Dominica Sperm Whale Health Initiative

DATASHEET

Date: _____ **Time:**_____

GPS Latitude: _____ **GPS Longitude:** _____

Data Collector/ Photographer: _____

Boat Name: _____ **How many other boats are with the whales?** _____

Photos or Video Taken? Yes No **Contact email or phone** _____

Total # of Sperm Whales: _____ **# of Calves**: _____

List Known Whale ID (FlukeBook):_____

Any wounds, scars, parasites, entanglements or abnormal skin conditions? Yes No

Describe wound or skin condition, location on the body and whale identification:

Any emaciated/skinny whales? Yes No **Whale ID:** _____

Behavior of the Whales

☐ Diving ☐ Spyhopping ☐ Brought food to surface

☐ Nursing calf ☐ Interspecies Interaction ☐ Adult Male Presence

☐ Aerial Behaviors/ Jumps ☐ Logging/ resting on surface ☐ Tail Slapping

☐ Traveling

Are there other animals with the sperm whales? Dolphins, other whale species, fish, etc.? Describe below.
