

# Koi: GROSS AND MICROSCOPIC ASSESSMENT FORM

Freely distributed – by Dr. Erik Johnson, DVM – koivet.com & pondrx.com

Assessment for: \_\_\_\_\_  In-house  
Examiner: \_\_\_\_\_  Not Applicable

## Historical Notes

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Number affected  | <input type="checkbox"/> Pond Volume   | <input type="checkbox"/> Alkalinity                    |
| <input type="checkbox"/> Number dead      | <input type="checkbox"/> Pond Temp     | <input type="checkbox"/> Water Clarity                 |
| <input type="checkbox"/> New fish lately? | <input type="checkbox"/> Ammonia Level | <input type="checkbox"/> Total Inches Fish (1" per10g) |
| <input type="checkbox"/> When?            | <input type="checkbox"/> Nitrite Level | <input type="checkbox"/>                               |
| <input type="checkbox"/> Quarantined?     | <input type="checkbox"/> pH Level      | <input type="checkbox"/>                               |

## Gross Examination

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Eyes <input type="checkbox"/> Norm. <input type="checkbox"/> Bulging                         | <input type="checkbox"/> Fins   | <input type="checkbox"/> Body Bulges <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <input type="checkbox"/> White Pupils <input type="checkbox"/> Damaged  | <input type="checkbox"/> Describe   | <input type="checkbox"/> Describe   |
| <input type="checkbox"/> Mouth <input type="checkbox"/> Normal <input type="checkbox"/> Open <input type="checkbox"/> | <input type="checkbox"/> Body Shape   | <input type="checkbox"/> Body Sores <input type="checkbox"/> Yes <input type="checkbox"/> No  |
| Rotten <input type="checkbox"/> Damaged   | <input type="checkbox"/> Describe   | <input type="checkbox"/> Describe   |
| <input type="checkbox"/> Gills <input type="checkbox"/> Red <input type="checkbox"/> Pale                             | <input type="checkbox"/> Body Mass <input type="checkbox"/> Normal                          | <input type="checkbox"/> Redness <input type="checkbox"/> Yes <input type="checkbox"/> No     |
| <input type="checkbox"/> Rotten <input type="checkbox"/> Green <input type="checkbox"/> Slimy                         | <input type="checkbox"/> Lean <input type="checkbox"/> Skeletal                             | <input type="checkbox"/> Describe   |
| <input type="checkbox"/> Mucus <input type="checkbox"/> Excess <input type="checkbox"/> Scant                         | <input type="checkbox"/> Tail <input type="checkbox"/> Complete                             | <input type="checkbox"/> Argulus  |
| <input type="checkbox"/> Normal <input type="checkbox"/> Patches  | <input type="checkbox"/> Red <input type="checkbox"/> Rotten <input type="checkbox"/> Split |   |
| <input type="checkbox"/> Lerneia  | <input type="checkbox"/> Ergasilus  | <input type="checkbox"/>  |

## Body Scrapes

- |   |                                      |  |
|---|--------------------------------------|--|
| <input type="checkbox"/> Flukes / Trematodes  | <input type="checkbox"/> Ich         | <input type="checkbox"/> Chilodonella        |
| <input type="checkbox"/> Costia / Ichthyobodo | <input type="checkbox"/> Trichodina  | <input type="checkbox"/> Ambiphrya           |
| <input type="checkbox"/> Tetrahymena          | <input type="checkbox"/> Glossatella | <input type="checkbox"/> Hexamita            |
| <input type="checkbox"/> Epistylis            | <input type="checkbox"/> Scyphidia   | <input type="checkbox"/> Trichophrya         |
| <input type="checkbox"/> Pollen               | <input type="checkbox"/> Algae       | <input type="checkbox"/> Fungi / Saprolegnia |
| <input type="checkbox"/>                      | <input type="checkbox"/>             | <input type="checkbox"/>                     |

## Gill Biopsy / Scrapes

- |   |                                      |  |
|---|--------------------------------------|--|
| <input type="checkbox"/> Flukes / Trematodes  | <input type="checkbox"/> Ich         | <input type="checkbox"/> Chilodonella        |
| <input type="checkbox"/> Costia / Ichthyobodo | <input type="checkbox"/> Trichodina  | <input type="checkbox"/> Ambiphrya           |
| <input type="checkbox"/> Tetrahymena          | <input type="checkbox"/> Glossatella | <input type="checkbox"/> Hexamita            |
| <input type="checkbox"/> Epistylis            | <input type="checkbox"/> Scyphidia   | <input type="checkbox"/> Trichophrya         |
| <input type="checkbox"/> Pollen               | <input type="checkbox"/> Algae       | <input type="checkbox"/> Fungi / Saprolegnia |
| <input type="checkbox"/>                      | <input type="checkbox"/>             | <input type="checkbox"/>                     |

## Samples Collected / Sent

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Liver <input type="checkbox"/> Tissue <input type="checkbox"/> Swab      | <input type="checkbox"/> Kidney <input type="checkbox"/> Tissue <input type="checkbox"/> Swab | <input type="checkbox"/> Spleen <input type="checkbox"/> Tissue <input type="checkbox"/> Swab       |
| <input type="checkbox"/> Intestine <input type="checkbox"/> Tissue <input type="checkbox"/> Swab  | <input type="checkbox"/> Gonad <input type="checkbox"/> Tissue <input type="checkbox"/> Swab  | <input type="checkbox"/> Air sac wall <input type="checkbox"/> Tissue <input type="checkbox"/> Swab |
| <input type="checkbox"/> Heart <input type="checkbox"/> Tissue <input type="checkbox"/> Swab      | <input type="checkbox"/> Blood <input type="checkbox"/> Sample <input type="checkbox"/> Swab  | <input type="checkbox"/> Gall Bladder <input type="checkbox"/> Tissue <input type="checkbox"/> Swab |
| <input type="checkbox"/> Peritoneum <input type="checkbox"/> Tissue <input type="checkbox"/> Swab | <input type="checkbox"/>  | <input type="checkbox"/>  |

## Send to: [samples.koilab.com](http://samples.koilab.com)

**PCR** – Swab test of dying fish for Koi Herpes Virus – Collect on sterile swab from organ or blood and freeze and ship overnight.

**In Situ Hybridization** – Finds virus in cells of infected fish. 10% buffered formalin fixed tissues sent to [samples.koilab.com](http://samples.koilab.com)

**KHV Agglutination Test** – Frozen blood samples in red top tubes from live fish, shows antibodies to KHV

**Culture and Sensitivity** – Bacterial culture and what they're sensitive to, sent on swab overnight on ice, but dry. Collected from an internal organ from sacrificed fish or aseptically collected blood from live fish.

**Histopathology** – Sample of tumor or organ put in 10% buffered formalin and sent with descriptive to [samples.koilab.com](http://samples.koilab.com)

Use of this form expressly implies that any user of this form acknowledges and accepts that this form is not intended to render a "diagnosis" nor does it replace the advice or services of a licensed veterinarian who treats ornamental fish. In fact, the document is a guide to allow the hobbyist to collect thorough details and data of value to the practitioner if such a professional should be consulted in the above case. No prescription can be made based on the above data.

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