

# AdriAquaNet

Enhancing Innovation and Sustainability in Adriatic Aquaculture

Deliverable WP4 task 4.3

Operational Welfare Indicators (OWIs) of Sea bass (*D. labrax*) and Sea bream (*S. aurata*) breeding in sea cages

## CHECK LIST

Legnaro, 30.06.2022

**Operational Welfare Indicators** are practical Welfare Indicators that can realistically be used on sea bass and bream farm. They can be **Environment based** (observations made on the environment, infrastructure and processes), **Animal based** (group and individual - observations made on or from the animals) and **Laboratory based** (analysis performed by specialized laboratories like cortisol, catecholamine, lysozyme, bilirubine, etc).

The 25 practical OWIs (5 environmental, 8 group and 12 individual based) for sea bass and sea bream reared in sea cages are summarized in the following table:

OPERATIONAL WELFARE INDICATORS (OWIs)		
ENVIRONMENT BASED	ANIMAL BASED	
	GROUP BASED	INDIVIDUAL BASED
<ul style="list-style-type: none"> <li>• Oxygen (mg/L)</li> <li>• Temperature (°C)</li> <li>• Salinity (ppt)</li> <li>• Turbidity</li> <li>• Other.....</li> </ul>	<ul style="list-style-type: none"> <li>• Appetite</li> <li>• Growth</li> <li>• Mortality</li> <li>• Abnormal swimming</li> <li>• Abnormal behavior</li> <li>• Diseased fish</li> <li>• Emaciated fish</li> <li>• Other.....</li> </ul>	<ul style="list-style-type: none"> <li>• Emaciation state</li> <li>• Fin damage</li> <li>• Skin loss/ulcers</li> <li>• Eye status (exophtalmus, haemorrhagies)</li> <li>• Deformities</li> <li>• Abnormal pigmentation</li> <li>• Opercular damage</li> <li>• Mouth/Jaw damage</li> <li>• Gill status</li> <li>• Ectoparasites</li> <li>• Feed in intestine</li> <li>• Visceral fat</li> </ul>

Each indicator is assigned a score (0-1) indicating the presence or absence (Non Conformity) of the welfare indicator. The environmental parameters have a range based on the characteristics of the farm and fish species: if the measurement of the environmental parameter is within the range, a score of 0 will be given; if, on the contrary, the measured value is out of range, that parameter will be assigned a score of 1. For group or individual based indicators if present (Non Conformity) the score will be 1; if it is not present, the score will be 0 (see also the “Manual for use on field Operational Welfare Indicators (OWIs) of Sea bass (*D. labrax*) and Sea bream (*S. aurata*) breeding in sea cages).



The table below (**Grid of evaluation**) shows the scores and the relative welfare situation of the animals.

SCORE (NC)	WELFARE SITUATION	SUGGESTION
$0 \leq NC \leq 5$	<b>OPTIMAL WELFARE</b>	Keep it up!
$6 \leq NC \leq 10$	<b>GOOD WELFARE</b>	Check the environmental parameters, the density and the possible presence of viral, bacterial or parasitic diseases.
$11 \leq NC \leq 15$	<b>LOW WELFARE</b>	Check the environmental parameters, check the doses of feed administered and exclude the presence of viral, bacterial or parasitic diseases by sending samples to the laboratory.
$16 \leq NC \leq 25$	<b>BAD WELFARE</b>	Review the management of the farm, check the environmental parameters, check the doses of feed administered and exclude the presence of viral, bacterial or parasitic diseases by sending samples to the laboratory. Do blood and / or tissue tests on animal samples to check the presence of stress biomarkers.

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In column 3, there are some suggestions on how to solve negative welfare indicators. If the negative situation persists, it will be advisable to contact the competent veterinarian. He will take some samples to be sent for laboratory analyses in order to exclude the presence of viral, bacterial and parasitic diseases. If deemed necessary, blood and/or tissue samples can be analysed for the presence of stress biomarkers, such as cortisol, catecholamines, Heat Shock Protein 70, bilirubin, immunoglobulins, etc.

We suggest filling out the OWIs and data collection sheet at least once a month. It is recommended to keep track of the measurement of the OWIs in order to demonstrate the health and welfare status of the farm.



## CHECK LIST

ENVIRONMENT BASED OWIs							
Date	Species	Fish age	Parameter	Optimal range	NC	Corrective action	Final remarks
_/_/___	<input type="checkbox"/> Sea bass <input type="checkbox"/> Sea bream	Months _____	Oxygen (mg/L) _____	6-8	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Aeration <input type="checkbox"/> Liquid oxygen <input type="checkbox"/> Feed reduction <input type="checkbox"/> Net cleaning / changing <input type="checkbox"/> Other _____	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
Cage Number		Weight (g) _____	Temperature (°C) _____	18-26	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
N° _____		Size (cm) _____	Salinity (ppt) _____	30-35	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
			Turbidity (NTU or m) _____	0,12 NTU or 10 m	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
			Other _____		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved	

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GROUP BASED OWIs							
Date	Species	Fish age	Parameter	Optimal	NC	Corrective action	Final remarks
__/__/__	<input type="checkbox"/> Sea bass <input type="checkbox"/> Sea bream	Months _____	Appetite <input type="checkbox"/> High <input type="checkbox"/> Normal <input type="checkbox"/> Lower <input type="checkbox"/> Absent	Normal	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Exclude diseases <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Other _____	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
<b>Cage Number</b> N° _____							
<b>Number of fish</b> N° _____		Weight (g) _____	Growth <input type="checkbox"/> High <input type="checkbox"/> Normal <input type="checkbox"/> Lower	Normal	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Exclude diseases <input type="checkbox"/> Other _____	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
		Size (cm) _____	Mortality <input type="checkbox"/> < 5 % <input type="checkbox"/> 5-10% <input type="checkbox"/> > 10%	< 5%	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Exclude diseases <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Therapy <input type="checkbox"/> Other _____	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved

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			<p>Abnormal swimming</p> <p><input type="checkbox"/> Present <input type="checkbox"/> Absent</p>	Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Exclude diseases <input type="checkbox"/> Other <hr/>	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
			<p>Abnormal behavior</p> <p><input type="checkbox"/> Present <input type="checkbox"/> Absent</p>	Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Reduce density <input type="checkbox"/> Other: <hr/>	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
			<p>Diseased fish</p> <p><input type="checkbox"/> Present <input type="checkbox"/> Absent</p>	Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Therapy <input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Reduce density <input type="checkbox"/> Other <hr/>	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved

			Emaciated fish <input type="checkbox"/> Present <input type="checkbox"/> Absent	Absent <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Exclude diseases <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Other _____	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
			Other _____ <input type="checkbox"/> Present <input type="checkbox"/> Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Exclude diseases <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Reduction density <input type="checkbox"/> Other _____	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved



INDIVIDUAL BASED OWIs							
Date	Species	Fish age	Parameter	Optimal	NC	Corrective action	Final remarks
__/__/__	<input type="checkbox"/> Sea bass <input type="checkbox"/> Sea bream	Months _____	Emaciation state  <input type="checkbox"/> Present <input type="checkbox"/> Absent	Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Exclude diseases <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Other _____	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
Cage Number  N° _____							
Number of fish  N° _____		Weight (g) _____	Fin damage  <input type="checkbox"/> Present <input type="checkbox"/> Absent	Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Excluded diseases <input type="checkbox"/> Reduction density <input type="checkbox"/> Other _____	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
		Size (cm) _____	Skin loss / ulcers  <input type="checkbox"/> Present <input type="checkbox"/> Absent	Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Exclude diseases <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Reduction density <input type="checkbox"/> Other _____	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved

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			Eye status (i.e.: exophthalmus, haemorrhages)  <input type="checkbox"/> Present <input type="checkbox"/> Absent	Absent  <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Exclude diseases <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Other	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
			Deformities  <input type="checkbox"/> Present <input type="checkbox"/> Absent	Absent  <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Other:	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
			Abnormal pigmentation  <input type="checkbox"/> Present <input type="checkbox"/> Absent	Absent  <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Exclude diseases <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Other	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
			Opercular damage  <input type="checkbox"/> Present <input type="checkbox"/> Absent	Absent  <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Other	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved



			Mouth/Jaw damage <input type="checkbox"/> Present <input type="checkbox"/> Absent	Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Change in feed <input type="checkbox"/> Selection <input type="checkbox"/> Other	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
			Gills status <input type="checkbox"/> Bright red <input type="checkbox"/> Red with haemorrhagies <input type="checkbox"/> Pale <input type="checkbox"/> Pale / Red with necrosis	Bright red	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Exclude disease <input type="checkbox"/> Selection <input type="checkbox"/> Other	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
			Ectoparasites <input type="checkbox"/> Present <input type="checkbox"/> Absent	Absent	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Therapy <input type="checkbox"/> Water testing <input type="checkbox"/> Fish examination <input type="checkbox"/> Selection <input type="checkbox"/> Other	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
			Feed in intestine <input type="checkbox"/> Present <input type="checkbox"/> Absent	Present	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Change in feed <input type="checkbox"/> Fish examination <input type="checkbox"/> Selection (density) <input type="checkbox"/> Other	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved
			Visceral fat <input type="checkbox"/> Too much <input type="checkbox"/> Normal <input type="checkbox"/> Low	Normal	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Change in feed <input type="checkbox"/> Fish examination <input type="checkbox"/> Selection (density) <input type="checkbox"/> Other	<input type="checkbox"/> Resolved <input type="checkbox"/> Not resolved

Total score: ...../25



Score obtained / Final evaluation

- $0 \leq NC \leq 5$  / Optimal welfare
- $6 \leq NC \leq 10$  / Good welfare
- $11 \leq NC \leq 15$  / Low welfare
- $16 \leq NC \leq 25$  / Bad welfare

The fish farmer/operator: ..... Signature: .....

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Recommendation from the consultant (if involved):

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 .....  
 .....  
 .....

Recommendation from the Competent Authority (if involved):

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 .....  
 .....  
 .....

Date: ...../...../.....

