

CROW Case of the Week: Brown Pelican
by Brian Johnson



Several calls came into CROW on December 27, 2009 about a Brown Pelican with a slashed pouch at the docks around Punta Rassa. Later that afternoon island residents Tony and Marissa Rizzo were cleaning their boat at Jensen's Marina on Captiva when they spotted what may have been the same bird. "There were a whole bunch of pelicans there, but we noticed this one with a huge gash," said Marissa. They alerted Stephen Safranek, a Jensen's employee, who brought over a large net, towel, and cage. Tony waved a frozen fish in the water, and soon the group of pelicans was competing for the morsel. Together Tony and Stephen tried to hold back the other pelicans and isolate the injured one. After about ten minutes they were able to net the bird and haul him in. They transferred the pelican to the carrier, and Tony and Marissa drove him to CROW. "He was very feisty in the cage," she said.

"There was blood everywhere in the carrier and on the bird," said Veterinarian Dr. PJ Deitschel, who admitted him at the clinic. "The curved tip at the end of his top beak had broken in the carrier, and hung at a ninety degree angle to the side."

Everyone was surprised at the strange sight of the bird's displaced beak and wondered what on earth could possibly be done. Ever innovative and intuitive, Dr. PJ popped the tip of the pelican's beak back into place. "Let's not bump it !" she said. "The bird was quite rambunctious and stressed," said Dr. PJ. "The gashes in the pouch were huge but we'd seen worse." Staff gave the 7-pound Brown Pelican pain medication, anti-inflammatories, subcutaneous fluids, and Yunnan Paiyou to reduce the bleeding. They took a radiograph to make sure he had not swallowed a fish hook. The following morning the bird was still in a wild mood, but they were able to place him the tub where he could scoop herring out of the water without putting pressure on the tip of his beak.

"For our students and volunteers it was enlightening," said Dr. PJ. "The instant reaction was to suture the pouch in order for him to eat." When Dr. PJ arrived at CROW in 1998 it was the practice at the clinic to suture ripped pouches even though the suture line often opened. But one case turned logic on its head and give them a new treatment strategy. After three surgeries failed to securely sew up a pelican's pouch, Dr. PJ decided to let the bird try to heal on his own. It worked – the skin contracted around the large hole, and eventually the pouch was restored to full working condition. "Their pouches are very elastic," said Dr. PJ. "With supportive care, there is usually no need for surgery."

In the wild, pelicans probably sustain minor gashes on a regular basis from the hazardous business of swallowing dozens of fish. Major gashes, however, very likely compromise their ability to hunt, and may be fatal. Supportive care at CROW -- eating fish out of a tub or bowl -- allows them to maintain normal nutrition levels while they heal.

On January 3 CROW staff moved the pelican to an outdoor cage, where he flew beautifully between the platforms on either side of a large pool. Dr. PJ's improvisational treatment for his beak had succeeded, and they had no further problems with it. CROW released the bird with a group of other pelicans on January 21.

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