospital are able to provide their surgical expertise and expansive knowledge to aid the team of veterinary students dedicated to wildlife medicine and collectively improve the prospect of re-release for each animal brought to the Wildlife Medical Clinic.

Laure E. Molitor
University of Illinois

ABVP Announcement!
For all of you interested in becoming boarded in Reptile and Amphibian medicine come visit the 19th Annual ABVP Symposium in Nashville, Tennessee October 30-November 2, 2014. Find out more information at www.abvp.com

Mark Your Calendars ...

October 8 – 12, 2014. Wild West Veterinary Conference. Reno, Nevada, USA.

October 18 – 24, 2014. 21st Annual Conference of the Association of Reptilian and Amphibian Veterinarians. This will be a concurrent conference with the American Association of Zoo Veterinarians and the Association of Exotic Mammal Veterinarians and will be held at Walt Disney World, Orlando, Florida.


Student Corner
Collin is happy to announce that there are updates being made to the student section of the website! This includes changes in student chapters, changes in externship and internship sites, as well as important life altering updates for you! Stay tuned for more information to unravel!