
FIVE YEARS OF SEA TURTLE REHABILITATION ON MAUI (HI)

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Sea turtle rehabilitation is a proven tool to aid in the preservation of marine turtle populations regionally. In 2020, The Marine Institute at the Maui Ocean Center (MOCMI) opened the first sea turtle rehabilitation center in Hawaii outside of the federal government. Between 2020 and 2025, this facility served as the only sea turtle rehab center in Hawaii and has rehabilitated turtles from five of the eight major Hawaiian Islands. The primary cause of sea turtle stranding in Hawaii is near-shore recreational fishing practices and accounts for 78.6% (n=1,255) of all strandings encountered by MOCMI during this period. Between 2020-2025, MOCMI rehabilitated 197 sea turtles, 99% of which are Green turtles (*C. mydas*) using a conservative approach that includes flipper massage and red and blue light laser therapy. 84% (n=165) of patients were admitted due to fishing gear interaction, 25.88% (n=51) required surgical amputation, and 97% (n=1,388) of all turtles recovered alive (n=1,421) were successfully returned to the wild. This presentation will cover historical data, rehabilitation approaches used at our facility, lessons learned, and potential paths forward to aid in the management of this threatened population.

FIRST COMPREHENSIVE CLINICAL HEALTH ASSESSMENTS OF THE LARGEST KNOWN GREEN SEA TURTLE (*CHELONIA MYDAS*) ROOKERY IN THE RED SEA

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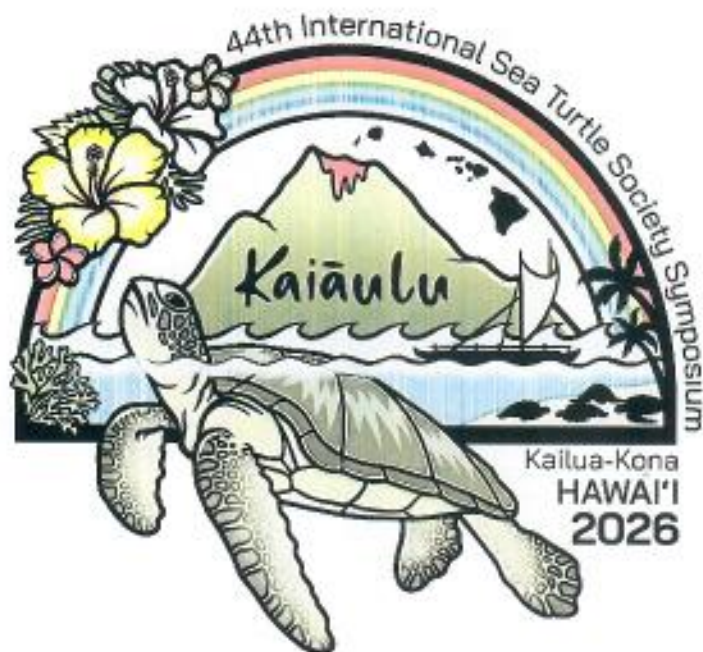
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Introduction: Two species, the green (*Chelonia mydas*) and hawksbill sea turtle (*Eretmochelys imbricata*), nest along the Saudi Red Sea coast varying in abundance and distribution, yet nothing is known about the health of these nesting populations. One of the most significant *C. mydas* rookeries in the Red Sea is located at Ras Baridi on the central Saudi coast. This location is also home to a major cement producing facility that has important national strategic significance. Methods: SHAMS/KAUST Center for Veterinary Care and Ocean Health applies a One Health approach to marine animal and ecosystem fitness. Consistent with this approach, full comprehensive clinical examinations were conducted on twenty nesting *C. mydas* during a single season at Ras Baridi, Kingdom of Saudi Arabia, following the American Society for Veterinary Clinical Pathology (ASVCP) Guidelines. Complete physical and cardiopulmonary and partial neurological examinations were performed on all individuals, and blood, interstitial fluid and colonic samples were collected for analysis. The following indices were measured to establish clinical Reference Intervals (RI) in this cohort: Hematology – Packed Cell Volume, White Blood Cell Count, Heterophils (mature, immature, toxic), Eosinophils (mature, immature, toxic), Basophils, Lymphocytes, Monocytes, Immature

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