

## FIBROPAPILLOMA DOCUMENTATION FORM

Please complete for every turtle exhibiting fibropapillomas and submit with the STSSN report form.

Observer: \_\_\_\_\_ Stranding Date: \_\_\_\_\_

Stranding Number by Day: \_\_\_\_\_ Species: \_\_\_\_\_

**1. Please select sites where tumors are present:**

Left Eye	Right Eye	Inside Mouth	Neck
Base Front Flippers	Base Rear Flippers	Along Front Flippers	Along Rear Flippers
Around Tail	On Carapace	On Plastron	Other _____

**2. How many fibropapillomas are less than 1 cm in diameter? (select one)**

0            1 - 5            greater than 5

**3. How many fibropapillomas are between 1 cm and 4 cm in diameter? (select one)**

0            1 - 5            greater than 5

**4. How many fibropapillomas are between 4 cm and 10 cm in diameter? (select one)**

0            1 - 3            greater than 3

**5. How many fibropapillomas are greater than 10 cm? (select one)**

0            1 - 3            greater than 3

**6. Do you believe that vision was blocked by fibropapillomas? (select all that apply)**

No            Yes, in Left Eye            Yes, in Right Eye            Yes, in Both Eyes

**7. Please describe the size and exact location of any fibropapillomas inside the mouth.**

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**Please be sure to take photographs showing all ventral and dorsal surfaces. Please also take one "head-on" photograph of the turtle. If there is a fibropapilloma inside the mouth, please take a photograph of it. *If the turtle is not a green turtle, or if it has a fibropapilloma inside the mouth, please salvage the turtle and contact the FWC turtle staff through a text message to [SeaTurtleStranding@myfwc.com](mailto:SeaTurtleStranding@myfwc.com) or by calling the FWC Wildlife Alert Hotline at 1-888-404-3922.***