

#1

MTBAP DATA FORM

Basking In-water

Event ID (database): _____
Validation Date: _____ Initials: _____

TURTLE # of Day / MOTOTOOL #: 287

Species (circle one): Cm Ei Lo Ec Dc Sex (circle one): F M U

Observer Names/Initials: SAMMY SUAIN Date (MM/DD/YY): 8/29/25

Platform/Method: _____ Handling Start Time (24hr format): _____

Capture Location Region: Kukio Island/Atoll: Hawaii Area: _____ Site: Kukio beach

Garmin ID (last 4 digits): _____ LAT(dd): _____ Water Temp: _____ °C Air Temp: _____ °C

GPS Waypoint #: _____ LONG(dd): _____ Water Depth: _____ m

Straight Carapace Length (SCL): 47.0 cm

Straight Carapace Width (SCW): 38.0 cm

Curved Carapace Length (CCL): 19.8 cm

Curved Carapace Width (CCW): 17.7 cm

Plastron Straight Length (PSL): 37.9 cm

Total Tail Length: ~~35~~ cm

Tail length (Plastron to Cloaca): ~~17~~ cm

Mass: 13.4 kg

SAMPLES COLLECTED? None Skin Scute Tumor Blood

FreezerWorks ID #: _____ Initials: _____

Label each vial with sample type and attach left PIT tag ID sticker. Without a sticker, label sample type, date, flipper tag #, location, and species.

of Skin Vials 2 Skin Location Shoulder

of Scute Vials _____ Scute Location _____

of Tumor Vials _____ Tumor Location _____

Blood Collection Time: _____ # Tubes: _____

Volume: _____ mL Preservative: Na/Hep _____ (other)

Tube Type/Size: Glass Plastic 2 mL 6 mL 10 mL

Flipper Tags (2 Types)



985 113 004 226 191

LH New

(Affix new LH PIT tag ID label here)



985 113 004 224 819

RH New

(Affix new RH PIT tag ID label here)

Location status		PIT/Metal Flipper Tag #													
LH	NEW														
LH	Old	P	1	9	9	7	5				P	1	1	9	9
RH	Old	P	1	9	9	7	4								

Tag Location: Right Front Flipper (RF), Left Front Flipper (LF), Right Hind (RH), Left Hind (LH) Tag Status: newly applied tag (New), already present tag (Old)

Biotelemetry Tag

Project (circle one): MITT NBG Tag Type (circle one): Package Satellite (GPS/Argos) Archival (TDR) Acoustic (Sonic/VHF)

Tag Brand (circle one): Wildlife Computers Telonics Desert Star Systems Lotek

Model: _____ Serial #: _____

Attachment Type (circle one): Two-part Epoxy Fiberglass _____ (Other)

- Pre-release Checklist**
- ____ Turtle ID (# of day, metal, PIT)
 - ____ Measurements recorded
 - ____ Sat tag PTT ID recorded, switched ON
 - ____ Epoxy/Paint are dry
 - ____ Check saltwater switches are clear, free from epoxy, paint, tape removed
 - ____ Location of capture/release recorded
 - ____ Photos

Release Time (24hr format): _____

Area/Site: _____ Garmin ID (last 4 digits): _____

GPS Waypoint #: _____

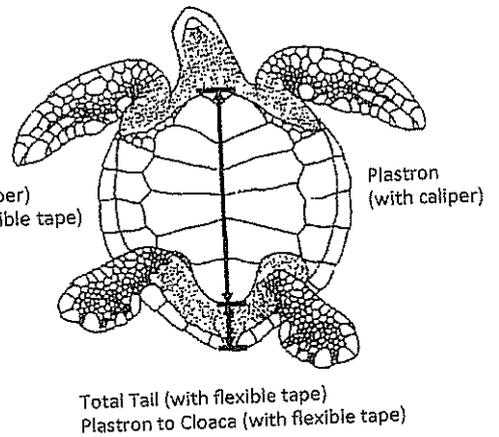
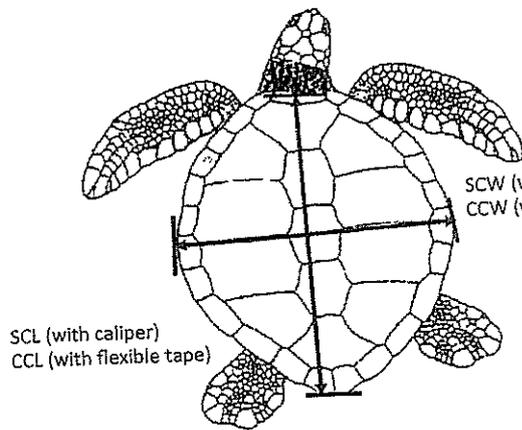
LAT(dd): _____

LONG(dd): _____

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

1

Draw any abnormalities below:



Overall Tumor Score (circle one): 0 1 2 3 U

	Size: 1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

	Size: 1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one): 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: 1.5 mL
Left Shoulder: .75 mL Right Shoulder: .75 mL

Comments:

18.4
Bax 5.0

13.4

Facials taken
Algae in mouth



Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

2

MTBAP DATA FORM

Basking In-water

Event ID (database): _____

Validation Date: _____ Initials: _____

TURTLE # of Day / MOTOTOOL #: H288

Species (circle one): Cm EI Lo Ec Dc

Sex (circle one): F M CN

Observer Names/Initials: Andrea Ehlers

Date (MM/DD/YY): 06/28/25

Platform/Method: _____

Handling Start Time (24hr format): _____

Kukio

Capture Location Region: _____ Island/Atoll: _____ Area: _____ Site: LOWE

Garmin ID (last 4 digits): _____ LAT(dd): _____ Water Temp: _____ °C Air Temp: _____ °C

GPS Waypoint #: _____ LONG(dd): _____ Water Depth: _____ m

Straight Carapace Length (SCL): 47.2 cm

Straight Carapace Width (SCW): 37.9 cm

Curved Carapace Length (CCL): 50.5 cm

Curved Carapace Width (CCW): 44.0 cm

Plastron Straight Length (PSL): 38.0 cm

Total Tail Length: 9.5 cm

Tail length (Plastron to Cloaca): 6.5 cm

Mass: 14.4 kg

SAMPLES COLLECTED? None Skin Scute Tumor Blood

FreezerWorks ID #: _____ Initials: _____

Label each vial with sample type and attach left PIT tag ID sticker. Without a sticker, label sample type, date, flipper tag #, location, and species.

of Skin Vials 2 Skin Location Shoulder

of Scute Vials _____ Scute Location _____

of Tumor Vials _____ Tumor Location _____

Blood Collection Time: _____ # Tubes: _____

Volume: _____ mL Preservative: Na/Hep _____ (other)

Tube Type/Size: Glass Plastic 2 mL 6 mL 10 mL

Flipper Tags (2 Types)



985 113 004 229 537

LH New

(Affix new LH PIT tag ID label here)



985 113 004 229 489

RH New

(Affix new RH PIT tag ID label here)

Location status		PIT/Metal Flipper Tag #										
LH	NEW											
<u>LH</u>	<u>NEW</u>	<u>P</u>	<u>I</u>	<u>9</u>	<u>9</u>	<u>7</u>	<u>8</u>	<u>2</u>				
<u>RH</u>	<u>NEW</u>	<u>P</u>	<u>I</u>	<u>9</u>	<u>9</u>	<u>7</u>	<u>8</u>	<u>3</u>				

Tag Location: Right Front Flipper (RF), Left Front Flipper (LF), Right Hind (RH), Left Hind (LH) Tag Status: newly applied tag (New), already present tag (Old)

Biotelemetry Tag

Project (circle one): MITT NBG Tag Type (circle one): Package Satellite (GPS/Argos) Archival (TDR) Acoustic (Sonic/VHF)

Tag Brand (circle one): Wildlife Computers Telonics Desert Star Systems Lotek

Model: _____ Serial #: _____

Attachment Type (circle one): Two-part Epoxy Fiberglass _____ (Other)

Pre-release Checklist

- ____ Turtle ID (# of day, metal, PIT)
- ____ Measurements recorded
- ____ Sat tag PTT ID recorded, switched ON
- ____ Epoxy/Paint are dry
- ____ Check saltwater switches are clear, free from epoxy, paint, tape removed
- ____ Location of capture/release recorded
- ____ Photos

Release Time (24hr format): _____

Area/Site: _____ Garmin ID (last 4 digits): _____

GPS Waypoint #: _____

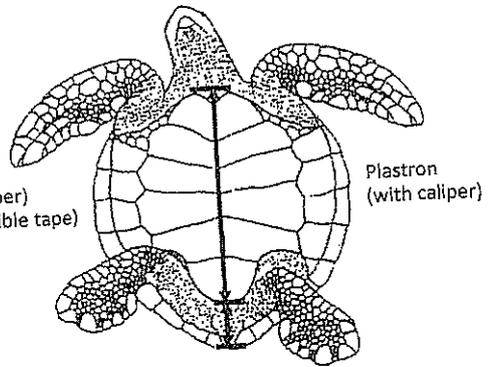
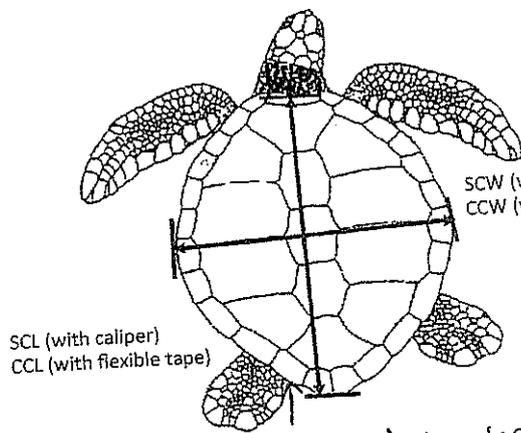
LAT(dd): _____

LONG(dd): _____

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

2

Draw any abnormalities below:



marginal broken & healed

Overall Tumor Score (circle one): 0 1 2 3 U

	Size: 1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

	Size: 1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one) 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: 1.5 ml
Left Shoulder: 0.5 ml Right Shoulder: 0.5 ml

Comments: Facials taken

19.6 w/ box
5.2 - box
14.4 - turtle

#3

MTBAP DATA FORM

Basking In-water

Event ID (database): _____
Validation Date: _____ Initials: _____

TURTLE # of Day / MOTOTOOL #: 206

Species (circle one): Cm Ei Jo Sc Dc Sex (circle one): F M U
Observer Names/Initials: Andrea Ehlers Date (MM/DD/YY): 08/28/25

Platform/Method: _____ Handling Start Time (24hr format): _____

Capture Location Region: _____ Island/Atoll: HI Area: Hualalai Site: Kukio Beach
Garmin ID (last 4 digits): _____ LAT(dd): _____ Water Temp: _____ °C Air Temp: _____ °C
GPS Waypoint #: _____ LONG(dd): _____ Water Depth: _____ m

Straight Carapace Length (SCL): 50.0 cm
Straight Carapace Width (SCW): 40.7 cm
Curved Carapace Length (CCL): 51.4 cm
Curved Carapace Width (CCW): 46.3 cm
Plastron Straight Length (PSL): 40.5 cm
Total Tail Length: 9.0 cm
Tail length (Plastron to Cloaca): 6.5 cm
Mass: 17.8 kg

SAMPLES COLLECTED? None Skin Scute Tumor Blood
FreezerWorks ID #: _____ Initials: _____
Label each vial with sample type and attach left PIT tag ID sticker. Without a sticker, label sample type, date, flipper tag #, location, and species.
of Skin Vials _____ Skin Location _____
of Scute Vials _____ Scute Location _____
of Tumor Vials _____ Tumor Location _____
Blood Collection Time: _____ # Tubes: _____
Volume: _____ mL Preservative: Na/Hep _____ (other)
Tube Type/Size: Glass Plastic 2 mL 6 mL 10 mL

Flipper Tags (2 Types)

_____ LH New _____ RH New
(Affix new LH PIT tag ID label here) (Affix new RH PIT tag ID label here)

Location status		PIT/Metal Flipper Tag #											
LH	NEW												
RF	Old	985	1	3	0	0	8	3	1	6	3	0	3
LF	Old	988	5	1	3	0	0	8	3	1	6	3	0
RF	P	I	6	2	8	4							
RH	P	I	6	2	8	5							

Tag Location: Right Front Flipper (RF), Left Front Flipper (LF), Right Hind (RH), Left Hind (LH) Tag Status: newly applied tag (New), already present tag (Old)

Biotelemetry Tag

Project (circle one): MITT NBG Tag Type (circle one): Package Satellite (GPS/Argos) Archival (TDR) Acoustic (Sonic/VHF)
Tag Brand (circle one): Wildlife Computers Telonics Desert Star Systems Lotek
Model: _____ Serial #: _____
Attachment Type (circle one): Two-part Epoxy Fiberglass _____ (Other)

Pre-release Checklist

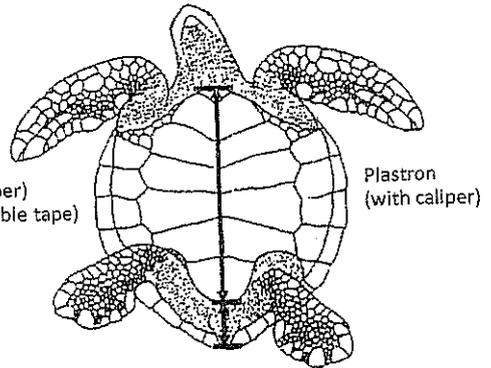
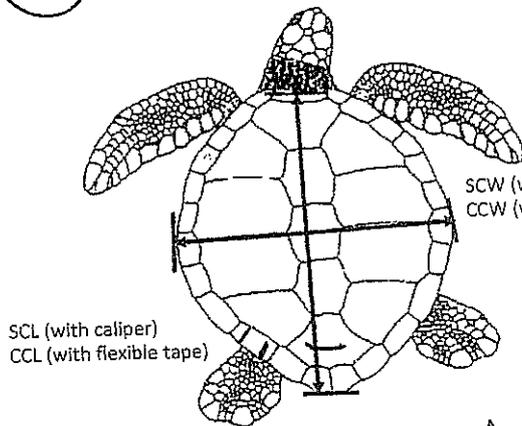
- _____ Turtle ID (# of day, metal, PIT)
- _____ Measurements recorded
- _____ Sat tag PTT ID recorded, switched ON
- _____ Epoxy/Paint are dry
- _____ Check saltwater switches are clear, free from epoxy, paint, tape removed
- _____ Location of capture/release recorded
- _____ Photos

Release Time (24hr format): _____
Area/Site: _____ Garmin ID (last 4 digits): _____
GPS Waypoint #: _____
LAT(dd): _____
LONG(dd): _____

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

3

Draw any abnormalities below:



broken + healed

Overall Tumor Score (circle one): 0 1 2 3 U

Size:	1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

Size:	1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one) 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: _____ mL

Left Shoulder: _____ mL Right Shoulder: _____ mL

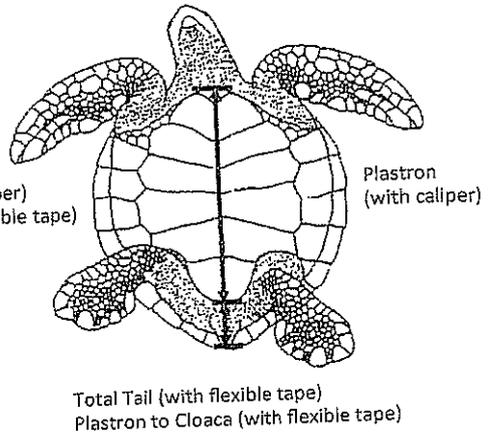
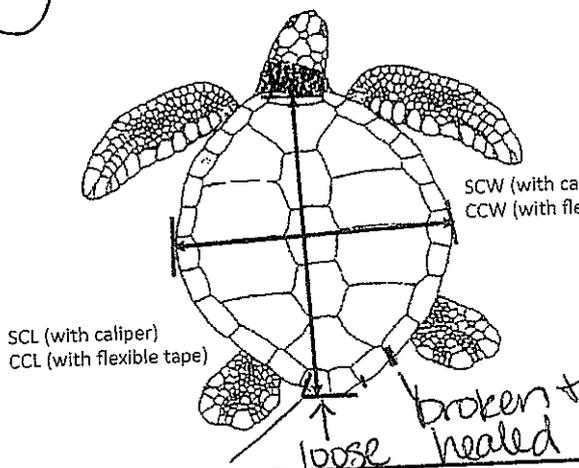
Comments:

22.6 - w/ box no algae in mouth
~~5.0~~ - box estimate North of Kekio beach
 4.8 - box
 17.8

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

4

Draw any abnormalities below:



broken & healed

Overall Tumor Score (circle one): 0 1 2 3 U

	Size: 1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

	Size: 1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one): 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: 1.6 ml
Left Shoulder: 0.8 ml. Right Shoulder: 0.8 ml.

Comments:

21.8 w/ box
4.8 box
17.0 - turtle

no algae in mouth

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

#5

MTBAP DATA FORM

Basking In-water

Event ID (database): _____
Validation Date: _____ Initials: _____

TURTLE # of Day / MOTOTOOL #: H290

Species (circle one): Cm Ei Lo Gc Dc

Sex (circle one): F M U

Observer Names/Initials: Andrea Ehlers

Date (MM/DD/YY): 06/28/2025

Platform/Method: _____

Handling Start Time (24hr format): _____

Capture Location Region: _____ Island/Atoll: _____ Area: _____ Site: KUKIO

Garmin ID (last 4 digits): _____ LAT(dd): _____ Water Temp: _____ °C Air Temp: _____ °C

GPS Waypoint #: _____ LONG(dd): _____ Water Depth: _____ m

Straight Carapace Length (SCL): 41.4 cm

Straight Carapace Width (SCW): 34.4 cm

Curved Carapace Length (CCL): 43.5 cm

Curved Carapace Width (CCW): 40.5 cm

Plastron Straight Length (PSL): 7.0 cm

Total Tail Length: 4.0 cm

Tail length (Plastron to Cloaca): 31.7 cm

Mass: 8.6 ~~8.4~~ kg

SAMPLES COLLECTED? None Skin Scute Tumor Blood

FreezerWorks ID #: _____ Initials: _____
Label each vial with sample type and attach left PIT tag ID sticker. Without a sticker, label sample type, date, flipper tag #, location, and species.

of Skin Vials 2 Skin Location Shoulder

of Scute Vials _____ Scute Location _____

of Tumor Vials _____ Tumor Location _____

Blood Collection Time: _____ # Tubes: _____

Volume: _____ mL Preservative: Na/Hep _____ (other)

Tube Type/Size: Glass Plastic 2 mL 6 mL 10 mL

Flipper Tags (2 Types)



985 113 004 225 769

(Affix new LH PIT tag ID label here)

_____ LH New

(Affix new RH PIT tag ID label here)

_____ RH New

Location status		PIT/Metal Flipper Tag #													
LH	NEW														
LH	NEW	P	I	9	9	7	1				P	1	1	9	9

Tag Location: Right Front Flipper (RF), Left Front Flipper (LF), Right Hind (RH), Left Hind (LH) Tag Status: newly applied tag (New), already present tag (Old)

Biotelemetry Tag

Project (circle one): MITT NBG Tag Type (circle one): Package Satellite (GPS/Argos) Archival (TDR) Acoustic (Sonic/VHF)

Tag Brand (circle one): Wildlife Computers Telonics Desert Star Systems Lotek

Model: _____ Serial #: _____

Attachment Type (circle one): Two-part Epoxy Fiberglass _____ (Other)

Pre-release Checklist

- _____ Turtle ID (# of day, metal, PIT)
- _____ Measurements recorded
- _____ Sat tag PTT ID recorded, switched ON
- _____ Epoxy/Paint are dry
- _____ Check saltwater switches are clear, free from epoxy, paint, tape removed
- _____ Location of capture/release recorded
- _____ Photos

Release Time (24hr format): _____

Area/Site: _____ Garmin ID (last 4 digits): _____

GPS Waypoint #: _____

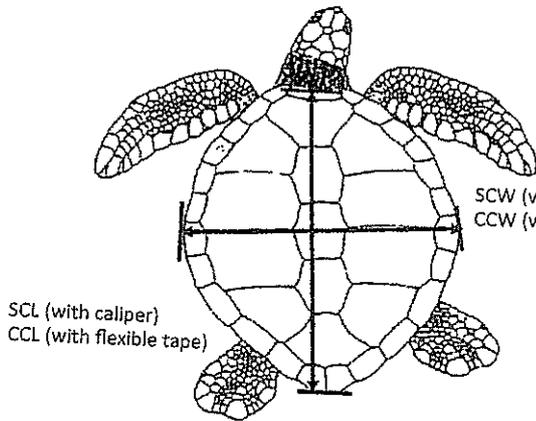
LAT(dd): _____

LONG(dd): _____

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

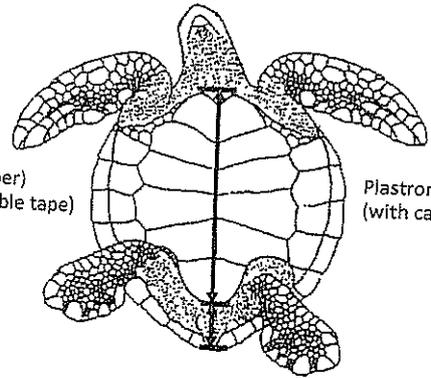
5

Draw any abnormalities below:



SCL (with caliper)
CCL (with flexible tape)

SCW (with caliper)
CCW (with flexible tape)



Plastron (with caliper)

Total Tail (with flexible tape)
Plastron to Cloaca (with flexible tape)

Overall Tumor Score (circle one): 0 1 2 3 U

	Size: 1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

	Size: 1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one): 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: 1.0 mL
Left Shoulder: 0.5 mL Right Shoulder: 0.5 mL

Comments: 13.4 kg (w) box North of Koko
4.8 ~~5.0~~ - box estimate Facials taken
~~8.6 kg~~
8.6 kg Kurie

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

MTBAP DATA FORM

TURTLE # of Day / MOTOTOOL #: 4291

Species (circle one): Cm Ei Lo Ec Dc

Sex (circle one): F M U

Observer Names/Initials: Sammy

Date (MM/DD/YY): 8/28/25

Platform/Method: _____

Handling Start Time (24hr format): _____

Capture Location Region: Kuliso Island/Atoll: _____ Area: _____ Site: Kukio

Garmin ID (last 4 digits): _____ LAT(dd): _____ Water Temp: _____ °C Air Temp: _____ °C

GPS Waypoint #: _____ LONG(dd): _____ Water Depth: _____ m

Straight Carapace Length (SCL): 47.8 cm

Straight Carapace Width (SCW): 35.2 cm

Curved Carapace Length (CCL): 51.0 cm

Curved Carapace Width (CCW): 42.5 cm

Plastron Straight Length (PSL): 39.1 cm

Total Tail Length: 8.5 cm

Tail length (Plastron to Cloaca): 5.0 cm

Mass: 12.5 kg

SAMPLES COLLECTED? None Skin Scute Tumor Blood

FreezerWorks ID #: _____ Initials: _____

Label each vial with sample type and attach left PIT tag ID sticker. Without a sticker, label sample type, date, flipper tag #, location, and species.

of Skin Vials 2 Skin Location Shoulder

of Scute Vials _____ Scute Location _____

of Tumor Vials _____ Tumor Location _____

Blood Collection Time: _____ # Tubes: _____

Volume: _____ mL Preservative: Na/Hep _____ (other)

Tube Type/Size: Glass Plastic 2 mL 6 mL 10 mL

Flipper Tags (2 Types)



985 113 004 225 946

LH New

RH New

(Affix new LH PIT tag ID label here)

(Affix new RH PIT tag ID label here)

Location status		PIT/Metal Flipper Tag #												
LH	NEW													
RH										P	1	1	9	9

Tag Location: Right Front Flipper (RF), Left Front Flipper (LF), Right Hind (RH), Left Hind (LH) Tag Status: newly applied tag (New), already present tag (Old)

Biotelemetry Tag

Project (circle one): MITT NBG Tag Type (circle one): Package Satellite (GPS/Argos) Archival (TDR) Acoustic (Sonic/VHF)

Tag Brand (circle one): Wildlife Computers Telonics Desert Star Systems Lotek

Model: _____ Serial #: _____

Attachment Type (circle one): Two-part Epoxy Fiberglass _____ (Other)

Pre-release Checklist

- ____ Turtle ID (# of day, metal, PIT)
- ____ Measurements recorded
- ____ Sat tag PTT ID recorded, switched ON
- ____ Epoxy/Paint are dry
- ____ Check saltwater switches are clear, free from epoxy, paint, tape removed
- ____ Location of capture/release recorded
- ____ Photos

Release Time (24hr format): _____

Area/Site: _____ Garmin ID (last 4 digits): _____

GPS Waypoint #: _____

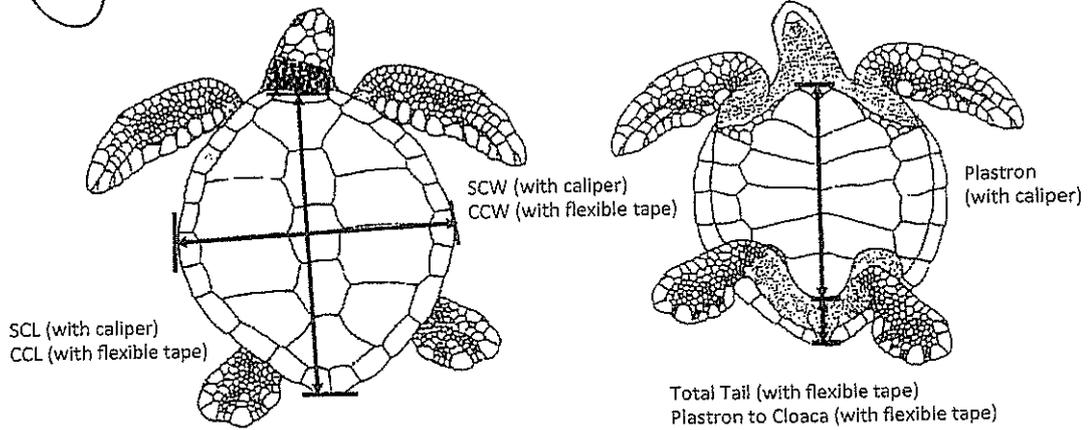
LAT(dd): _____

LONG(dd): _____

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

6

Draw any abnormalities below:



Overall Tumor Score (circle one): 0 1 2 3 U

	Size: 1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

	Size: 1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one) 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: 1.6 mL

Left Shoulder: 0.8 mL Right Shoulder: 0.8 mL

Comments:

39.0 lbs?
 - 5.0 box wt
 15.5 kg
 - 17.5 kg
 - 5
 12.5

Don't know how accurate the wt is

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

MITBAP DATA FORM

Basking In-water

Event ID (database): _____

Validation Date: _____ Initials: _____

TURTLE # of Day / MOTOTOOL #: H292

Species (circle one): Cm Ei Lo &c Dc

Sex (circle one): F M U

Observer Names/Initials: SEANAS TASI

Date (MM/DD/YY): 8/28/25

Platform/Method: _____

Handling Start Time (24hr format): _____

Capture Location Region: KUKIO Island/Atoll: _____ Area: _____

Site: UUGUOWES

Garmin ID (last 4 digits): _____ LAT(dd): _____

Water Temp: _____ °C Air Temp: _____ °C

KUKIO

GPS Waypoint #: _____ LONG(dd): _____

Water Depth: _____ m

Straight Carapace Length (SCL): 36.4 cm

Straight Carapace Width (SCW): 28.9 cm

Curved Carapace Length (CCL): 37.5 cm

Curved Carapace Width (CCW): 34.5 cm

Plastron Straight Length (PSL): 28.7 cm

Total Tail Length: 7.9 cm

Tail length (Plastron to Cloaca): 4.5 cm

Mass: 6.4 kg

SAMPLES COLLECTED? None Skin Scute Tumor Blood

FreezerWorks ID #: _____ Initials: _____

Label each vial with sample type and attach left PIT tag ID sticker. Without a sticker, label sample type, date, flipper tag #, location, and species.

of Skin Vials 2 Skin Location Shoulder

of Scute Vials _____ Scute Location _____

of Tumor Vials _____ Tumor Location _____

Blood Collection Time: _____ # Tubes: _____

Volume: _____ mL Preservative: Na/Hep _____ (other)

Tube Type/Size: Glass Plastic 2 mL 6 mL 10 mL .

Flipper Tags (2 Types)



985 113 004 225 569

LH New

RH New

(Affix new LH PIT tag ID label here)

(Affix new RH PIT tag ID label here)

Location status		PIT/Metal Flipper Tag #														
LH	NEW											P	1	1	9	9
<u>H</u>	<u>N</u>	<u>P</u>	<u>I</u>	<u>9</u>	<u>9</u>	<u>6</u>	<u>8</u>									

Tag Location: Right Front Flipper (RF), Left Front Flipper (LF), Right Hind (RH), Left Hind (LH) Tag Status: newly applied tag (New), already present tag (Old)

Biotelemetry Tag

Project (circle one): MITT NBG Tag Type (circle one): Package Satellite (GPS/Argos) Archival (TDR) Acoustic (Sonic/VHF)

Tag Brand (circle one): Wildlife Computers Telonics Desert Star Systems Lotek

Model: _____ Serial #: _____

Attachment Type (circle one): Two-part Epoxy Fiberglass _____ (Other)

Pre-release Checklist

- ____ Turtle ID (# of day, metal, PIT)
- ____ Measurements recorded
- ____ Sat tag PTT ID recorded, switched ON
- ____ Epoxy/Paint are dry
- ____ Check saltwater switches are clear, free from epoxy, paint, tape removed
- ____ Location of capture/release recorded
- ____ Photos

Release Time (24hr format): _____

Area/Site: _____ Garmin ID (last 4 digits): _____

GPS Waypoint #: _____

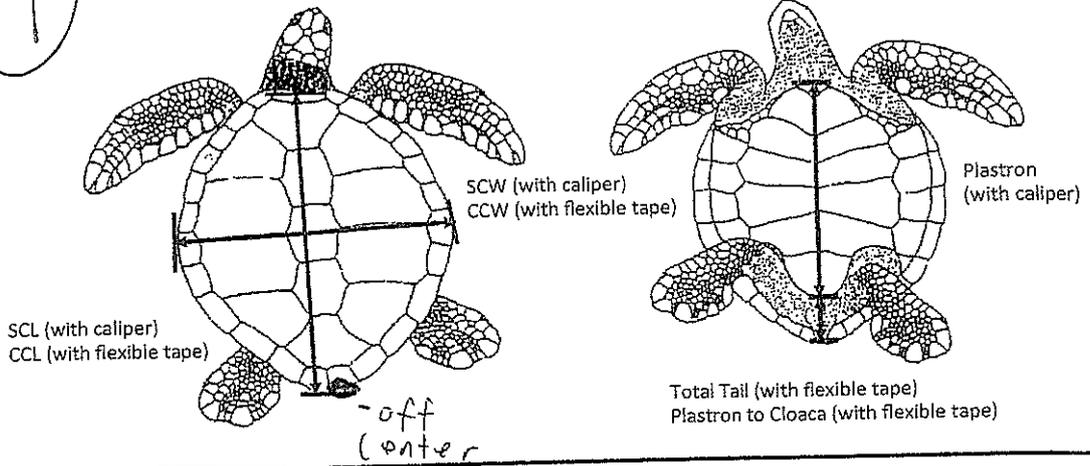
LAT(dd): _____

LONG(dd): _____

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!



Draw any abnormalities below:



Overall Tumor Score (circle one): 0 1 2 3 U

	Size: 1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

	Size: 1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one) 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: 7 ml
Left Shoulder: .35 ml Right Shoulder: .35 ml

Comments:

~~SS w/box~~

by tent

Stag
6.4 Kg

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

#8

MTBAP DATA FORM

Basking In-water

Event ID (database): _____

Validation Date: _____ Initials: _____

TURTLE # of Day / MOTOTOOL #: 4110

Species (circle one): Cm Ei Lo &c Dc Sex (circle one): F M U

Observer Names/Initials: T 951 Date (MM/DD/YY): 8/28/25

Platform/Method: _____ Handling Start Time (24hr format): _____

Capture Location Region: Ruk:0 Island/Atoll: _____ Area: _____ Site: Uluweo

Garmin ID (last 4 digits): _____ LAT_(dd): _____ Water Temp: _____ °C Air Temp: _____ °C

GPS Waypoint #: _____ LONG_(dd): _____ Water Depth: _____ m

Straight Carapace Length (SCL): 43.5 cm
 Straight Carapace Width (SCW): 37.7 cm
 Curved Carapace Length (CCL): 46.0 cm
 Curved Carapace Width (CCW): 43.5 cm
 Plastron Straight Length (PSL): 35.1 cm
 Total Tail Length: 9 cm
 Tail length (Plastron to Cloaca): 6 cm
 Mass: 11.6 kg

SAMPLES COLLECTED? None Skin Scute Tumor Blood
 FreezerWorks ID #: _____ Initials: _____
 Label each vial with sample type and attach left PIT tag ID sticker. Without a sticker, label sample type, date, flipper tag #, location, and species.
 # of Skin Vials _____ Skin Location _____
 # of Scute Vials _____ Scute Location _____
 # of Tumor Vials _____ Tumor Location _____
 Blood Collection Time: _____ # Tubes: _____
 Volume: _____ mL Preservative: Na/Hep _____ (other)
 Tube Type/Size: Glass Plastic 2 mL 6 mL 10 mL

KUKIO

Flipper Tags (2 Types)

_____ LH New _____ RH New
(Affix new LH PIT tag ID label here) (Affix new RH PIT tag ID label here)

Location status		PIT/Metal Flipper Tag #																		
LH	NEW															P	1	1	9	9
LH	old	9	8	2	0	0	0	4	0	6	1	3	1	1	3	3				
RH	old	9	8	2	0	0	0	4	0	6	1	2	7	9	9	4				
LH	old	1	4	8	2															
RH	old	1	4	4	2															

Tag Location: Right Front Flipper (RF), Left Front Flipper (LF), Right Hind (RH), Left Hind (LH) Tag Status: newly applied tag (New), already present tag (Old)

Biotelemetry Tag

Project (circle one): MITT NBG Tag Type (circle one): Package Satellite (GPS/Argos) Archival (TDR) Acoustic (Sonic/VHF)
 Tag Brand (circle one): Wildlife Computers Telonics Desert Star Systems Lotek
 Model: _____ Serial #: _____
 Attachment Type (circle one): Two-part Epoxy Fiberglass _____ (Other)

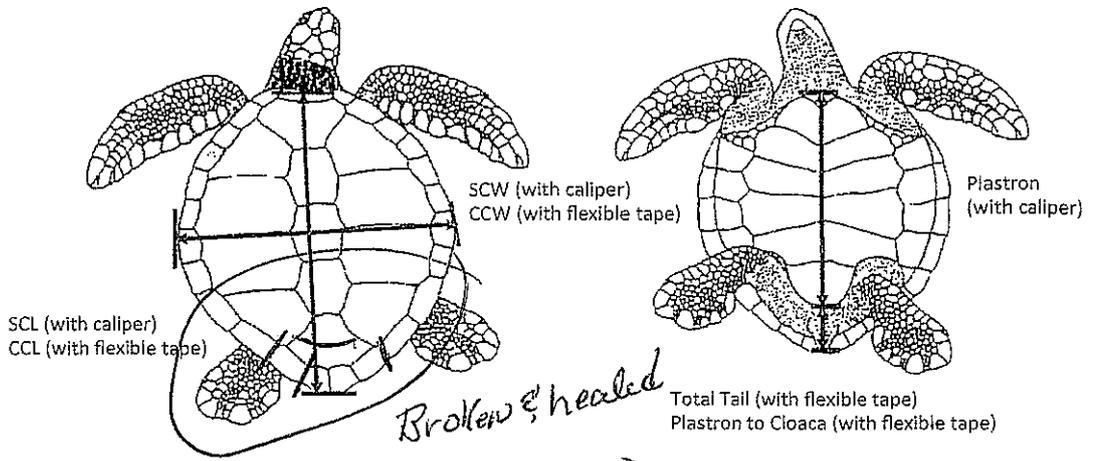
- Pre-release Checklist**
- _____ Turtle ID (# of day, metal, PIT)
 - _____ Measurements recorded
 - _____ Sat tag PTT ID recorded, switched ON
 - _____ Epoxy/Paint are dry
 - _____ Check saltwater switches are clear, free from epoxy, paint, tape removed
 - _____ Location of capture/release recorded
 - _____ Photos

Release Time (24hr format): _____
 Area/Site: _____ Garmin ID (last 4 digits): _____
 GPS Waypoint #: _____
 LAT_(dd): _____
 LONG_(dd): _____

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

8

Draw any abnormalities below:



Overall Tumor Score (circle one): 0 1 2 3 U

	Size: 1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

	Size: 1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one): 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: _____ ml.

Left Shoulder: _____ ml. Right Shoulder: _____ ml.

Comments:

~~35.5 kg w/ box~~

hidepool?

16.6 w/ box
5
11.6

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

#9

MTBAP DATA FORM

Basking

In-water

Event ID (database): _____

Validation Date: _____ Initials: _____

TURTLE # of Day / MOTOTOOL #: H 268

Species (circle one): Cm Ei Lo &c Dc

Sex (circle one): F M U

Observer Names/Initials: TAS

Date (MM/DD/YY): _____

Platform/Method: _____

Handling Start Time (24hr format): _____

Capture Location Region: Kyko Island/Atoll: _____ Area: _____ Site: Uta... KUKIO

Garmin ID (last 4 digits): _____ LAT(dd): _____ Water Temp: _____ °C Air Temp: _____ °C

GPS Waypoint #: _____ LONG(dd): _____ Water Depth: _____ m

Straight Carapace Length (SCL): 44.8 cm

Straight Carapace Width (SCW): 38.0 cm

Curved Carapace Length (CCL): 47.5 cm

Curved Carapace Width (CCW): 42.7 cm

Plastron Straight Length (PSL): 38.1 cm

Total Tail Length: 10 cm

Tail length (Plastron to Cloaca): 5.5 cm

Mass: 14.0 kg

SAMPLES COLLECTED? None Skin Scute Tumor Blood

FreezerWorks ID #: _____ Initials: _____

Label each vial with sample type and attach left PIT tag ID sticker. Without a sticker, label sample type, date, flipper tag #, location, and species.

of Skin Vials _____ Skin Location _____

of Scute Vials _____ Scute Location _____

of Tumor Vials _____ Tumor Location _____

Blood Collection Time: _____ # Tubes: _____

Volume: _____ mL Preservative: Na/Hep _____ (other)

Tube Type/Size: Glass Plastic 2 mL 6 mL 10 mL

Flipper Tags (2 Types)

_____ LH New _____ RH New

(Affix new LH PIT tag ID label here)

(Affix new RH PIT tag ID label here)

Location status		PIT/Metal Flipper Tag #														
LH	NEW															
LH old		9	8	5	1	1	3	0	0	4	2	2	9	3	8	4
RH old		9	8	5	1	1	3	0	0	4	2	2	9	9	7	2
LH old		1	1	5												
RH old		1	1	6												

Tag Location: Right Front Flipper (RF), Left Front Flipper (LF), Right Hind (RH), Left Hind (LH) Tag Status: newly applied tag (New), already present tag (Old)

Biotelemetry Tag

Project (circle one): MITT NBG Tag Type (circle one): Package Satellite (GPS/Argos) Archival (TDN) Acoustic (Sonic/VHF)

Tag Brand (circle one): Wildlife Computers Telonics Desert Star Systems Lotek

Model: _____ Serial #: _____

Attachment Type (circle one): Two-part Epoxy Fiberglass _____ (Other)

Pre-release Checklist

- Turtle ID (# of day, metal, PIT)
- Measurements recorded
- Sat tag PTT ID recorded, switched ON
- Epoxy/Paint are dry
- Check saltwater switches are clear, free from epoxy, paint, tape removed
- Location of capture/release recorded
- Photos

Release Time (24hr format): _____

Area/Site: _____ Garmin ID (last 4 digits): _____

GPS Waypoint #: _____

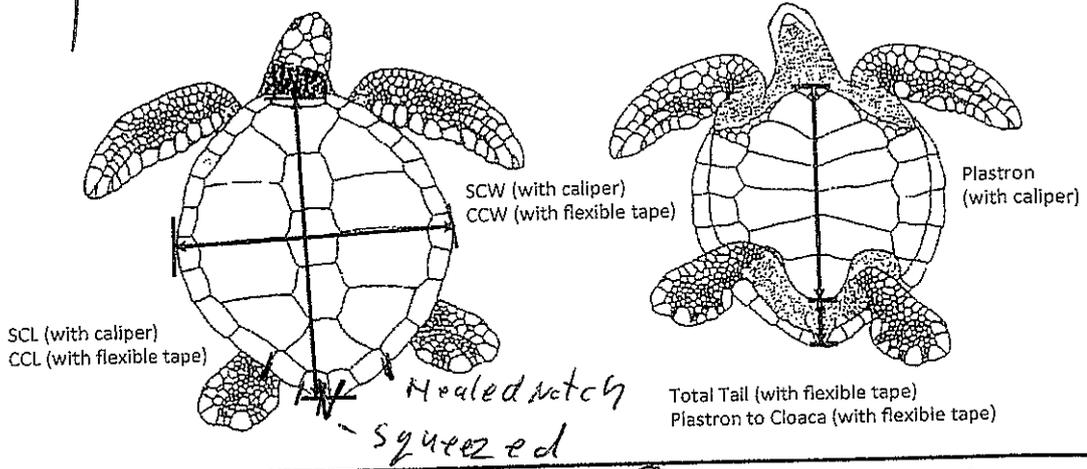
LAT(dd): _____

LONG(dd): _____

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

9

Draw any abnormalities below:



Overall Tumor Score (circle one): 0 1 2 3 U

	Size: 1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

	Size: 1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one): 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: _____ mL
Left Shoulder: _____ mL Right Shoulder: _____ mL

Comments: 19.0 w/ box

Algae in mouth



#10

MTBAP DATA FORM

Basking In-water

Event ID (database): _____

Validation Date: _____ Initials: _____

TURTLE # of Day / MOTOTOOL #: H245

Species (circle one): Cm Ei La Sc Dc

Sex (circle one): F M U

Observer Names/Initials: Tai

Date (MM/DD/YY): _____

Platform/Method: _____

Handling Start Time (24hr format): KUKIO

Capture Location Region: KUKIO

Island/Atoll: _____

Area: _____

Site: Utawewoo

Garmin ID (last 4 digits): _____

LAT(ddd): _____

Water Temp: _____ °C

Air Temp: _____ °C

GPS Waypoint #: _____

LONG(ddd): _____

Water Depth: _____ m

Straight Carapace Length (SCL): 51.6 cm

Straight Carapace Width (SCW): 41.7 cm

Curved Carapace Length (CCL): 54.1 cm

Curved Carapace Width (CCW): 49.2 cm

Plastron Straight Length (PSL): 40.9 cm

Total Tail Length: 10 cm

Tail length (Plastron to Cloaca): 6 cm

Mass: 18.8 kg

SAMPLES COLLECTED? None Skin Scute Tumor Blood

FreezerWorks ID #: _____ Initials: _____

Label each vial with sample type and attach left PIT tag ID sticker. Without a sticker, label sample type, date, flipper tag #, location, and species.

of Skin Vials _____ Skin Location _____

of Scute Vials _____ Scute Location _____

of Tumor Vials _____ Tumor Location _____

Blood Collection Time: _____ # Tubes: _____

Volume: _____ mL Preservative: Na/Hep _____ (other)

Tube Type/Size: Glass Plastic 2 mL 6 mL 10 mL

Flipper Tags (2 Types)

_____ LH New

_____ RH New

(Affix new LH PIT tag ID label here)

(Affix new RH PIT tag ID label here)

Location status		PIT/Metal Flipper Tag #														
LH	NEW											P	1	1	9	9
LH	Old	9	8	2	0	0	0	4	0	8	5	6	6	9	3	3
RH	Old	9	8	2	0	0	0	4	1	0	6	2	1	5	7	4
LH	Old	P	2	6	0	1	2									
RH	Old	P	2	6	0	1	3									

Tag Location: Right Front Flipper (RF), Left Front Flipper (LF), Right Hind (RH), Left Hind (LH) Tag Status: newly applied tag (New), already present tag (Old)

Biotelemetry Tag

Project (circle one): MITT NBG Tag Type (circle one): Package Satellite (GPS/Argos) Archival (TDR) Acoustic (Sonic/VHF)

Tag Brand (circle one): Wildlife Computers Telonics Desert Star Systems Lotek

Model: _____ Serial #: _____

Attachment Type (circle one): Two-part Epoxy Fiberglass _____ (Other)

Pre-release Checklist

- _____ Turtle ID (# of day, metal, PIT)
- _____ Measurements recorded
- _____ Sat tag PTT ID recorded, switched ON
- _____ Epoxy/Paint are dry
- _____ Check saltwater switches are clear, free from epoxy, paint, tape removed
- _____ Location of capture/release recorded
- _____ Photos

Release Time (24hr format): _____

Area/Site: _____ Garmin ID (last 4 digits): _____

GPS Waypoint #: _____

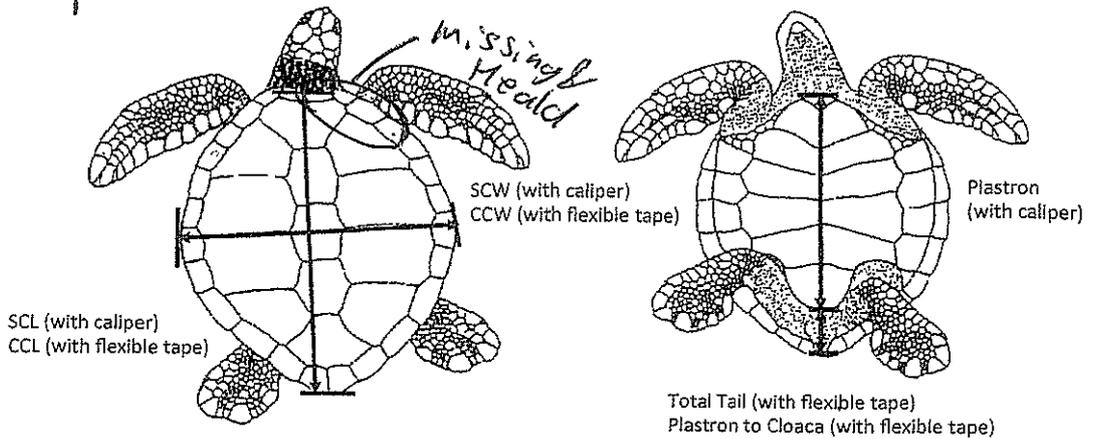
LAT(ddd): _____

LONG(ddd): _____

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

10

Draw any abnormalities below:



Overall Tumor Score (circle one) 0 1 2 3 U

	Size: 1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

	Size: 1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one) 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: _____ mL

Left Shoulder: _____ mL Right Shoulder: _____ mL

Comments:

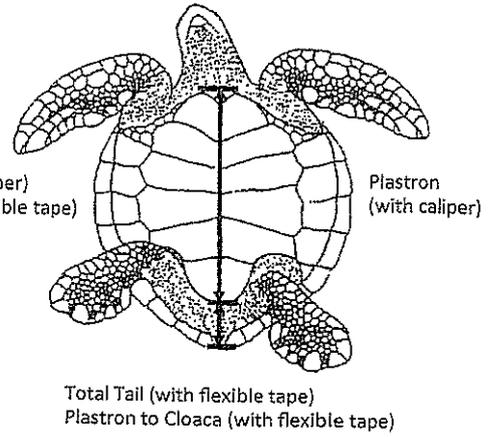
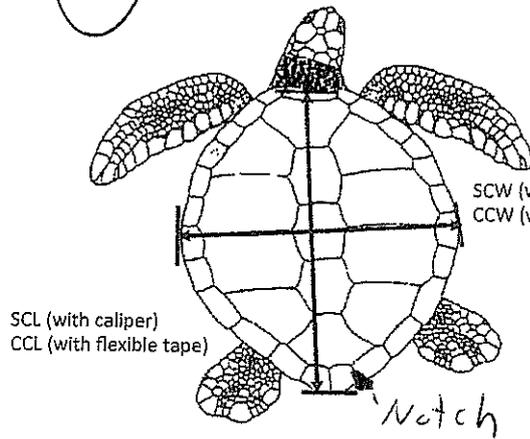
23.8 w/Box

5kg / 18.8

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

11

Draw any abnormalities below:



Overall Tumor Score (circle one): 0 1 2 3 U

	Size: 1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

	Size: 1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one): 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: 1.1 mL

Left Shoulder: 0.55 mL Right Shoulder: 0.55 mL

Comments:

16 kg w/Bax

11 kg

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

12

MTBAP DATA FORM

Basking In-water

Event ID (database): _____

Validation Date: _____ Initials: _____

TURTLE # of Day / MOTOTOOL #: H294

Species (circle one): Cp Ei Lo Ec Dc Sex (circle one): F M (1)

Observer Names/Initials: Alphina Luuemoa Date (MM/DD/YY): 08/28/25

Platform/Method: _____ Handling Start Time (24hr format): 14:10

Capture Location Region: Kukio Island/Atoll: _____ Area: _____ Site: KUKIO

Garmin ID (last 4 digits): _____ LAT(dd): _____ Water Temp: _____ °C Air Temp: _____ °C

GPS Waypoint #: _____ LONG(dd): _____ Water Depth: _____ m

Straight Carapace Length (SCL): 44.4 ^(44.1) cm

Straight Carapace Width (SCW): 34.4 cm

Curved Carapace Length (CCL): 46.5 cm

Curved Carapace Width (CCW): 40.0 cm

Plastron Straight Length (PSL): 35.3 cm

Total Tail Length: 8.3 cm

Tail length (Plastron to Cloaca): 5.3 cm

Mass: 16.1 kg

SAMPLES COLLECTED? None Skin Scute Tumor Blood

FreezerWorks ID #: _____ Initials: _____

Label each vial with sample type and attach left PIT tag ID sticker. Without a sticker, label sample type, date, flipper tag #, location, and species.

of Skin Vials 2 Skin Location Shoulder

of Scute Vials _____ Scute Location _____

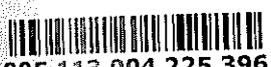
of Tumor Vials _____ Tumor Location _____

Blood Collection Time: _____ # Tubes: _____

Volume: _____ mL Preservative: Na/Hep _____ (other)

Tube Type/Size: Glass Plastic 2 mL 6 mL 10 mL

Flipper Tags (2 Types)



985 113 004 225 396

LH New

RH New

(Affix new LH PIT tag ID label here)

(Affix new RH PIT tag ID label here)

Location status		PIT/Metal Flipper Tag #									
LH	NEW										
<u>PH</u>	<u>NEW</u>	<u>P</u>	<u>I</u>	<u>9</u>	<u>9</u>	<u>5</u>	<u>1</u>				

Tag Location: Right Front Flipper (RF), Left Front Flipper (LF), Right Hind (RH), Left Hind (LH) Tag Status: newly applied tag (New), already present tag (Old)

Biotelemetry Tag

Project (circle one): MITT NBG Tag Type (circle one): Package Satellite (GPS/Argos) Archival (TDR) Acoustic (Sonic/VHF)

Tag Brand (circle one): Wildlife Computers Telonics Desert Star Systems Lotek

Model: _____ Serial #: _____

Attachment Type (circle one): Two-part Epoxy Fiberglass _____ (Other)

- Pre-release Checklist**
- Turtle ID (# of day, metal, PIT)
 - Measurements recorded
 - Sat tag PIT ID recorded, switched ON
 - Epoxy/Paint are dry
 - Check saltwater switches are clear, free from epoxy, paint, tape removed
 - Location of capture/release recorded
 - Photos

Release Time (24hr format): _____

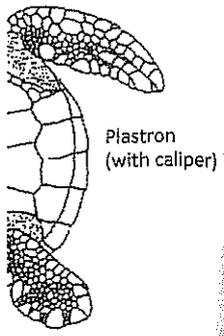
Area/Site: _____ Garmin ID (last 4 digits): _____

GPS Waypoint #: _____

LAT(dd): _____

LONG(dd): _____

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!



Plastron (with caliper)

tape) h flexible tape)

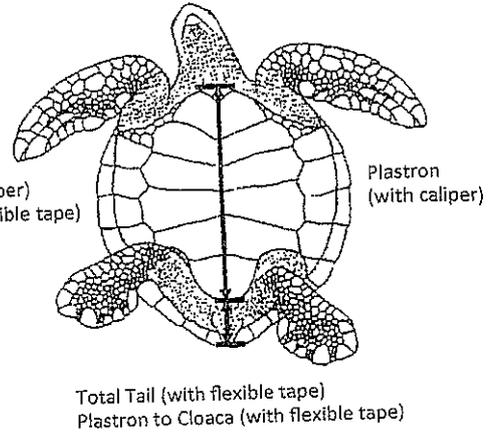
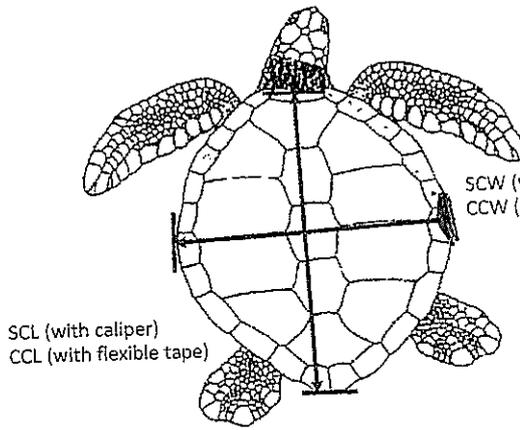
3 4

tail: 1.3 mL
Shoulder: 0.95 mL
0.05

ink You!

12

Draw any abnormalities below:



Overall Tumor Score (circle one): 0 1 2 3 U

Size:	1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

Size:	1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one): 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: $\frac{1.3}{0.65 + 0.65}$ ml
 Left Shoulder: $\frac{0.65}{0.65}$ ml Right Shoulder: $\frac{0.65}{0.65}$ ml

Comments:

- 16.1 kg - 5 kg (box) = 11.1 kg

- algae in mouth

- Facial photos

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

MTBAP DATA FORM

Basking In-water

Event ID (database): _____
Validation Date: _____ Initials: _____

TURTLE # of Day / MOTOTOOL #: ~~1114~~ 1114

Species (circle one): Cm El Lo &c Dc Sex (circle one): F M U
Observer Names/Initials: A. King, L Date (MM/DD/YY): 05/28/25
Platform/Method: _____ Handling Start Time (24hr format): 16:30

Capture Location Region: Kukio Island/Atoll: _____ Area: _____ Site: KUKIO
Garmin ID (last 4 digits): _____ LAT(dd): _____ Water Temp: _____ °C Air Temp: _____ °C
GPS Waypoint #: _____ LONG(dd): _____ Water Depth: _____ m

Straight Carapace Length (SCL): 45.6 cm
Straight Carapace Width (SCW): 30.1 cm
Curved Carapace Length (CCL): 48.0 cm
Curved Carapace Width (CCW): 42.5 cm
Plastron Straight Length (PSL): 38.0 cm
Total Tail Length: 8.5 cm
Tail length (Plastron to Cloaca): 6.0 cm
Mass: 13.5 kg

SAMPLES COLLECTED? None Skin Scute Tumor Blood
FreezerWorks ID #: _____ Initials: _____
Label each vial with sample type and attach left PIT tag ID sticker. Without a sticker, label sample type, date, flipper tag #, location, and species.
of Skin Vials _____ Skin Location _____
of Scute Vials _____ Scute Location _____
of Tumor Vials _____ Tumor Location _____
Blood Collection Time: _____ # Tubes: _____
Volume: _____ mL Preservative: Na/Hep _____ (other)
Tube Type/Size: Glass Plastic 2 mL 6 mL 10 mL

Flipper Tags (2 Types)

_____ LH New _____ RH New
(Affix new LH PIT tag ID label here) (Affix new RH PIT tag ID label here)

Location status		PIT/Metal Flipper Tag #														
LH	NEW											P	1	1	9	9
LH	Old		1	1	9	7										
RH	Old		1	2	0	7										
LH	Old	9	8	2	0	0	0	4	0	6	1	3	4	4	6	7
RH	Old	9	8	2	0	0	0	4	0	6	1	3	4	6	0	0

Tag Location: Right Front Flipper (RF), Left Front Flipper (LF), Right Hind (RH), Left Hind (LH) Tag Status: newly applied tag (New), already present tag (Old)

Biotelemetry Tag

Project (circle one): MITT NBG Tag Type (circle one): Package Satellite (GPS/Argos) Archival (TOR) Acoustic (Sonic/VHF)
Tag Brand (circle one): Wildlife Computers Telonics Desert Star Systems Lotek
Model: _____ Serial #: _____
Attachment Type (circle one): Two-part Epoxy Fiberglass _____ (Other)

Pre-release Checklist

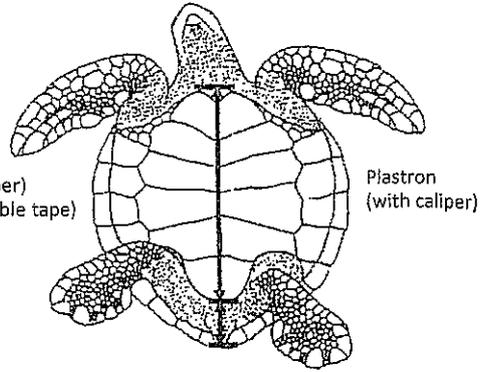
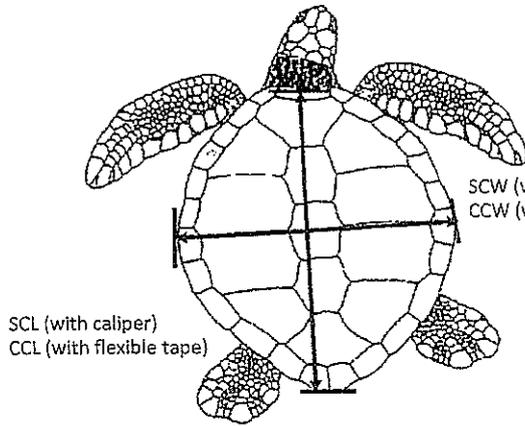
- _____ Turtle ID (# of day, metal, PIT)
- _____ Measurements recorded
- _____ Sat tag PTT ID recorded, switched ON
- _____ Epoxy/Paint are dry
- _____ Check saltwater switches are clear, free from epoxy, paint, tape removed
- _____ Location of capture/release recorded
- _____ Photos

Release Time (24hr format): _____
Area/Site: _____ Garmin ID (last 4 digits): _____
GPS Waypoint #: _____
LAT(dd): _____
LONG(dd): _____

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

13

Draw any abnormalities below:



Overall Tumor Score (circle one): 0 1 2 3 U

Size:	1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

Size:	1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one): 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: _____ mL

Left Shoulder: _____ mL Right Shoulder: _____ mL

Comments:

(w/box → 19 kg) - (box = 5.5 kg) = 13.5 kg
• algae in mouth

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

14

MTBAP DATA FORM

Basking

In-water

Event ID (database): _____

Validation Date: _____

Initials: _____

TURTLE # of Day / MOTOTOOL #: H 205

Species (circle one): C Ei Lo Sc Dc

Sex (circle one): F M U

Observer Names/Initials: A. Usama

Date (MM/DD/YY): 08/28/25

Platform/Method: _____

Handling Start Time (24hr format): 14:45

Capture Location Region: KUKIO Island/Atoll: _____ Area: _____ Site: KUKIO

Garmin ID (last 4 digits): _____ LAT(dd): _____ Water Temp: _____ °C Air Temp: _____ °C

GPS Waypoint #: _____ LONG(dd): _____ Water Depth: _____ m

Straight Carapace Length (SCL): 43.0 cm

Straight Carapace Width (SCW): 34.2 cm

Curved Carapace Length (CCL): 45.0 cm

Curved Carapace Width (CCW): 40.5 cm

Plastron Straight Length (PSL): 38.4 cm

Total Tail Length: 9.1 cm

Tail length (Plastron to Cloaca): 6.5 cm

Mass: 9.0 kg

SAMPLES COLLECTED? None Skin Scute Tumor Blood

FreezerWorks ID #: _____ Initials: _____

Label each vial with sample type and attach left PIT tag ID sticker. Without a sticker, label sample type, date, flipper tag #, location, and species.

of Skin Vials _____ Skin Location _____

of Scute Vials _____ Scute Location _____

of Tumor Vials _____ Tumor Location _____

Blood Collection Time: _____ # Tubes: _____

Volume: _____ mL Preservative: Na/Hep _____ (other)

Tube Type/Size: Glass Plastic 2 mL 6 mL 10 mL

Flipper Tags (2 Types)

LH New

RH New

(Affix new LH PIT tag ID label here)

(Affix new RH PIT tag ID label here)

Location status		PIT/Metal Flipper Tag #																			
LH	NEW																P	1	1	9	9
RH	old	9	8	5	1	1	3	0	0	8	3	1	6	3	0	7					
LH	old	9	8	5	1	1	3	0	0	8	3	1	6	2	6	9					
RH	old	P	I	6	2	7	2														
LH	old	P	I	6	2	7	1														

Tag Location: Right Front Flipper (RF), Left Front Flipper (LF), Right Hind (RH), Left Hind (LH) Tag Status: newly applied tag (New), already present tag (Old)

Biotelemetry Tag

Project (circle one): MITT NBG Tag Type (circle one): Package Satellite (GPS/Argos) Archival (TDR) Acoustic (Sonic/VHF)

Tag Brand (circle one): Wildlife Computers Telonics Desert Star Systems Lotek

Model: _____ Serial #: _____

Attachment Type (circle one): Two-part Epoxy Fiberglass _____ (Other)

Pre-release Checklist

- ____ Turtle ID (# of day, metal, PIT)
- ____ Measurements recorded
- ____ Sat tag PTT ID recorded, switched ON
- ____ Epoxy/Paint are dry
- ____ Check saltwater switches are clear, free from epoxy, paint, tape removed
- ____ Location of capture/release recorded
- ____ Photos

Release Time (24hr format): _____

Area/Site: _____ Garmin ID (last 4 digits): _____

GPS Waypoint #: _____

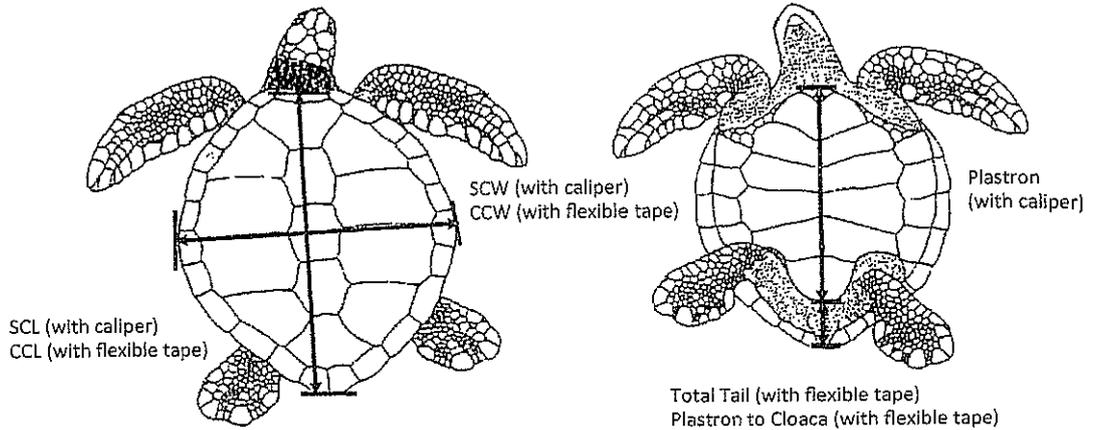
LAT(dd): _____

LONG(dd): _____

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

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Draw any abnormalities below:



Overall Tumor Score (circle one): 0 1 2 3 U

	Size: 1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

	Size: 1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one): 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: _____ mL

Left Shoulder: _____ mL Right Shoulder: _____ mL

Comments:

$(w/bx = 14.5) - (bx = 5.5) = 9.0 \text{ kg}$
 -algae in mouth

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

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MTBAP DATA FORM

Basking In-water

Event ID (database): _____
Validation Date: _____ Initials: _____

TURTLE # of Day / MOTOTOOL #: H-76

Species (circle one): Cm Ei Lo Sc Dc

Sex (circle one): F M U

Observer Names/Initials: Shawn M.

Date (MM/DD/YY): 08/28/25

Platform/Method: Shore

Handling Start Time (24hr format): 1445

Capture Location Region: _____ Island/Atoll: _____ Area: _____ Site: KOKIO

Garmin ID (last 4 digits): _____ LAT(dd): _____ Water Temp: _____ °C Air Temp: _____ °C

GPS Waypoint #: _____ LONG(dd): _____ Water Depth: _____ m

Straight Carapace Length (SCL): 57.7 cm

Straight Carapace Width (SCW): 48.5 cm

Curved Carapace Length (CCL): 61.5 cm

Curved Carapace Width (CCW): 56.2 cm

Plastron Straight Length (PSL): 46.2 cm

Total Tail Length: 14.0 cm

Tail length (Plastron to Cloaca): 9.0 cm

Mass: ~~210.0~~ 210.0 kg

SAMPLES COLLECTED: None Skin Scute Tumor Blood
FreezerWorks ID #: _____ Initials: _____

Label each vial with sample type and attach left PIT tag ID sticker. Without a sticker, label sample type, date, flipper tag #, location, and species.

of Skin Vials _____ Skin Location _____

of Scute Vials _____ Scute Location _____

of Tumor Vials _____ Tumor Location _____

Blood Collection Time: _____ # Tubes: _____

Volume: _____ ml Preservative: Na/Hep (other) _____

Tube Type/Size: Glass Plastic 2 mL 6 mL 10 mL

Flipper Tags (2 Types)

982.000402172194 LH old

(Affix new LH PIT tag ID label here)

(Affix new RH PIT tag ID label here)

RH New

Location status		PIT/Metal Flipper Tag #													
LH	NEW														
RH Old		P	I	L	O	6	7				P	1	1	9	9
RH Old		982.000	4	0	6	1	3	6	0	3	5				
LH Old		982.000	0	1	8	8	4	1	1	7	3	B			
LH New		P	I	9	9	6	6								

Tag Location: Right Front Flipper (RF), Left Front Flipper (LF), Right Hind (RH), Left Hind (LH) Tag Status: newly applied tag (New), already present tag (Old)

Biotelemetry Tag

Project (circle one): MITT NBG Tag Type (circle one): Package Satellite (GPS/Argos) Archival (TDR) Acoustic (Sonic/VHF)

Tag Brand (circle one): Wildlife Computers Telonics Desert Star Systems Lotek

Model: _____ Serial #: _____

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Pre-release Checklist

- Turtle ID (# of day, metal, PIT)
- Measurements recorded
- Sat tag PTT ID recorded, switched ON
- Epoxy/Paint are dry
- Check saltwater switches are clear, free from epoxy, paint, tape removed
- Location of capture/release recorded
- Photos

Release Time (24hr format): _____

Area/Site: _____ Garmin ID (last 4 digits): _____

GPS Waypoint #: _____

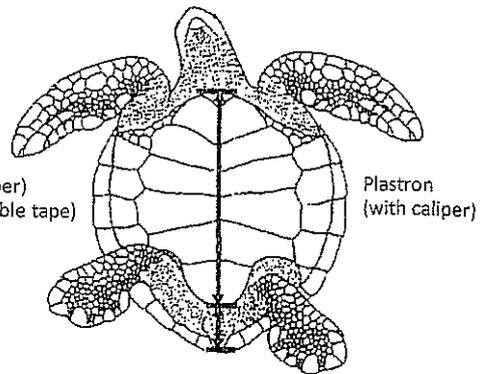
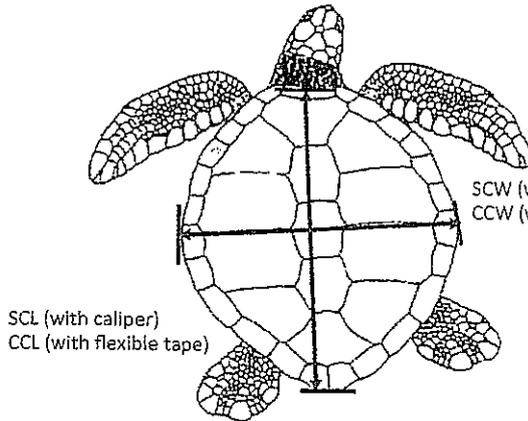
LAT(dd): _____

LONG(dd): _____

Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!

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Draw any abnormalities below:



Overall Tumor Score (circle one): 0 1 2 3 U

	Size: 1	2	3	4
Left eye				
Right eye				
Neck				
Glottis/Tongue				
Other Mouth				
Jaw hinge				

	Size: 1	2	3	4
Right FF				
Left FF				
Right HF				
Left HF				
Tail/Cloaca				
Seam/Scute				

Emaciation Code (circle one): 0 1 2 3 U

Additional Procedures Performed (circle all that apply):

Ultrasound Lavage Laparoscopy

Tetracycline Injection Total: _____ mL
Left Shoulder: _____ mL Right Shoulder: _____ mL

Comments: 32.0 - 6.0 = ~~26.0~~
box 26.0

Mouth check OK

LH → metal tag loss (New metal tag applied)
Important Data. If found, please return to Summer.Martin@noaa.gov or 808-725-5750. Thank You!