## **Natural History / Behaviour**

- Freshwater turtles are ectothermic: their body temperature is influenced by their surroundings
- All turtles are independent from hatching there is no such thing as an 'orphaned turtle' although they are cute!
- They must always be returned to where they came always obtain accurate details of their rescue location
- Individuals go to the same breeding grounds each year so should not be relocated

## **Common Species of South-east Queensland**

#### Carapace size average only for sub-adult to adult animals

Eastern Long-necked Turtle	Chelodina longicollis	25 cm
Broad-shelled River Turtle	Chelodina expansa	50 cm
Saw-shelled Turtle	Elseya latisternum	20 cm
Brisbane Short-necked Turtle	Emydura signata	20 cm
Krefft's turtle	Emydura macquarii krefftii	25 cm

**Note**: List is incomplete. For a complete list of all lizard species found in South-East Queensland, refer to a reptile field guide such as *A Field Guide to Reptiles of Queensland* by Steve Wilson.

### **Basic Rescue Equipment and Emergency Housing**

- Cotton pillowcase with tie
- Plastic tub with smooth sides and ventilated lid with towels on bottom for support (do not fill with water)
- Towel or gloves for handling (if not confident)
- Heat source: Snugglesafe heat disk under a towel at one end of the enclosure. Ensure sufficient room so the turtle can move onto or away from it freely. If not sufficient room to move away from a heat source, do not include in emergency housing.
- Note: When using any heat source, the animal MUST be able to move away from the heat source to avoid thermal injury. Please refer to Reptile Species Coordinator before providing a heat source.

**Note**: Plastic tub/container should be suitable for size of individual. Small plastic terrariums can be used for small individuals – larger individuals must be housed in a larger container. The container should be at least 2-3 times as long and as wide as the animal. Individuals with severe shell fracture should be housed in a smaller tub/box which will help prevent further shell trauma/ loss.

## **OHS Considerations / Zoonoses**

#### **Beware of**

- Teeth / Mouth
- Claws
- Will often urinate or evacuate anal glands when handled

#### **Known Zoonotic Diseases**

- Reptiles known to carry salmonella ensure excellent hygiene when handling
- No other specific zoonoses

# Handling

#### **Small Turtles**

Grip the rear of the shell with your thumb on top and fingers underneath.



### **Large Turtles**

Grip both your hands on either edge of the carapace between the front legs and in front of the hind legs



Photos: CWS

# **Assessment Checklist - Freshwater Turtles**

Clinical Signs	Healthy / Normal	Sick / Injured
Demeanour	<ul> <li>Bright and alert</li> <li>Will tuck head and neck back/under shell</li> <li>Will struggle when being handled</li> <li>May try to escape handling</li> <li>Responsive to stimuli (e.g. noises)</li> </ul>	<ul> <li>Quiet / depressed</li> <li>Distressed</li> <li>Non-responsive when handled</li> <li>Not responding to stimuli</li> <li>Does not tuck its head in/under shell</li> <li>Unconscious (Indicative of shock, dehydration, injury)</li> </ul>
Mobility / Limbs	<ul> <li>Able to move body and all limbs</li> <li>No bruising or swelling on extremities</li> <li>No obvious abnormalities or lack of symmetry</li> <li>Healed amputations of toes/webbing normal</li> </ul>	<ul> <li>Abnormalities in movement (e.g. only using front legs, dragging a limb, falling over, swaying)</li> <li>Head tilted to one side</li> <li>Paralysis (trauma) (Indicative of trauma related injury)</li> </ul>
Body Condition and shell	<ul> <li>Good body condition</li> <li>Good muscle tone</li> <li>Shell is shiny and undamaged (healed shell deficits are normal)</li> <li>Non-odorous smell</li> </ul>	<ul> <li>Open wounds</li> <li>Puncture wounds, shell fractures</li> <li>Poor body condition (malnourished)</li> <li>Lack of muscle tone</li> <li>Offensive odour (chronic disease or old wounds)</li> <li>Dull, flaking shell (chronic disease)</li> <li>(Indicative of trauma or chronic illness/disease)</li> </ul>
Breathing	Normal – Slight movement of chest with each breath – no noticeable effort. (Note: handling may result in increased respiration rate)	<ul> <li>Open-mouthed breathing</li> <li>Laboured (noticeable effort to breath)</li> <li>Audible breathing sounds (clicking, ticking, gurgling sounds)</li> <li>Sneezing or coughing</li> <li>Bloody discharge</li> <li>Shaking head (possible obstruction) (Indicative of trauma related injury, poisoning)</li> </ul>
Head	Symmetrical	<ul> <li>Abnormal symmetry</li> <li>Indentations</li> <li>Swelling</li> <li>Crepitation</li> <li>Lacerations/abrasions</li> <li>(Indicative of trauma related injury)</li> </ul>
Eyes	<ul> <li>Bright and clear</li> <li>Shiny</li> <li>Blinks eyelids</li> </ul>	<ul> <li>Dull (pain/dehydration)</li> <li>Sunken (dehydrated)</li> <li>Closed (pain/dehydration/injury)</li> <li>Protrusion (trauma)</li> <li>Swelling (trauma)</li> <li>Nystagmus (head trauma)</li> <li>Unequal pupil(s) (trauma)</li> <li>Unreactive pupil(s) (trauma)</li> <li>Purulent discharge (infection)</li> </ul>
Nose	Straight     No discharge or bleeding	<ul> <li>Distorted (trauma - fracture)</li> <li>Blood or other discharge (purulent infection) from nostrils (trauma)</li> <li>Abrasions (trauma)</li> <li>Swelling (trauma)</li> </ul>

# **Assessment Checklist - Freshwater Turtles (continued)**

Clinical Signs	Healthy / Normal	Sick / Injured
Mouth	<ul><li>No discharge</li><li>Symmetrical</li><li>Jaw and tongue undamaged</li></ul>	<ul> <li>Mal-aligned jaw (trauma)</li> <li>Blood (trauma)</li> <li>Swelling (trauma)</li> <li>Crepitation (trauma)</li> <li>Slow capillary refill time (shock/dehydration)</li> </ul>
Ears (Tympanic membrane)	<ul><li>No discharge</li><li>Clear membrane</li></ul>	<ul> <li>Blood</li> <li>Clear fluid</li> <li>Torn membrane (Indicative of trauma related injury)</li> </ul>
Cloaca (vent)	<ul> <li>Clean</li> <li>Free from discharge</li> <li>Hemipenes not exposed</li> </ul>	<ul> <li>Blood</li> <li>Lacerations</li> <li>Swelling</li> <li>Hemipenes prolapsed (trauma) (Indicative of trauma related injury)</li> </ul>
Tail	<ul><li>Straight</li><li>Missing tail (old injury)</li></ul>	<ul> <li>Swelling</li> <li>Lacerations</li> <li>Lack of movement</li> <li>Missing tail (fresh injury)</li> <li>(Indicative of trauma related injury)</li> </ul>

## **Assessment Parameters**

Vital Signs	Heart Rate Respiration Rate Core Body Temperature	Variable between species Variable between species Variable between species
Preferred Ambient Temperature	20°C - 26°C	
Signs of Stress	<ul> <li>Trying to escape constantly</li> <li>Urination, anal gland evacuation, defecation when picked up</li> </ul>	
Signs of Pain	Non-responsive or constar movement	<ul><li>Closed eyes</li><li>Not moving from or to heat source</li></ul>
Signs of Dehydration	<ul><li>Dull eyes</li><li>Sunken eyes</li><li>Lack of skin elasticity</li></ul>	<ul><li>Lethargy</li><li>Excessive sloughing of carapace</li></ul>
Assessment of Body Condition	Look for muscle tone on front and rear limbs.  Turtles in poor condition have a hollow appearance in front of the front and rear limbs under the shell and a thin neck.  Carapace – should be in good condition with no fractures or sloughing	

### **Emergency Diet**

Do not offer any food or water to an animal suffering from injury (e.g. vehicle hit, dog/cat encounter etc). Injured wildlife must be presented to a veterinarian for treatment before offering food or water. Alternatively, please consult with your relevant Species Coordinator.

- Invertebrates (yabbies, shrimp, fish, worms, crickets)
- Green vegetables (e.g. chopped bok choy, silverbeet, dark lettuce)

**Note**: Do not offer food until instructed by the Reptile Coordinator.

Turtles can go for several days without food if in good body condition and well hydrated.

## **Common Injuries, Diseases and Conditions**

- Road trauma injuries (fractured carapace and/or plastron, fractured limbs, internal injuries)
- Entanglement or Gastrointestinal Obstruction from discarded fishing line/tackle

Photos: AZWH



Above:
Severe shell fracture with significant instability in segments.
Often warrants euthanasia.



Above:
Isolated fracture of carapace with muscle exposure.
Requires veterinary assessment and treatment.
Prognosis good.

## **Drug Administration** (preferred routes)

Oral Not suitable

Intramuscular Muscle of forearm or hind legs

Subcutaneous Loose skin just cranial to back legs (inguinal) – preferred. Or between front leg and neck

Intravenous Jugular

### Euthanasia (preferred methods)

Euthanasia methods stated to assist veterinary staff.

Wildlife volunteers must not euthanise unless trained to do so or they hold appropriate approvals.

- Injection of sodium pentobarbitone (Lethabarb) after induction with Isoflurane or Alfaxan CD RTU preferred:
  - Intravenous
  - Intracardiac (must be anaesthetised first)
  - Intraperitoneal (dilute with water 50:50)
- Euthanasia by placing in freezer is NOT ACCEPTABLE and is INHUMANE.

## **Suggested Drugs and Dose Rates**

This information is provided for **VETERINARY USE ONLY** to assist veterinary staff with the **initial assessment** and **emergency treatment** of sick, injured and orphaned wildlife. Suggested drugs and doses are those commonly used by the wildlife hospitals in South-east Queensland and are for routine treatment only. Recommendations may vary between individual veterinarians. Culture and sensitivity results would indicate the most appropriate antibiotic regime. Most drugs are used off-label.

#### **Anaesthetic**

Drug	Composition	Dose Rates
Isoflurane ®	Isoflurane 100%	5% for induction and 2-3% for maintenance with oxygen flow rate of 1-2 litres per minute.
Alfaxan CD RTU ®	Alphaxalone	5 - 9 mg/kg (IV) 10-15 mg/kg IM
Ketamine	Ketamine	30 - 50mg/kg (IM) as pre-euthanasia

#### **Analgesic**

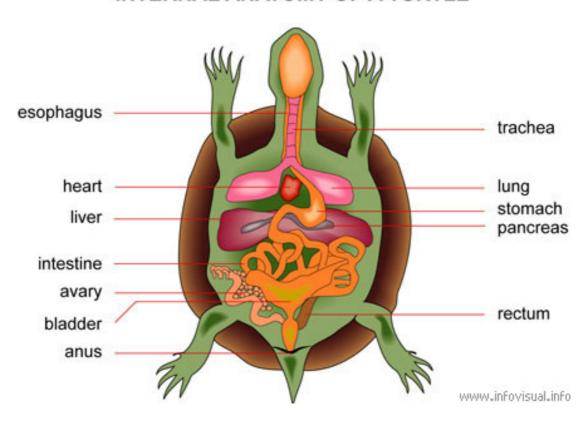
Drug	Composition	Dose Rates
Torbugesic ®	Butorphanol Tartrate	1 to 2mg/kg (SC) or (IM) BID
Metacam ®	Meloxicam	0.4 mg/kg (SC) or (IM) EOD

#### **Antibiotics**

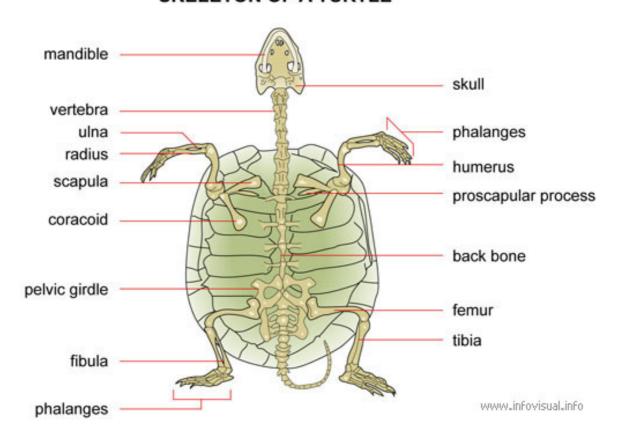
Drug	Composition	Dose Rates
Fortum ®	Ceftazidime pentahydrate	20 mg/kg Q3D (IM)
Baytril ®	Enrofloxacin	5-10mg/kg EOD (IM) or (SC) (must be diluted at least 50:50 with sterile water)

## **Anatomy**

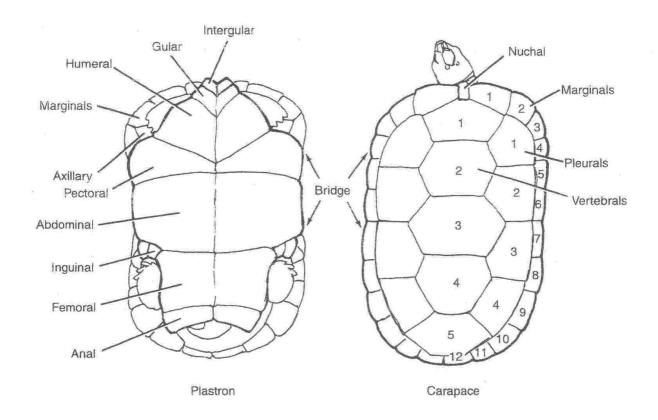
### INTERNAL ANATOMY OF A TURTLE



#### SKELETON OF A TURTLE



# **Anatomy (continued)**



Source: Reptile Medicine & Surgery (Mader)