MARINE MAMMAL REHABILITATION DISPOSITION REPORT

TELD #:			.#:NATIONAL DATABASE#:(NMFS USE) SPECIES:			
OMMON NAME:						
EHABILITATION FACILITY:						
ddress:			Phone:			
STRANDING HISTORY			ADMISSION INTO I	REHABILITATION		
Date: Year: Month:_	Day:		Date: Year:	Month: Day	r:	_
Sex: ☐ 1. Male	☐ 2. Female		Received From:			_
Straight Length:	_] estimate	Straight Length:	□ cm □ in	□ actual □	estimate
Weight:	_ □ kg □ lb □ actual □	estimate	Weight:	□ kg □ lb	□ actual □	l estimate
MEDICAL RECORD AND SPE	ECIMEN TRACKING		/pe/Diagnostic Test/Disposi			
Samples collected: ☐ 1. YES ☐ 2. N0	☐ 3. Unknown	2 3				
Pre-release Health Screen:] 1. YES ☐ 3. Unknown] 2. NO	5 6				
	Scientific collection Education collection Other:	7				
☐ 1. Transferred to Another Property Month: Facility: Address: Comments:	Day:	\$	☐ 4. Released Year: Month: D State: County: Locality Details:	City:		
☐ 2. Retained following Reha	abilitation		Latitude:			N
Year: Month:	Day:		Longitude:			W
Location:			Straight Length:	□ cm □ in □ actual	□ estimate	е
Comments:			Weight:	□ kg □ lb □ actual	□ estimate	9
I.D.#:			Age Class:			
(NMFS USE)			TAG DATA (*D=Dorsal; LF=Left Fr	ont; LR=Left Rear; RF=Right Fron	it; RR=Right Re	ear)
		I	.D.# Color Type	Placement (Circle ONE)	Applied	Presen
☐ 3. Died				D DF L		
Year: Month:				LF LR RF RR		
Location:				D DF L		
Cause of Death:				LF LR RF RR		
				D DF L		
Comments:		_	LF	LR RF RR		
			* D = Dorsal; DF= Dorsal LF=Left Front; LR = Left R	Fin; L = Lateral Body tear; RF = Right Front; RR = Right	Rear	

ADDITIONAL REMARKS

ADDITIONAL IDENTIFIER:	-		

DISCLAIMER

THESE DATA SHOULD NOT BE USED OUT OF CONTEXT OR WITHOUT VERIFICATION.

DATA ACCESS FOR LEVEL A DATA

UPON WRITTEN REQUEST, CERTAIN FIELDS OF THE MARINE MAMMAL REHABILITATION DISPOSITION REPORT WILL BE RELEASED TO THE REQUESTOR PROVIDED THAT THE REQUESTOR CREDIT THE STRANDING NETW ORK AND THE NATIONAL MARINE FISHERIES SERVICE. THE NATIONAL MARINE FISHERIES SERV ICE WILL NOTIFY THE CONTRIBUTING STRANDING NETWORK MEMBERS THAT THESE DATA HAVE REQUESTED AND THE INTENT OF USE. ALL OTHER DATA WILL BE RELEASED TO THE REQUESTOR PROVIDED THAT THE REQUESTOR OBTAIN PERMISSION FROM THE CONTRIBUTING STRANDING NETWORK AND THE NATIONAL MARINE FISHERIES SERVICE.

PAPERWORK REDUCTION ACT INFORMATION

PUBLIC REPORTING BURDEN FOR THE COLLECTION OF INFORMATION IS ESTIMATED TO AVERAGE 20 MINUTES PER RESPONSE, INCLUDING THE TIME FOR REVIEWING INSTRUCTIONS, SEARCHING EXISTING DATA SOURCES, GATHERING AND MAINTAINING THE DATA NEEDED, AND COMPLETING AND REVIEWING THE COLLECTION OF INFORMATION. SEND COMMENTS REGARDING THIS BURDEN ESTIMATE OF ANY OTHER ASPECT OF THE COLLECTION OF INFORMATION, INCLUDING SUGGESTIONS FOR REDUCING THE BURDEN TO CHIEF, MARINE MAMMAL CONSERVATION DIVISION, OFFICE OF PROTECTED RESOURCES, NOAA FISHERIES, 1315 EAST-WEST HIGHWAY, SILVER SPRING, MARYLAND 20910. NOT WITHSTANDING ANY OTHER PROVISION OF THE LAW, NO PERSON IS REQUIRED TO RESPOND TO, NOR SHALL ANY PERSON BE SUBJECTED TO A PENALTY FOR FAILURE TO COMPLY WITH, A COLLECTION OF INFORMATION SUBJECT TO THE REQUIREMENTS OF THE PAPERWORK REDUCTION ACT, UNLESS THE COLLECTION OF INFORMATION DISPLAYS A CURRENTLY VALID OFFICE OF MANAGEMENT AND BUDGET (OMB) CONTROL NUMBER.

